## ELECTIVE (SSC5b) REPORT (1200 words)

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

**1**. Describe the pattern of illness in the diverse ethnic population of Newham and contrast this with the rest of the UK:

Newham is a very ethnically diverse part of London. Home to many people from asian and afrocarribean backgrounds. Due to its vast diversity and multiculutral population it is no surprise that this particular population will bring with it its own unique challenges and perspectives from a health and disease point of view.

Due to the large Pakistani and Bangladeshi population certain diseases which are not present elsewhere in the UK may become more prevalent here. One particular disease which follows this trend is TB. It is present and common in this part of London due to many factors. A large number of oversease immigrants who were not born in the UK carry significant risk as they contract the disease in their home countries and then bring it with them on their arrival in the UK. Furthermore, issues such as poverty and poor housing also play an important role as this can lead to overcrowding which is another big factor which contributes to the problems around spreading of this disease. Having many people share a house together when one may have TB serves as a perfect spreading opportunity for the disease.

TB, though one of the more serious illnesses in the area of Newham, is not the only major disease which is specific to this locality. Another major epidemic is Diabetes. This again is due to south asian genetics but also again due to poverty and a lack of education. These factors have been proven to be linked to obesity which is a major contributing factor for diabetes.

**2**. Describe the pattern of health provision in Newham and contrast this with the rest of the UK:

The borough of Newham is one of the poorer boroughs within London. Due to this lack of wealth the level of health provision mirrors the reality. Given the brilliant NHS service, many people from poorer socio-economic backgrounds have easy access to healthcare. Primary care is mainly in the form of GP practices which serve the community and act as the first port of call for patients. This is then followed by secondary care which is hospital based. Newham General Hospital sees most of these patients when referred to secondary care. Tertiary care would then mean a referral to a close by hospital such as The Royal London.

Due to the close proximity of other hospitals and other departments such as The Royal London capable of providing specialist care specialist input is never far away. This is one of the advantages that Newham

has over other regions of the UK. Despite the lack of wealth and affluence the healthcare cover is still quite advanced compared to other more affluent towns in the UK due to the proximity and availability of other specialist hospital and consultants in the locality.

Furthermore, there are a greater number of doctors and other healthcare staff in the newham area that speak a multitude of languages due to them being from a variety of backgrounds themselves. This means that they are better suited to communicate with their patients as they also are from an ethnically diverse bakground. This is different to the rest of the UK as there is not a need for doctors from ethnic minorities in other cities and towns in the UK.

3. Understand how genes and ethnicity relate to gynaecological disease:

Genes play a significant role in the development of any disease process. Different ethnicities respond to different challenges to the body in different ways. Specifically in the context of gynaecological disease one thing which is particularly relevant is ethnicitiy. Afro-carribean women carry a greater risk of uterine fibroids which in turn can lead to gynaecological issues such as menorrhagia. This is an example of how ethnicity can have an effect on gynaecological disease. Afro-carribean women also have a greater tendency to develop keloid scarring following surgery, be that for a caeserian section or other gynaecological surgery. Asian women also are more likely to suffer from uterine atony following childbirth due to the composition of the uterus having a greater amount of fat compared to muscle. This is specific for that ethnicity and is a challenge which doctors must overcome when dealing with such patients.

Furthermore, individual genes can also have an impact on gynaecological disease. Women whos mothers may have suffered from certain gynaecological diseases confer a greater chance of developing some of these themselves. Examples of this include diseases such as PCOS, endometriosis amongst many.

4. Understand how patients from a low socioeconomic background cope with illness:

Patients from low socio-economic backgrounds encounter many difficulties when dealing with health care and ilness. They often have financial restraints which may hamper their efforts when it comes to attending appointments and attending visits to the GP or the hospital due to travel arrangements. Another issue is the lack of education which at times prevents them from fully understanding their condition and what is required of them in order for them to manage their conditions. These patients can often forget to take medications, misread instructions when taking medications and attending appointments but also misunderstand the importance of taking their medications and subsequently this may result in patients missing doses or receiving sub-optimal treatment.

In addition to a poor financial situation as well as education issues, patients in the newham area also at times have language issues. Due to the ethnically diverse population, english is not always the first language for many patients. Patients speaking urdu, punjabi, arabic, hindi, bengali are but to name a few. This means that there is sometimes a need for interpreters which often come in the form of family members. Given that gynaecology is one of the more sensitive subjects as it deals with issues that are © Bart's and The London School of Medicine & Dentistry 2016 7 usually kept in private, having a family member to interpret is not always the best idea due to confidentiality issues relating to sensitive matters. Aside from interpretation, language is also an issue when it comes to the doctor-patient relationship. Doctors often try their best to communicate something but it can become difficult when patients can't speak or understand the language that you are trying to communicate in.