

ELECTIVE (SSC5c) REPORT (1200 words)

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

Emergency medicine, only recently established as a Royal College in February of this year, lags behind the Royal Colleges of Physicians and Surgeons, 1518 and 1800, respectively. And maybe this goes some way to explaining the relatively poverty Emergency Medicine has experienced when compared to other disciplines. This report broadly covers the above objectives looking at emergency medicine, emergency departments and their role in global and local health and healthcare provision.

Kingston Emergency Department serves a varied population. At one end of the spectrum is the busy paediatric department, at the other an ever expanding elderly patient group. Those found in attendance of the ED form a blue print of the surrounding community.

Classically the United Nations has referred to the elderly, for data collection purposes as those over the age of 60 years, and paediatric care as those of 16 year and under. This ED thus cares for considerable diversity: the attendees are those at the most vulnerable poles of age. From experience I know that all EDs have this continuum of patients, however the relative affluence of Kingston in comparison to other London boroughs concentrates these polarities.

When secluded in one area, it is somewhat difficult to think of how this department fits in with the concept of global health, yet the opening paragraph of this report eludes to two incredibly important topics on the global health agenda – the aging population and child health. Although presentations will be at different extremes the overriding concepts remain the same. When looking at global health there is a huge element of public health involved and it is always usefully to return to the fundamental points of health promotion; education, disease prevention and health protection. With emergency departments hitting the headlines recently, it is sensible to reflect on whether the UK, which theoretically enjoys an effective healthcare system, has indeed failed in its duty to promote health. The statement appears harsh, but with the amount of people coming through the doors of the nation's ED's, staff working til exhaustion and infinite resourcing cuts and re structures – there has to be a point at which we all have to take a little responsibility, not only over our own health but also as healthcare providers. The GMC calls for doctors to be more than the remedy to immediate health extremis and to engage with the populations they serve; to be educators, scientists, to promote health, to be political drivers, globally aware of health matters and to champion their profession. It is easy to dismiss these as ideals, however they are forming a key part of medical undergraduate education, and it is possible that this report is a reflection of a shifting view point. The underpinning notion is this; there is simply too much demand on emergency departments and there is no quick fix. Somehow there needs to be a long term investment plan, which is committed and sustainable, and instead of pointing our fingers of blame to the political party in power, we need to take on a small amount of responsibility for the departments we work in. Five minutes with those we deem inappropriate attendees, literature, advertisement, establishing legislation influence at local levels, communication with the primary health care physicians, the walk in centres and local pharmacies are all places to start. If globally we are able to fight the big names in disease then locally we could begin to manage the issues that most stretch our services. It time to re-engage the community with its health.

The population of South West London enjoys some of the best health and health care services in the country, it has been well reported that Richmond-Upon-Thames is the place to live if you want to enjoy the best quality and longevity of life. Although an old concept, the inverse car law provides some insight into the way the health that people can expect to enjoy differs across the nation. A more visual representation for London is the life expectancy of people going from west to east along the jubilee line. With every stop, life expectancy decreases by the year. Those on the East side of London thus have a poor quality of health and are more likely to suffer with long term chronic health issues. This isn't news, the east end has always been reendowed for poverty, overcrowding and disease, being the place of immigrants settling during the 19th century, exacerbated by construction and expansion of other areas of London, forcing the poor and unemployed into this small area. It follows that the health of a community is directly influenced by the surrounding state of society – its affluence, housing, employment status and sanitation, but also its cultural origin and composition. Immigration and movement within these communities, travel and overcrowding give rise to the loss of herd immunity among children, infectious and tropical disease prevalence and indeed tuberculosis. Newham for example now has the highest rates of TB in the UK, with multi drug resistance increasing among those that live within this community. Admitting those into the ED requires a broader differential for presenting symptoms. HIV testing and Hepatitis screens are done on an opt-out basis, along with routine blood tests, opposed to being specialist tests. Naturally these things aren't exclusive to the ED's in the East End, but they are certainly more common than in South West London. Naturally the big players in disease are prevalent in whatever emergency department you look at – in the East End however they are more of a background issue, than the primary presenting complaint.

Aforementioned have been the main groups of attendees at Kingston ED – the very young and the elderly. It is the latter that form the most pressure upon the wider community and the hospital itself. Globally the population is aging; the retirement age is slowly creeping up and issues as to who will be able to enjoy retirement have been raised. The UN projects that in 2050 19% of our population will be above 80 years of age, a 5% increase on 2013. This has massive economic as well as health provision ramifications. Every year the NHS is hit with the 'winter crisis' every year, it seems surprised by the numbers of patients needing attention. Yet it is not a new problem, and it is not one that will go away, especially as standards of living improve alongside better medications and new research, the population will continue to increase and continue to age. In some ways Kingston ED is the bread and butter of emergency medicine, busy and varied, in one shift it is possible to see everything from minor ailments to life threatening disease, but the majority of attendance is those with issues that may need short hospital stays, either for medical or social reasons. The department is busy, relentless and often chaotic but for the adrenaline seekers it's not a major trauma centre, thus the Kingston ED experience is one to found the expectations of a career in emergency medicine on.

In summery – apart from 'the fear' and the stark adjustment to the fact I actually have to be a doctor now after five years of medical school, I have achieved what I wanted from my elective. I have managed my own patients, made sensible differentials, referred them where needed, most importantly I have been able to appreciate emergency medicine for the discipline and speciality it is. Emergency medicine is not general medicine or surgery, it is the recognition of life threatening or altering illness and injury, the ability to intervene adequately, to care safely and refer appropriately.

Report written with reference to:

The Royal College of Emergency Medicine, The Royal college of Surgeons, The Royal college of Physicians, Downie, Fyfe and Tannahil (1990) Oxford University Press, J.Hart (1971), The General Medical Council, The United Nations, The World Health Organisation, London health observatory - office of national statistics and The health protection society.