

Elective Report

General medicine in Santiago de Cuba, Cuba

Describe the pattern of disease in Santiago de Cuba and discuss this in relation to the UK

Cuba is a developing country with a very developed education and health care system. I was based in a polyclinic and saw a range of presentations similar to that which you see in the UK. The polyclinic operated a walk in clinic and here common presentations were headache, fever, nausea and vomiting, dizziness, anxiety and depression, and minor injuries. Hypertension is very prevalent in Cuba and many patients would come with concerns about hypertension and to have their blood pressure checked. Diabetes and ischaemic heart disease are also common. The air in the city of Santiago de Cuba is very polluted due to traffic fumes and there were many patients with asthma and COPD. Many patients were sent to a small area in the clinic where they could receive nebulisers. The high rate of respiratory disease may also be related to tobacco smoking which seemed more prevalent than the UK. I also saw many cases of peptic ulcer disease which is also common in the UK.

There were a few diseases which we don't see commonly in the UK. I spent one morning with a dermatologist who described the work they do to identify and treat leprosy. She estimated she had about 15 patients on treatment or monitoring. As a tropical country, Cuba also has mosquito borne diseases. The most common of these is dengue fever. The population is well educated about the early symptoms and know to seek help early if they are worried. A successful eradication campaign means that malaria and yellow fever are uncommon in Cuba.

Describe the pattern of health provision in Cuba and contrast this with the UK

Cuba has a very well organised public health system which consists of consultorios (primary care), polyclinicos (secondary care) and hospitals (tertiary care). A consultorio is similar to a very small GP practice with just one GP and nurse who often live in the same building. There are many consultorios in each neighbourhood with each consultorio serving about 600 patients in a defined geographic area.

A polyclinico is the next step up from a consultorio and provides secondary care in a range of specialties as well as primary care similar to our walk in centres. Each polyclinic serves about 30-40 consultorios. The polyclinic where I was based was about the size of a large UK GP practice. On the ground floor was the walk in centre, a minor injuries unit, treatment and observation rooms, dentistry, a small laboratory for processing blood tests and an x-ray department (where films were developed by hand). Upstairs were many consulting rooms for specialties such as dermatology, paediatrics, internal medicine, psychiatry, obstetrics and gynaecology, and traditional (alternative medicine). Patients could be referred to a specialist from the consultorios or from the walk in centre.

Patients who need more specialist or advanced treatment than offered at the polyclinico or consultorio are referred to hospital. There were many hospitals in the city of Santiago de Cuba including specialist maternity and paediatric hospitals. On first glance the hospitals seem much more basic than those in the UK. The wards are quite bare and there is little electronic equipment, although they have access to advanced technology such as CT and MRI scans should they be indicated.

How does Cuba, a resource poor country, achieve a high standard of healthcare equal to that of the UK/US?

Cuba is a poor country. Recent data from the WHO¹ shows that the government spends the equivalent of US\$281 per capita on health care (compared with US\$2668 and US\$2862 in the UK and US respectively), however life expectancy and infant mortality rates in Cuba are as good as in the west. There are many factors which could explain this. Firstly healthcare in Cuba is free to all and medicines are very cheap to buy from the pharmacy. Secondly the Cuban population are very well educated and are particularly knowledgeable about their health. I didn't meet a single patient who couldn't name all his medications, what they were for and didn't know their current and ideal blood pressure! The doctors in Cuba also practice preventative medicine and do a lot of health promotion. There is also a lot of complementary and alternative medicine used in Cuba. Due to the embargo with the US, Cuba also manufactures a lot of its own generic drugs and also has its own wonder drugs for example for high cholesterol.

Cuba is also very good at training and educating doctors and takes medical students from all over Latin America and the Caribbean (who receive tuition for free). This has led to a very high doctor to patient ratio with 59 physicians per 10,000 population (23 and 26 in UK and US respectively).¹ Doctors in Cuba seemed to have a lot more time with their patients and also a lot more time to teach medical students.

What have you learnt from this experience that you can put into practice as a doctor?

One of the reasons I chose to go to Cuba for my elective was to improve my foreign language skills. During my medical training in London I have met patients from all over the world and I recognise how useful it can be to be able to speak a little of their language. I went to Cuba with rusty Spanish and through a lot of hard work by the end of my elective I was able to take a basic history in Spanish and give instructions to patients during a clinical examination. I was also able to explain a little about various medical conditions in Spanish. I will be able to use this skill in the future when I meet Spanish speaking patients.

I also learnt that you don't need a lot of expensive equipment to be a good doctor. The Cuban doctors are very skilled at clinical examination and I learnt some tips that I feel will help me be a better clinician. I also got very good at taking manual blood pressures! Preventative medicine is very highly valued in Cuba and I will endeavour to learn more about this so I can put it into practice in my future career. I also saw a lot of alternative medicine being used, for example acupuncture. I would be interested to learn more about these types of therapies so I know how they can help patients in the future.

I organised my elective with the help of the charitable organisation cuba medical electives (<http://www.cubamedicalelectives.org/>)

Anyone interested in finding more about an elective in Cuba can contact me at ruth_ancliff@hotmail.com

¹ WHO core health indicators http://apps.who.int/whosis/database/core/core_select.cfm