

Electives Part i(Sri Lanka)

What are the common illnesses/diseases of interest in the general population in Singapore?

The rheumatological illnesses that are common in the UK seem to follow a pattern similar to that in Sri Lanka. Tuberculosis especially was widely prevalent in this region however, having been trained in East London, we were aware of the characteristics of the disease and were able to apply what we learnt to the cases that we came across.

Discuss the health system and provisions in Singapore. Describe the similarities and differences between this country and compare it with the UK.

The health system in Sri Lanka has a very different structure to the one in the United Kingdom. Due to the patients not being registered with a General Practitioner, it is not a requirement to be referred by the GP should they want to be seen by a specialist. This allows the patients to be seen promptly and diagnosis and management to be started as soon as possible.

However, once on the ward, the management of the patient is identical to the structure in the UK. There is a multidisciplinary approach and members of the allied health follow the consultant on his ward round everyday to provide updates on the patient.

Describe the most interesting case/cases on the elective and reflect on the different approaches to management.

The most interesting case that I encountered on my electives in Sri Lanka was that of a middle aged woman who was in her second trimester of pregnancy. Her diagnosis of Polymyositis and dermatomyositis was confirmed by a biopsy while she was pregnant. The biopsy was performed because she started developing symptoms and signs of both these conditions. She was then referred by the obstetrician to the rheumatologist to determine the most appropriate management plan for the patient. It was a tough decision as the patient's condition was progressing but she was unable to be put on any disease modifying anti-rheumatic drugs because of her pregnancy. This meant that every day that passed resulted in more and more permanent muscle damage. The decision was then made to try and deliver her baby as soon as possible to ensure safety for both the mother and child. I think the management of the patient would have been the same in both the countries.

How has the elective aided in your future learning as a doctor?

This has helped me to become a better doctor because it has exposed me to a new healthcare system. This is important as we have only been exposed to the National Health Service where financial constraints are not the major issue. Furthermore, we were exposed to new departments such as prosthetics and orthotics to deepen our understanding so we will be in a better position to deal with patients with prosthesis and orthotics in the future.

Electives Part ii (Singapore- Oncology)

What are the common illnesses/diseases of interest in the general population in Singapore?

In Singapore, the common malignancies follow a trend similar to the rest of the world. These include lung, breast and prostate cancer. Over the course of my attachment, I was exposed to many patients with these conditions as well as renal cell carcinoma. The patients were of variable ages and stages of treatment.

Discuss the health system and provisions in Singapore. Describe the similarities and differences between this country and compare it with the UK.

The Singapore healthcare system follows a very different structure from the one in the United Kingdom(UK). The healthcare system here is dependent on each individual's contribution to their accounts such as Medisave and Medifund , which can then be used to subsidise their healthcare expenses. The contribution to these funds comes from a fixed amount from their own income as well as their employer. Whilst this is a good structure to ensure that patients have enough funds to pay for their healthcare needs, there is only a certain amount that can be withdrawn in a year and the rest of the expenses have to be topped up with cash. This financial aspect is especially relevant for oncology where patients need regular scans to ensure good monitoring of treatment as well as very expensive drugs.

Although the structure of the healthcare system may be different, there are many supportive organisations in place in both the countries to help provide these patients with support during their tough times. In Singapore, patients can approach the social worker should they require financial help. Furthermore, there are various Cancer charity organisations that help to fund available treatments for patients. These kinds of organisations are in place in the UK as well, however, their roles differ as financial constraints are not the major issue.

Describe the most interesting case/cases on the elective and reflect on the different approaches to management.

One of the most interesting cases I have seen over the course of my attachment was of a patient who developed breast cancer during the first trimester of her pregnancy. This is a really rare occurrence and having seen a patient who made it through the whole ordeal and give birth to healthy baby girl is something I shall never forget. There was a lot of cooperation between her oncologist and the obstetrician to help her through this really tough time. She underwent a mastectomy and chemotherapy during her pregnancy followed by radiotherapy after a normal vaginal delivery of her child. She is currently under surveillance and was really appreciative of what her oncologist had done for her and her daughter. The management of the medical aspect of this patient would be identical to that in the UK. However the main difference I have noticed when it comes to the management of a patient here is with regards to affordability of the different types of treatment. Whilst there are funds available, a lot of patients still found it difficult to make ends meet. Hence, it is also the doctor's role to understand the financial aspect of treatment and help to provide patients with the most appropriate advice with regards to their treatment.

How has the elective aided in your future learning as a doctor?

This elective has aided my career as it has provided me with a more in depth knowledge in the field of oncology. I have been exposed to both the clinic as well as ward setting of oncological patients. In the clinics, I encountered patients who had different types of cancer and who were at different stages of treatment. I had the opportunity to examine some of these patients and pick up on various signs that they had. Furthermore on the ward, I encountered a variety of patients who were suffering from complications associated with their malignancy such as bowel obstruction, pleural effusions etc.

In addition to increasing my medical knowledge, exposure to a different healthcare system where I will be working next year has provided me with a better foundation for when I start training as a House officer.

Electives Part i(Sri Lanka)

What are the common illnesses/diseases of interest in the general population in Singapore?

The rheumatological illnesses that are common in the UK seem to follow a pattern similar to that in Sri Lanka. Tuberculosis especially was widely prevalent in this region however, having been trained in East London, we were aware of the characteristics of the disease and were able to apply what we learnt to the cases that we came across.

Discuss the health system and provisions in Singapore. Describe the similarities and differences between this country and compare it with the UK.

The health system in Sri Lanka has a very different structure to the one in the United Kingdom. Due to the patients not being registered with a General Practitioner, it is not a requirement to be referred by the GP should they want to be seen by a specialist. This allows the patients to be seen promptly and diagnosis and management to be started as soon as possible.

However, once on the ward, the management of the patient is identical to the structure in the UK. There is a multidisciplinary approach and members of the allied health follow the consultant on his ward round everyday to provide updates on the patient.

Describe the most interesting case/cases on the elective and reflect on the different approaches to management.

The most interesting case that I encountered on my electives in Sri Lanka was that of a middle aged woman who was in her second trimester of pregnancy. Her diagnosis of Polymyositis and dermatomyositis was confirmed by a biopsy while she was pregnant. The biopsy was performed because she started developing symptoms and signs of both these conditions. She was then referred by the obstetrician to the rheumatologist to determine the most appropriate management plan for the patient. It was a tough decision as the patient's condition was progressing but she was unable to be put on any disease modifying anti-rheumatic drugs because of her pregnancy. This meant that every day that passed resulted in more and more permanent muscle damage. The decision was then made to try and deliver her baby as soon as possible to ensure safety for both the mother and child. I think the management of the patient would have been the same in both the countries.

How has the elective aided in your future learning as a doctor?

This has helped me to become a better doctor because it has exposed me to a new healthcare system. This is important as we have only been exposed to the National Health Service where financial constraints are not the major issue. Furthermore, we were exposed to new departments such as prosthetics and orthotics to deepen our understanding so we will be in a better position to deal with patients with prosthesis and orthotics in the future.

Electives Part ii (Singapore- Oncology)

What are the common illnesses/diseases of interest in the general population in Singapore?

In Singapore, the common malignancies follow a trend similar to the rest of the world. These include lung, breast and prostate cancer. Over the course of my attachment, I was exposed to many patients with these conditions as well as renal cell carcinoma. The patients were of variable ages and stages of treatment.

Discuss the health system and provisions in Singapore. Describe the similarities and differences between this country and compare it with the UK.

The Singapore healthcare system follows a very different structure from the one in the United Kingdom(UK). The healthcare system here is dependent on each individual's contribution to their accounts such as Medisave and Medifund , which can then be used to subsidise their healthcare expenses. The contribution to these funds comes from a fixed amount from their own income as well as their employer. Whilst this is a good structure to ensure that patients have enough funds to pay for their healthcare needs, there is only a certain amount that can be withdrawn in a year and the rest of the expenses have to be topped up with cash. This financial aspect is especially relevant for oncology where patients need regular scans to ensure good monitoring of treatment as well as very expensive drugs.

Although the structure of the healthcare system may be different, there are many supportive organisations in place in both the countries to help provide these patients with support during their tough times. In Singapore, patients can approach the social worker should they require financial help. Furthermore, there are various Cancer charity organisations that help to fund available treatments for patients. These kinds of organisations are in place in the UK as well, however, their roles differ as financial constraints are not the major issue.

Describe the most interesting case/cases on the elective and reflect on the different approaches to management.

One of the most interesting cases I have seen over the course of my attachment was of a patient who developed breast cancer during the first trimester of her pregnancy. This is a really rare occurrence and having seen a patient who made it through the whole ordeal and give birth to healthy baby girl is something I shall never forget. There was a lot of cooperation between her oncologist and the obstetrician to help her through this really tough time. She underwent a mastectomy and chemotherapy during her pregnancy followed by radiotherapy after a normal vaginal delivery of her child. She is currently under surveillance and was really appreciative of what her oncologist had done for her and her daughter. The management of the medical aspect of this patient would be identical to that in the UK. However the main difference I have noticed when it comes to the management of a patient here is with regards to affordability of the different types of treatment. Whilst there are funds available, a lot of patients still found it difficult to make ends meet. Hence, it is also the doctor's role to understand the financial aspect of treatment and help to provide patients with the most appropriate advice with regards to their treatment.

How has the elective aided in your future learning as a doctor?

This elective has aided my career as it has provided me with a more in depth knowledge in the field of oncology. I have been exposed to both the clinic as well as ward setting of oncological patients. In the clinics, I encountered patients who had different types of cancer and who were at different stages of treatment. I had the opportunity to examine some of these patients and pick up on various signs that they had. Furthermore on the ward, I encountered a variety of patients who were suffering from complications associated with their malignancy such as bowel obstruction, pleural effusions etc.

In addition to increasing my medical knowledge, exposure to a different healthcare system where I will be working next year has provided me with a better foundation for when I start training as a House officer.