

ELECTIVE (SSC5b) REPORT (1200 words)

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

During my elective placement in Cyprus, I had the unique opportunity to immerse myself in the healthcare system of my native country, specifically focusing on obstetrics and gynaecology. This report aims to address the objectives I set before commencing my elective, providing a detailed examination of healthcare practices in Cyprus, comparing them with those in the UK, and reflecting on my personal and professional development.

In Cyprus, healthcare practices in obstetrics and gynaecology are influenced by a combination of public and private healthcare systems. During my clinical experiences, I observed a distinct pattern of care characterised by a strong emphasis on personalised patient care, which is facilitated by the smaller population size and the close nature of Cypriot communities. The obstetric care in Cyprus involves regular antenatal visits, routine ultrasounds, and a preference for natural childbirth when possible. Caesarean sections are performed but with caution, when indicated. I noticed that many women opted to have a caesarean section even if not necessary due to health concerns but because of personal preference and all that was needed to proceed was to ensure they were making an informed decision.

Gynaecological practices in Cyprus also reflect a patient-centred approach. Preventive care, including regular screenings for cervical and breast cancer, is a priority. The use of minimally invasive surgical techniques is prevalent, and there is a significant focus on reproductive health and family planning services. I was lucky to have my placement in a centre which also specialises in infertility and had the chance to have teachings on as well as observe assisted reproduction methods.

When contrasting the healthcare provision in obstetrics and gynaecology between Cyprus and the UK, several key differences and similarities emerge. Both countries offer high-quality care, but the delivery models and healthcare infrastructure vary.

In the UK, the NHS provides universal healthcare, ensuring that all citizens have access to free obstetric and gynaecological services. The NHS model emphasises evidence-based practice and standardised care protocols. Midwifery-led care is a cornerstone of the UK system, promoting natural childbirth and empowering women to make informed choices about their care. In contrast, the GHS (general healthcare service) in Cyprus allows for more personalised and flexible care, albeit at a higher cost.

One of the most notable differences is the patient-to-provider ratio. In Cyprus, the smaller population allows for more individualized attention, whereas the UK faces challenges with high patient volumes and limited resources. This disparity can impact the timeliness and personalisation of care. Additionally, Cyprus has a higher rate of private healthcare utilisation, where patients may experience shorter wait times and more direct access to specialists compared to the NHS system in the UK.

Both systems prioritize maternal and neonatal health, but the UK has a more structured approach to postnatal care, including home visits by midwives and health visitors. In Cyprus, postnatal care is typically managed through follow-up visits to obstetricians or paediatricians.

Maternal mortality is a critical global health issue, and examining it within the context of Cyprus and the UK provides valuable insights into the challenges and solutions in different healthcare settings. The maternal mortality rate (MMR) in both countries is low compared to global standards, thanks to advanced medical care and comprehensive antenatal and postnatal services.

However, challenges remain. In Cyprus, rural areas may experience disparities in access to specialized care,

impacting maternal outcomes. The country has implemented several initiatives to address these disparities, such as mobile health units and telemedicine services, to ensure that pregnant women in remote areas receive adequate care.

In the UK, despite the overall low MMR, certain demographic groups, particularly Black and minority ethnic women, face higher risks of maternal mortality. This has led to targeted interventions, including culturally sensitive care practices and enhanced support for at-risk populations.

Globally, addressing maternal mortality requires a multifaceted approach, including improving access to quality healthcare, education, and economic opportunities for women. Both Cyprus and the UK contribute to international efforts to reduce maternal mortality through aid, training programs, and research collaborations.

One of my key objectives during this elective was to enhance my communication skills, particularly in understanding and responding to the specific healthcare needs of the Cypriot community. Engaging with patients and collaborating with healthcare professionals in Cyprus significantly sharpened my communication abilities.

I learned the importance of cultural competence in healthcare delivery. Having an understanding already of local customs, beliefs, and languages played a crucial role in building rapport with patients and providing effective care. This experience underscored the need for adaptability and empathy in medical practice, qualities that are essential for any healthcare professional.

Moreover, working in a different healthcare system exposed me to various clinical practices and decision-making processes. This broadened my perspective and enriched my clinical skills, enabling me to approach patient care with greater confidence and flexibility.

My elective placement in Cyprus provided a comprehensive understanding of the healthcare practices in obstetrics and gynaecology within a different cultural and systemic context. Comparing these practices with those in the UK highlighted both the strengths and challenges of each system, offering valuable insights for future improvements. Addressing global health issues like maternal mortality further emphasised the importance of equitable and accessible healthcare. This experience not only enhanced my clinical and communication skills but also deepened my appreciation for the complexities of healthcare delivery across different settings.