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GENERAL
MEDICINE

Elective Report

To find out the most common illnesses people present to hospital with in Belize and how this compares with the UK. To compare disease rates in Belize with those globally focusing on infectious and lifestyle related illness.

Belize is a small country in Central America with a population of around 310,000 people. It was previously a British Colony, and whilst being part of mainland Central America it shares many of its cultural characteristics with the Caribbean Islands rather than its neighbouring countries of Mexico, Guatemala and Honduras, including the nature of health and disease amongst its population. Belize is a developing country and this is reflected in the changing pattern of disease that is being seen there with a transition from mainly communicable disease to more non communicable or lifestyle diseases. The life expectancy for men and women in the country is 71 years for men and 76 for women compared with 79 for men and 82 for women in the UK. This is also higher than neighbouring country Guatemala where life expectancy for men is 66 years and 73 for women, and similar to those in Mexico and Honduras. Whilst in the hospital I noted that there were fewer people than I expected with infectious disease, and more with lifestyle diseases such as diabetes and heart disease. In 2008 the WHO reported that 28% of deaths in Belize were from communicable disease, higher than the regional average, 43% from Non-communicable disease, lower than the regional average and 30% from injuries, again higher than the regional average. This was also reflected in the patients seen in the hospital as there were a number of patients seen who had been involved in road traffic accidents and stabbings and other forms of trauma, there were also patients who had been admitted for surgical treatment of cancer however fewer patients were seen with infectious or communicable disease. Over the past 15 years hypertensive disease and diabetes have become the leading cause of death in both men and women in Belize, reflecting the shift in disease patterns from communicable to lifestyle diseases.

To understand the set up of health care in Belize and to see how pressures of money and limited resources are dealt with and how this compares to how these problems are dealt with in the UK.

The health care system in Belize is run centrally from The Ministry of Health based in the capital city of Belmopan. Health care in Belize is different from in the UK as there are charges for the patient at the point of delivery. However health care is heavily subsidised by the government (with National Health Insurance) and all medication is in fact free, charges are in place for stays in hospital (approximately 10 Belizean dollars a night) and for operations (300BZD). The Ministry of Health in Belize has recently introduced the Belize Health Information System (BHIS) to allow electronic patient records to be kept and information about patients to be accessed at the hospital to improve patient care and centrally by the government for epidemiological study. Each patient must have their BHIS number to access outpatient clinics, A and E or to get drugs, it is very easy for patients to register and they can do so whilst at the hospital so that they do not have delays to accessing care. The country is divided into four districts (Northern, Western, Southern and Central) which each have two public hospitals and a number of smaller health centres to serve the health of their communities. The Central District is home to The Karl Heusner Memorial Hospital which is the only referral hospital in Belize available for tertiary referrals. I was located in Belmopan Western Regional Hospital which serves the region along with San Ignacio Hospital. The Western Regional Hospital has an accident and emergency department, two operating theatres, outpatient clinics, laboratory and radiology services and two wards one general and one maternity ward. Whilst at the hospital some of the pressures of money were apparent. The hospitals sterilisation equipment was not functional and this meant that the surgical team could only perform life-saving or emergency surgery and not any of the

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normal scheduled surgery. When talking to the team it became apparent that there were simply no funds to replace the machine or to have the machine fixed and so for the foreseeable future they would be unable to plan any surgery and would have to continue performing emergency surgery only. This was quite poignant when meeting a patient who had undergone a laparotomy for metastatic cervical cancer as an emergency when she had presented acutely unwell, making me wonder how many people may be being left until they reach such a critical state before being able to have necessary operations. Financial pressures were also an issue when using equipment in the hospital, great emphasis was placed on not being wasteful of supplies that we may take for granted in the UK for example bags of normal saline which we may use for example to flush cannulas and throw away the remainder of the bag were labelled with the date opened and were used fully. Equipment and investigations that we take for granted was also noticeably lacking for example the hospital's radiology department had an X-ray but no CT scanner and of course no MRI!! The laboratory team also suffered from failure of their equipment and a lack of funds to replace it, they had previously had two machines to analyse samples for biochemistry but one had recently broken and could not be replaced. It was also very interesting to observe the highly skilled members of that team perform rapid full blood counts by microscopy only.

To find out about health promotion in Belize. To gain skills in communication and increase my exposure to a range of conditions and peoples.

Health promotion is visible throughout Western Regional Hospital and appears to be a main priority for The Ministry of Health in Belize. One particularly visible campaign in the hospital was a Breast Feeding Campaign to encourage women to breastfeed their babies. The hospital had been certified as a Baby Friendly Hospital one year ago, meaning that all staff had been trained in how to teach women to breastfeed and about its benefits for the baby over formula milk a campaign supported by the ministry of health in Belize and UNICEF. This is particularly important in the Western Regional Hospital as it has a large maternity unit, most women in Belize (>90%) giving birth in hospitals such as the Western Regional. There are many promotional posters displayed throughout the hospital displaying messages promoting breastfeeding. They encouraged women to breastfeed their children from birth until they are 6 months old, giving information on how to breastfeed, the benefits it confers, how to express milk and how to introduce solid foods to infants when they are old enough. Another important health campaign in Western Regional Hospital and in the whole of Belize is improving the visibility of Mental Health issues. The hospital has a Psychiatric Unit but currently does not have a consultant Psychiatrist on its staff. There were training days for staff on management of mental health conditions such as psychotic episodes and depression. This was particularly poignant as there was a shocking case in the national news of a woman who had drowned three of her four children before committing suicide. On the national news and in the hospital itself there was a lot of discussion as to whether this woman had been suffering from severe depression and if tragedies such as this could be avoided with improved access to mental health care in Belize. Culturally mental health is a difficult topic to tackle as there is a large amount of stigma attached to the diagnosis of these conditions and some of the population believe in superstitions such as possession etc. preventing them from seeking treatment or helping those with mental health problems. There is a drive to help the general population appreciate that mental health is as important as physical health.