

Elective Report (SSC 5C)

I conducted my SSC 5c abroad in Hue hospital, Vietnam. I had very little idea of what to expect from this component of the course prior to leaving the UK as I had never been to South East Asia nor had I any health care experience in a foreign country before. In general, I found my time spent in Hue hospital and the surrounding areas of Vietnam to be extremely valuable in not only teaching me about patterns of disease in other populations and how other countries structure their healthcare system but also more simple but often under-appreciated matters such as simple access to healthcare, the value of confidentiality and privacy and how key good communication is and how these such things drastically affect patient care.

Most of the time I spent in Hue hospital was in the paediatric centre. On my first day, on approaching the building I was surprised by the enormity of the paediatric centre compared to the designated paediatric areas of hospitals I have been to in our London training hospitals during my time at medical school. Soon after entering the centre, on first survey of the wards and adjoining areas my high expectations caused by the ostentatious exterior of the building were clearly not going to be met. We soon discovered the wards were overcrowded with normally two patients to each bed accompanied by at least one parent. It was also apparent that despite the hoards of medical and nursing students in all the clinical areas the wards were in fact understaffed compared to UK standards.

The paediatric centre was divided up into wards according to the diagnosis of each child. I spent time in paediatric triage which I found to be the most interesting area. There were two separate triage rooms, both led by doctors, with the patients in attendance differing according to whether the parents were paying cash in order to choose the hospital for treatment and hasten the healthcare pathway for their children or were not. The majority of the children attending had respiratory disease; a mixture of lung disorders such as asthma and infectious disease such as upper respiratory tract infections and pneumonia.

One of the consultants explained the financial side of the healthcare system and although it had a few similarities to our NHS system in the UK, it possibly unsurprisingly had many differences. Although the parents of the children had to pay cash for this hastened healthcare pathway especially if they geographically fell out of the catchment area for this large hospital in Hue, what I found most shocking was the quantities of money some of the parents were paying for the medications their children required. I found it easiest to draw a parallel to asthma treatment given the prevalence of asthma in the UK and how commonly a medication such as salbutamol is prescribed. One father was required to purchase two commonly prescribed inhalers and a spacing device for his daughter which was equivalent to more than 50% of the average monthly family income. This particular gentleman was forced to sell many of his family's animals in order to pay for this treatment which I believe we take for granted in our country especially given medications for patients under the age of 16 are without charge. Coming into the private triage room were a variety of different patients. Some families had travelled more than 6 hours to get to the hospital due to the reputation of the standard of healthcare although as already mentioned this meant they fell outside the catchment area of the hospital so therefore had to pay for the appointment. Regardless of wealth or background of the patients, they all paid the same fee for the consultation and received the same time slot. I was surprised by the lack of confidentiality and privacy. While one patient was being

seen by the doctor, one or sometimes two other patients with their relatives stood in the same consultation room in order to hasten the process however this meant virtually no privacy, even during examination.

Throughout the hospital I was in disbelief by their infection control. Patients were free to wander in and out of clinical areas, which they appeared to do so. All medical and nursing staff wore the same white coats daily. Most shocking of all was the lack of hand washing facilities and hand sanitising gel pumps. The basins were sparse in the clinical areas and often without soap or hand towels and hand sanitiser pumps were also sparse and almost always empty. In one consultant-led clinic I observed his practice and he used the alcolgel pump attached to his belt loop on average after every 15 patients or so of which every one he examined.

The other area I experienced while on placement at Hue hospital was the Traditional Medicine department. This speciality of medicine was unknown to me before stepping foot onto the ward as I was not aware of an equivalent in UK hospitals. The language barrier was particularly bad in Traditional Medicine as only one of the doctors spoke English to quite a basic level however we managed to communicate through some French elective students as many of the Vietnamese staff speak French. It was a fascinating ward with many interesting treatment methods being utilised. Acupuncture was most practiced in the department with some of the acupuncture needles attached to what looked like TENS machines. There was also a kitchen area where Vietnamese herbs and spices were being prepared to use as adjunctive medicinal preparations.

I found this placement abroad was extremely valuable to me and to my future medical practice. I saw many clinical signs in patients which are rarely seen in UK hospitals given the limited access to healthcare so patients often present later once the disease or illness has progressed. I was also lucky enough to see infections which are very rarely seen in the UK due to the differing vaccination programmes in each country. My experience of the healthcare system in Vietnam has really made me value our NHS system in our country especially some of the sacrifices I saw families had to make for services I believe we take for granted.

I strongly recommend this placement to other medical students interested in conducting their SSC 5c in Vietnam. I found my experience to be worthwhile and interesting. The placement was well organised and the staff in the hospital were welcoming, helpful and flexible.