

ELECTIVE (SSC5b) REPORT (1200 words)

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

I had a brilliant time during my three-week elective placement on radiology at the Royal Melbourne Hospital. I had broad exposure to the daily working life of a radiologist in Australia, and, more generally, I learnt about living and working in Melbourne. My elective, being just three weeks long (but having spent almost a month here in total), gave me a unique insight into what it is like to be a Melburnian local as opposed to coming here as a tourist on holiday. Melbourne is a city to be lived rather than briefly visited on holiday, as there is so much to see and do in the city and its beautiful surrounding areas.

My first objective concerned the differences in diseases in Australia and how it compares to the UK. Australia, being a highly developed country like the UK, suffers from Western diseases such as obesity, type 2 diabetes (which is particularly prevalent amongst Aboriginal Australians), and cardiovascular disease. However, there are some key differences to take note of. Firstly, Australia's climate is much sunnier than the UK, thus there is a higher prevalence of skin cancers, primarily melanoma. An interesting point here is that even though the UK has significantly lower rates of melanoma, we have a significantly greater proportion of people dying from the disease. This is thought to be due to the success of the SunSmart public health campaign here in Australia, which has changed attitudes towards sunbathing and sun protection. Additionally, Australia has the world's highest age-standardised cancer rate in the world, however this is largely skewed by the high rates of skin cancer, particularly in the more northern regions where UV levels are highest. Rates of COPD and occupational lung diseases are also high in Australia, however the percentage of smokers in Australia is slightly lower than the UK. I also noticed quite a high prevalence of odd parasitic diseases during my time on radiology, which is probably due to the high degree of tourism to, and migration from, tropical Asian countries. Overall, though, the two countries are broadly similar in their prevalence of disease.


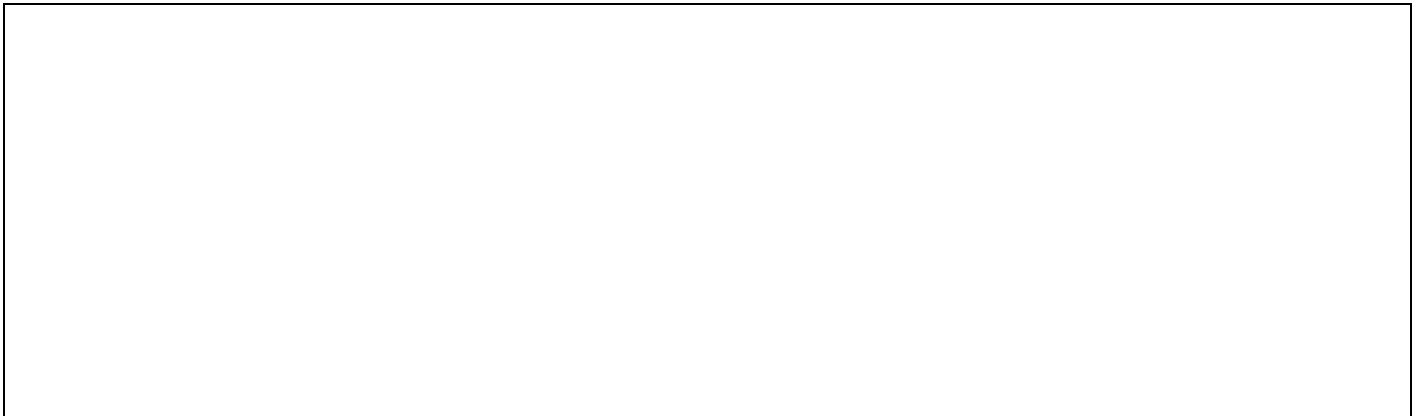
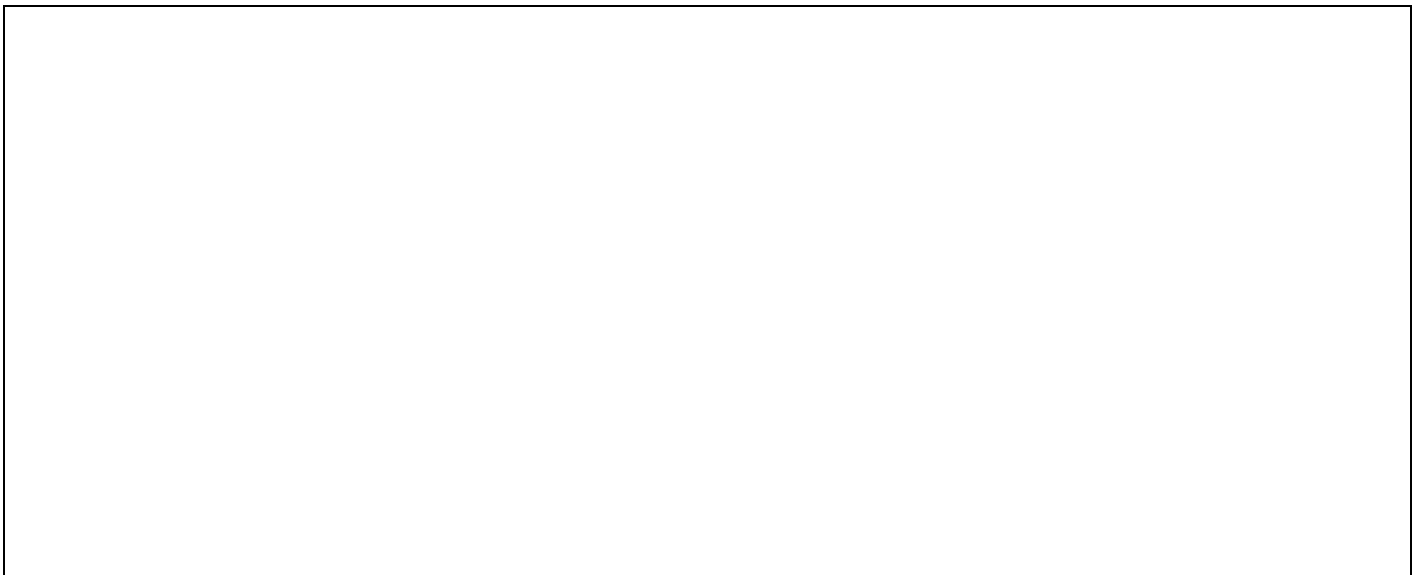
My second objective concerned learning about the organisation of radiology services in Australia. During my time in the radiology department, I noticed a high degree of multidisciplinary team involvement, with many different meetings taking place during the week. These meetings had a clear chair, or at least someone who seemed to take the lead in the discussion, which I feel was different to how MDT meetings are run in the UK where there is more of a communal discussion. I felt that having a chair to the meeting enabled it to run much more smoothly than my previous experiences in the NHS. These meetings were useful for the different teams to share expertise and to facilitate complex planning for patients. I haven't had much exposure to radiologists in the UK, only really from a radiographer's perspective, but I noticed that junior registrars were able to get involved with interventional procedures much earlier than I would have expected in the NHS, for example by performing nerve root injections or CT-guided biopsies. I have only seen IR consultants doing this in the UK, but perhaps my viewpoint is a result of my brief exposure. IR services at the Royal Melbourne Hospital included general body IR (insertion of drains and catheters, vascular interventions, and interventional oncology) and neuro-IR (coiling/stenting of cerebral aneurysms).

The third objective concerned the delivery of healthcare in Australia more generally. Healthcare here revolves around Medicare, which is a government-funded programme that ensures all eligible members are provided free essential healthcare, regardless of a patient's socioeconomic background. This system is then further supplemented by a large private healthcare sector that gives patients with private health insurance greater choice in terms of treatment, faster access to care and coverage for non-essential healthcare, such as cosmetic treatments. During my time on radiology, I was surprised by several instances where this free essential healthcare coverage was not entirely the case. For example, I came across a couple of patients who needed outpatient MRI scans but couldn't afford them despite them being classed as "essential". This is because outpatient MRI scans are not covered by Medicare, or even often by private healthcare insurance, unless they are part of a special scheme called the Medicare Benefit Schedule. MRI scans can cost from \$300-\$1000, which is no small sum. Additionally, from speaking to locals, I learned that the waiting times for operations or procedures funded by Medicare can be very long, which is not dissimilar to how it is in UK. Healthcare needs greater investment globally as the average age of the population ever increases, putting strain on healthcare systems worldwide.

The fourth objective concerned learning about the quality of life of radiologists in Australia. To start, I learned that it was not uncommon for consultant radiologists here to work four-day weeks. They also seemed to have more free time whilst at work. I would say that radiologists here in Australia tend to (but not always) have a more generalised, balanced workload than I have seen back in the UK. This may be due to the UK's tendency to create centralised hospitals for specific areas or specialties, like Barts Heart Centre for cardiology or Queen's Square for neurosurgery, for example. Of course, I must also touch on the pay for doctors here in Australia, as, by some measures, it is almost double that of doctors back home. The climate, surrounding scenery, and breadth of outdoor activities to do on days

off also contributes to a very good quality of life for doctors here in Melbourne.

To conclude, my placement at the Royal Melbourne Hospital in radiology has been a fantastic experience. I have been inspired to continue my training and apply for a radiology post in the future. Living in Melbourne for around a month has given me a unique insight into the quality of life here -- what it is truly like to live and work in Australia -- which has been invaluable. I already want to come back for my F3 year so I can explore other areas of Australia.

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