The technical nature of laparoscopy, and the required specific laparoscopic tools and medical skills, may render this approach difficult in developing countries. We hypothesized that laparoscopy may be developed in the Cliniques Universitaires de Kinshasa (CUK), and may be cost-effective. The final aim of this program is to bring the benefits of laparoscopy to the DRC population, by allowance of adequate training on the UNIKIN personnel, including anaesthetists, surgeons and nurses, who in the future will have to locally form the DRC medical and nursery students.

With the financial support from Wallonie-Bruxelles International (WBI), a complete CUK team, including a surgeon (2 years training in Belgium), an anaesthetist and nurses, were trained in Belgium and then afterwards in DRC. The laparoscopic equipment was sent to Kinshasa, and three theoretical and practical missions of Belgian teams were organised.

Over a 2 year period, 116 laparoscopic procedures were performed, including 32 appendectomies, 41 cholecystectomies, 11 hernia repairs, 9 laparoscopy explorations for peritoneal carcinoma assessment and biopsy, 8 procedures for catheter of dialysis peritoneal, 5 gynaecologic procedures, and 10 other miscellaneous procedures.

A joined approach, taking into account on one hand the training of the skills locally trained to adapt itself to some difficulties; on the other hand institutions of scientific support and a real program and local will of development of this new procedure are the wages of development, accessibility and durability of such news approach in developing countries. All University and non-University team willing to join such a project are welcome.