

ELECTIVE (SSC5b) REPORT (1200 words)

A report that addresses the above four objectives should be written below. Your Elective supervisor will assess this.

Introduction

The Luton and Dunstable Hospital is a large district general hospital providing exceptional medical care for people in North Hertfordshire, Bedfordshire and areas of Buckinghamshire. As a result, this hospital covers a large population and enabled me to witness a wide range of conditions. Having studied in London, this placement also gave me a different perspective of medical practice outside of London.

In addition to this, I chose to complete my student selected placement in ENT which is a specialty that many medical students do not receive much training in during their university life. As a result, I felt it would be beneficial to gain more knowledge of the subject and enhance my understanding of conditions and how to treat them.

Completing this placement has enabled me to experience the Luton and Dunstable hospital as both a clinician and a patient, as this is my local hospital. I found this incredibly humbling to empathise with patients as well as developing a deeper understanding of what is required of a Doctor on a day to day basis

To observe and learn of different conditions seen in Ears Nose Throat within England

On placement, I have been fortunate to see patients both on the wards and in clinic. In doing so, I have been able to witness a variety of conditions. Some patients presented with acute problems such as epistaxis and other patients presented with stable conditions, for example, those who have a deviated nasal septum.

With regards to epistaxis, I found it incredibly useful to learn how to pack a nose, as well as being informed to always check a patient's drug history. This is due to the fact that a patient may be on an anti-coagulant which may need stopping if the bleeding continues.

Another case I saw, was of a patient who had loss of their sense of smell. It was interesting to view their CT scan and observe the congestion within their sinuses that could potentially have led to their symptoms. In addition to this, it was useful to observe the consultation as I learnt to inform patients of

how to improve their safety in and around their homes once they lose their sense of smell. Having their home checked by the fire department for gas leaks and ensuring that patients read the “use by” date on foods are two things I would not have initially considered informing a patient about, however on reflection, these are essential to everyday life.

There were also cases of patients presenting with a deviated nasal septum. I was taught how to examine a patient’s nose and what procedures are available should the patient require surgical intervention. I also learnt of protocol requiring a patient to use a steroid spray for 6 months before being offered surgery. Seeing this first hand as a real case allowed me to retain the information I learnt and to have more awareness of how to examine and treat a patient with a deviated nasal septum.

I have been very lucky to be placed with Doctors who explained pathology and treatment plans to me. In addition to this, I felt comfortable that I could ask anyone for further information and was able to develop my clinical skills that I may require for work as an F1, for example, history taking, examinations of noses and I was able to assist in packing of a nose. The team was incredibly supportive and approachable throughout my placement.

Observe treatment options that are available in the UK and consider how this will differ in other parts of the world

While on placement, I observed treatments offered to patients on the wards, in clinic and in theater.

It was interesting to see what resources were available on the wards and to learn more of different wound packing procedures. For example: the use of Medihoney bandages as an antibacterial dressing for an abscess. I had completed part of my elective in Vietnam, so when I compare the resources available in the UK, there is a striking difference. The resources in Vietnam were a lot more scarce and wound care was maintained using iodine solution and no dressings where possible.

In addition to this, certain procedures such as a septorhinoplasty were not regularly done in Vietnam due to the fact that the patients were unable to afford the procedure and therefore more likely to not seek medical help. I feel the British public is incredibly fortunate to have the National Health System which prevents us neglecting our health due to financial concerns.

Learn more about public health's role in preventing hospital admissions

There have been many public health posts to enhance awareness of symptoms that patients may experience if they develop cancer.

For example, the Throat Cancer Campaign initiated by the Humber and Yorkshire Coast Cancer Network (HYCCN) to increase awareness of symptoms patients may present with. For example: there are 6 signs a patient should be aware of: a lump in the neck, change in voice, HPV infection of the patient or their partner, globus pharyngeus, hemoptysis and persistent sore throat. By encouraging patients to see a Doctor as soon as they develop these signs will help diagnose and treat the patient sooner. Though with throat cancer, some of these signs present once the cancer has already become advanced.

HYCCN conducted a study in 2010 identifying 87% of head and neck cancers were patients ages 50 years and over. Further to this, 80% were male, of which throat cancer was 50%. Looking at these statistics, you can identify what risk factors are involved: male and aged over 50 years. Later, this information could be used to identify a cohort of patients for routine screening, however that is not currently done, though it is recommended that the patient regular checks their mouth and throat.

In addition to this, the stop smoking campaign has had a huge effect on the numbers of patients presenting with oral and throat cancers. By encouraging patients to stop smoking, one risk factor is removed and this could potentially improve prognosis if patients develop cancer from smoking.

Gain more insight into ENT and understand more of what this line of work involves if I was to pursue this in the future.

Ears Nose and Throat as a specialty is not one I have had a lot of experience in throughout medical school, as a result this placement have proven to be incredibly enlightening and has helped my understanding and skill base in this specialty.

I have been incredibly fortunate to be under a very supportive team. The Doctors as well as other MDT members have advised me well and explained cases to me thoroughly, ensuring I fully understood what was happening and why it was done.

It has been insightful to see this specialty from several aspects: in clinics, on the wards and in theatres. This has given me a more all rounded impression of what the job entails and therefore I am now in better stead to consider this specialty as a profession in the future.