

## **ELECTIVE (SSC5c) REPORT (1200 words)**

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

Chronic illnesses in tropical countries are both very similar and very different to those we experience at home in the UK. I wasn't entirely sure what to expect when I arrived as I doubted that things like COPD and diabetes were very common as I assumed that the risk factors were not present in Borneo. I was therefore quite surprised to learn that diabetes was a very common chronic disease in Borneo however I was quite right that COPD isn't. By far the most prevalent chronic respiratory disease in Borneo is tuberculosis and its pulmonary involvement is almost equal in prevalence to its extrapulmonary involvement. In contrast to the UK, ectopic diseases like asthma are very rare. Cancer is equally prevalent here, especially bowel cancer. I was rather surprised to see the number of colonoscopies carried out each day and palliative care wards in the hospital. Surprisingly, none of the colonoscopies are for IBD which in the UK would probably be the most popular indication. The other most striking contrast is the size of the haematology wards. In the UK there are only really haematology oncology wards and occasionally a sickle cell patient will be admitted to a general medical ward. In Borneo, however, there are a very large number of patients with haematological conditions, mostly the thalassaemias, and these are patients that I have only ever read about in text books. Although not a chronic disease as such, the infectious diseases were massively different to those seen at home. In the UK I am accustomed to seeing respiratory infections, urinary infections and sepsis whereas in Borneo the spectrum of infectious diseases is enormous. This encompasses HIV, malaria, dengue fever, leptospirosis and many others although these are by far the most common. Again these are diseases that although I am aware of I have never really seen in reality. They are as important here as crucial differential diagnoses in any patient with fever, abdominal pain, haemorrhage and many more symptoms and thus are at the forefront of your mind during clerking. I am very grateful that I had the opportunity to see these diseases in real life.

Primary, secondary and tertiary care all exist in Borneo very similarly to the way they do in the UK. Indeed when driving around you can see 'polyclinics' on high streets and in the suburbs where people may visit a doctor. Perhaps differently in Borneo you may purchase medicine directly from the doctor without visiting a pharmacy with a prescription. Hospitals work in a similar manner. You may arrive by ambulance or turn up to A and E where you will be triaged and treated accordingly. After admission the wards work similarly to the UK whereby they are specialised and your care is provided by the department you require, ie. gastroenterology or cardiology. Tertiary care is seen again similarly to the UK with outpatient clinics run by the consultants whilst the house officers work on the ward. The consultants attend a ward round in the morning and the house officers then carry out the daily jobs. Everyone in Borneo is entitled to healthcare and pays a nominal fee, the main bulk of the fee being provided by the Government. Prescription charges are similar and a set price is paid by the patient irrespective of the number of medicines they require. I was actually very surprised to see how similar this system is to the UK. With regards to rural medicine, I am not able to comment as my hospital was based in the capital city and rural medicine was not seen

although I was made aware of a twin centre out in the countryside that had similar facilities to those in the city.

I wasn't sure what to expect of infection control in a different country as I am used to UK standards which are very strict. I was able to see quite a contrast in the infection control here. I visited the old wards which were in a building built a long time ago and these were very cramped with little in the way of infection control. The patients were very close together and in poorly ventilated spaces and thus I am sure that infection may easily have spread. In the newer wards situated in the new hospital building, they were strikingly similar to the UK. They had electronic hand sanitizers on entry to the wards and staff were notably bare below the elbows. Many of the male doctors did wear ties however. Many of the staff were also wearing face shields such as those used in operating theatres in the UK although it didn't seem like this was anything more than personal preference as there were no posters or guidelines seen anywhere. The tuberculosis ward was situated in a separate building away from other patients and those patients at risk if infection owing to weaker immune systems were kept in negative pressure rooms to protect them. The new hospital wards also had distinct bays for the patients with curtains and the nursing staff were wearing aprons. This looked very similar to the UK and the doctors reported that more infection control measures were soon to be put in place.

I think that on the most part I applied my medical knowledge very well. Although some of the diseases I saw were not things you would ordinarily see in the UK I felt I know enough to apply theoretical knowledge and make sense of some things. If I were to practice medicine out here I would need to learn an awful lot more detail about tropical diseases and their management as they are simply not things I would need to do in the UK. I didn't notice any cultural barriers in Borneo. The people here were incredibly friendly, from the taxi drivers to the doctors, and I really never felt like a foreigner. I took part in many things with the locals and staff, such as eating in the canteen and attending teaching sessions and really I did nothing but enjoy them. I was very lucky in Borneo as I rarely had an issue with language as the majority of people spoke English. Even those who couldn't speak English well could say a few words and convey their message. I even managed to learn a little Malay!