

My elective placement in Long Island, New York in the specialist field of neurosurgery was a fantastic learning experience which gave me exposure to this field which I didn't have much opportunity to have during the course of medical school. My elective was an excellent opportunity to experience a different health system and also allowed me to broaden my current medical knowledge and skills in this medical specialty.

Neurosurgery encompasses different aspects of clinical diagnosis, assessment and management of a wide range of neurological pathologies which I was exposed to. Furthermore, I gained a better understanding of neurophysiology and neuroanatomy as this was experienced in a clinical context. Exposure to microsurgical techniques and neuroradiology helped me to see the various recent advances in neurosurgical management and the various treatment routes that are available to patients.

During the placement I was exposed to various neurosurgical cases. These ranged from routine operations to life threatening emergencies. In the patient population that was served by the hospital I saw the different techniques to treat aneurysms of symptomatic patients who typically presented with persistent headaches. These techniques included open neurosurgical repair to neuroradiological coiling. It was interesting to see that in a large proportion of the patients, aneurysms tended to be familial and many patients were also being screened for aneurysms once a family member had been diagnosed with one. It was interesting to see family members could be imaged so easily without a referral from a doctor because of the private healthcare system. It allowed patients to bypass the administrative obstacles and to take responsibility for their own health. This was something that I found was different to the NHS. However, there are of course disadvantages to this, such as scaremongering and the unnecessary exposure to radiation, which lay people would not have the clinical knowledge to judge.

Having the opportunity to sit in on a tumour clinic also gave me exposure to patients with brain tumours which was a new experience for me. I had the rare opportunity to see a patient being diagnosed with a brain tumour for the first time and the immediate impact this had on her and her family of this devastating diagnosis. This was a very humbling experience and I was also able to see an excellent example of breaking bad news in a terminal case. As this was a new patient I got to see how the patient had to proceed from the initial diagnosis to confirming this diagnosis by organising a biopsy and further imaging. This was ultimately left up to the patient, who had to organise her own scans and choose appropriate dates, which is something that would be unheard of in the UK. It was

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interesting to see how the responsibility of progression of care was ultimately left up to the patient.

In addition to gaining medical experience, I also gained an understanding of how the health system functions in America and the wider social significance this had on the country. In America, the health system is private sector funded and patients need health insurance in order to receive medical care. This can be acquired from either through their employer, the government or privately acquired. Around 15% of the population do not have health insurance and there are various medical aid organisations which can help them to receive the healthcare they require. From my experience in America, I saw that most patients attended clinics to get medical opinions on the recommendation of friends and family and good word of mouth seemed to be key. This system is completely different to the public sector funded NHS in the UK. In the US, patients do have more choice in terms of which doctor they choose to maintain their care as they can go as far afield as they choose to. I feel that in the UK the healthcare seems a lot more standardised, especially to the general public because of the encompassing nature of the NHS. This unity I felt was something that was lacking in the US.

Having the opportunity to work within a multidisciplinary team in another country was another great experience. The junior doctors on the team would be expected to do 100-120 hour weeks sometimes with little support as senior colleagues would often be in theatre. Taking an elective in America was also an excellent opportunity for me to work with a different team dynamic to the UK and enabled me to adapt to medical professionals from a slightly different cultural background.