GENERAL

Elective report

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I was able to carry out my elective in Cusco which is located in the south-east of Peru which is a popular area for tourism. I was placed at Antonio Lorena Hospital which was an old traditional public hospital that serves the population of the surrounding towns and villages. I will discuss the prevalent conditions in Peru that I witnessed, how the services are organized and the clinical experience I gained during my 5 week placement. Before traveling to Peru I was interested in seeing the psychiatric conditions however I was not able to and so spent my time on the internal medicine ward which was a great pleasure.

Objective 1: What are the prevalent conditions in Peru? How do they differ from the UK? The prevalent conditions in Peru include yellow fever, malaria and Leishmaniasis which I started reading up about prior to arriving in Peru. On my first day at the hospital I realized that I could not find any patients like this and this was explained to me by the consultant who told me that patients suffering from such diseases were treated in the capital of Peru, Lima. Most of the patients I saw had complex medical problems that had reached a very late stage which is because a lot of patients live in the Jungle area where there is a lack of in the United Kingdom who are usually picked up earlier in the disease progression. Another reason that patients present extremely late is that the local people have their own beliefs about treating the ill. Many believe in the god of medicine, "Tumi" and one of the patients body for 72 hours in the belief that the Guinea pig on the affected part of the patients would be cured.

Objective 2: How are the medical systems organized and delivered? How does this differ from the UK?

I found it very interesting to observe the differences between the medical systems in Cusco compared to the United Kingdom. The most obvious difference I noticed is the lack of basic hygiene in Cusco. I observed that the consultants and nurses would only wash their hands at the end of the ward round rather than before and after seeing every patient. I also observed one of the doctors perform an ascitic tap without wearing gloves, did not wash his hands after the procedure and then took blood from another patient. Incidents like this are unheard of in the United Kingdom and was the most obvious difference between the two systems. After viewing this I am grateful of the guidelines in place in the United Kingdom and I hope that in the future guidelines will be put in place in Cusco though due to the lack of funding changes like this may not happen. It was clear that hospital in the United Kingdom. The X-rays were still read as plain films and patients who needed MRI scans had to travel the capital and so consultants are heavily reliant on their clinical skills to minimize the use of these expensive tools.

Objective 3: Gain more confidence and skill at taking histories and examinations At Antonio Lorena Hospital the healthcare professionals were extremely friendly and would show me interesting patients to examine. I was fortunate to see patients with clinical signs that I have had never witnessed before. For example I performed a cardiovascular examination on a patient with infective endocarditis who had Osler's nodes and Janeway lesions. As I was able to examine patients daily I felt more confident however due to my Spanish being very limited I did find it hard to take histories and sometimes had to rely on the other medical students to translate for me. Overall though I felt that this was an invaluable clinical experience that will hopefully make me a more confident and competent foundation doctor.

Objective 4: Be able to communicate to a limited amount in Spanish. Reflect on my time in

Before going on this elective I had never learnt any Spanish and was excited to hear that I would be having 20 hours of Spanish lessons provided by the elective company. The lessons were taught at the hotel and the tutor was extremely friendly and helpful. I found it hard at first but slowly I began to improve and found it a little easier to communicate with the local people of Cusco. I was lucky that some of the other medical students on the elective could speak Spanish and so I was able to learn from them and at times they would translate for me if I didn't understand. After a few weeks I was able to order at restaurants and carry out very basic conversations but found it difficult to take a history from a patient. I think if I was able to stay in Cusco for a few more months I would have been able to pick up the language better. I met several Americans who had settled in Cusco who were able to speak the language fluently after a few years and this gave me some encouragement.

I had an enjoyable experience in Peru and was glad that I went with "Medics away" as I was able to meet many other medical students from different universities. I felt that I made me new friends for the future and that we all got on together and this was especially true when we completed the Inca trail. The Inca trail was 45 km and the final destination was Machu Picchu which is a famous ancient temple. The trip was physically tough but by the end of the fourth day I really felt proud of myself and the group that we had managed to complete it. From a medical perspective I feel that the elective has provided me with greater confidence to start working as a foundation year doctor and that my history and examination skills have improved over the 5 weeks. Overall the elective has been a great experience and I am very grateful that I was able to do it in Peru.