## **ELECTIVE (SSC5b) REPORT (1200 words)**

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

## **Obstetrics healthcare in East London**

I was fortunate enough to spend my 6-week elective at Newham Hospital, in East London. I split my time equally between the antenatal care unit, delivery ward and the assisted fertility clinic.

The hospital is a 344-bed facility, which is now part of the bigger Barts Healthcare NHS Trust. It caters the health needs of a very diverse local population of around 250,000. The borough is considered one of the poorest in London, with immigrants and ethnic minorities making the largest percentage of its residents. In addition to this, the borough is relatively young, with a higher-than-average percentage of those aged 18-39. This translates to a very heavy use of the Obstetrics services, including one of the busiest labour wards in London with a birth rate of 76.6 per 1000 women aged 15-44.

Obstetrics complications in Newham, East London, from a public health perspective.

The antenatal care unit is a large part of the hospital, staffed by doctors, midwives and nurses. It aims to diagnose early and manage high risk pregnancies. Most of the expectant mothers are either South Asians or Afro-Caribbeans. As a result, diabetes mellitus and gestational hypertension are much more common than the UK average. There are dedicated clinics for the management of both gestational and pre-existing diabetes. Patients are referred here either because of a positive personal or family history, or after being diagnosed during routine antenatal work-up. These clinics are run by consultant obstetricians, assisted by specialist nurses, dietitians and midwives. A large part of every consultation is dedicated to patient's education and health promotion. The treatment offered is stepwise, where diet measures are tried first. More drastic choices are considered when these fail.

I have also spent some time in the fertility unit, which is run at the Gateway Surgical Centre, a separate part of the hospital. One of the commonest reasons for referral is Polycystic Ovarian Syndrome as a cause of subfertility. Patients are given drugs to stimulate ovulation, and are then reviewed midway through their cycle for an ultrasound scan. They are then told whether they should try for a pregnancy during that particular cycle or not. Referral to the unit is usually done by the general practitioner in Primary Care.

A key NHS public health message is to promote healthy pregnancies, which in turn would result in healthier babies. This was evident in every consultation, particularly where the pregnancy was deemed high risk. Advice on taking folic acid and maintaining a good diet is repeatedly emphasised. Patients are offered appointments with the dietitian if they are found to have gestational diabetes. They are also provided with leaflets and education material on diet, exercise, immunisation, how to prepare for labour and breastfeeding etc. The dangers of smoking and drinking are explained early on, and referral to cessation services are offered where appropriate.

**Interprofessional care in Obstetric** 

Obstetrics is perhaps the field of medicine which can count the widest range of healthcare professionals involved. This includes nurses, healthcare assistants, midwives, midwife assistants, obstetricians, anaesthetists, ODPs etc. Each one of these professionals play a key role in delivering the service.

Labour wards are by their nature very fast paced, and this can be stressful to everyone. Unfortunately, expectant mothers and their babies can deteriorate at any moment, and at any time of day. Therefore, tensions can sometimes arise between different teams. In addition to this, I felt the department was short staffed at times, which meant occasionally some members of staff would go without a break for a long period of time. Despite this, morale and job satisfaction seems to be high, especially with the arrival of every new baby.

Learning points from this elective for my future plans

I have enjoyed immensely my time at Newham. I found the staff very courteous, helpful and welcoming. My mentor facilitated my stay there, and did his best to resolve any problems I encountered.

My career goal is to branch into reproductive medicine. I find this field fascinating and differs completely from mainstream medicine, which deals mainly with chronic disease and illness management. It is a tremendous privilege to be able to assist couples in achieving their dream of parenthood. It is also an area where research is currently thriving, as a large proportion of infertility cases are still considered "unexplained", and I feel these are optimal conditions where I can prosper.