

## Elective Report + Reflection

**Name:** Anuj Sama

**Dates of elective:** 22/04/2013-24/05/2013

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**Subject:** General Medicine + Ophthalmology.

My placement was at an institute run by a trust, whose finances are reliant upon charitable donations. This allowed the consulting fees to be very small for patients. A typical outpatient consultation fee was 100 Indian rupees (approximately £1.30) and the fee for a diabetes consultation was 500 rupees (approximately £6). This fee includes a history, examination and basic investigations such as blood pressure measurement, urine dip and some blood tests. At the institute's diabetes centre, patients are able to get ECGs, doppler ultrasound scans, chest radiographs and see other specialist doctors within the hospital. Although the hospital is not very big, the services offered by the hospital are vast. Not only are there investigations as described earlier, patients also have access to neurological examinations and specific cardiac investigations such as exercise ECGs/treadmill tests. The Banarsidas Chandiwala institute also had a thriving eye centre which was full every day. A doctor would see on average 40 patients during the morning clinic. The institute did not have an emergency room however and did not have a large inpatient population. The only inpatients were in the maternity ward and any operations were day cases.

The prominent chronic diseases I got to see were diabetes and heart disease. I also saw a lot of chronic allergic conjunctivitis. This seemed to be rife amongst the poorer population, most probably due to poor living conditions and the nature of the jobs. I saw many 'auto-rickshaw' drivers who would be exposed to pollution and allergens throughout the day. Sanitation is also a key issue with this population. The doctors would recommend patients clean their eyes with warm clean water. This is almost impossible in India, even in the capital city, as access to fresh clean water is not available. Most homes have filters installed for drinking water, however this is not possible for the poorer population.

From what I observed, the healthcare system in India is on three tiers. At the top are private hospitals, reserved for the emerging middle and upper classes. Then there are charitable/trust hospitals and finally government hospitals. The majority of government hospitals are in cities, thus

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patients who live in rural areas would have to commute long distances, often travelling for days, to reach a hospital. As consultations and treatment is free in these hospitals, they get extremely busy and wards are often over populated. I visited a paediatric oncology several years ago and there were two children per bed, with their mothers by their sides. As one can imagine, access to investigations and other services at such a hospital is very difficult. At the Banarsidas institute, patients also travelled long distances, but they had some money to pay towards consulting fees. They also have better access to investigations, but would have to pay for the more sophisticated investigations but at a heavily subsidised rate. This is in great contrast to private hospitals where access to very sophisticated imaging is almost limitless. In fact, investigations that one would not get on the NHS, or private hospital in the UK, you could get in a private hospital in India.

Unfortunately I was unable to visit a government hospital on the elective so I am unable to comment on how chronic diseases (particularly diabetes) are managed there, but at the Chandiwala institute, patients are put on comprehensive management plans. They come in for their initial assessment and basic investigations are carried out by the nurses in the outpatient department. These are then followed by consultations with nutritional counsellors, a specialist diabetes consultant, specialists in other fields of medicine and a podiatrist. With the diabetes specialist, patients got an in depth consultation, including foot checks and a dental check up. Patients are then given a 3 month diabetic plan. The patients are advised and educated about diabetes, given medications and have monthly reviews until their blood sugars are stable. They then have either 6 monthly or annual diabetic reviews with the same doctor. This system is similar to the NHS, but I feel a lot of the organisation of investigations would be done either at a GP surgery as opposed to a specialist.

### **Was it what you expected?**

The placement was as I expected.

### **Clinical experience?**

The placement was an observership, so our clinical experience was limited to taking histories and performing examinations. The patients at the hospital were from poor backgrounds and didn't understand English, so it was challenging taking histories in Hindi. However, I was able to see various clinical signs in patients, particularly my time covered in the ophthalmology department. Pollution seems to be a pertinent problem, especially with patients who do not live in adequate housing and work on the streets. Many patients presented with allergic conjunctivitis, atopy and asthma as a result of these environmental conditions.

### **What did you learn about the people and the country?**

I have been visiting India since I was a child. What I have noticed over the years is that the country is changing at a dramatic speed. There is a lot of construction work happening, particularly in the capital. The government seems to be improving the infrastructure and private companies building new shopping centres and housing blocks. Another thing I noticed was that New Delhi seems to be getting more populated, the road traffic getting worse and the environment getting worse as a result. This is certainly having an impact upon the local population's health. I also learnt that the people of India hold a great amount of respect for doctors and healthcare professionals.

### **What did you learn about the health care professionals you worked with?**

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The institute we visited was mainly funded by the trust and charitable donations. The majority of the doctors working at the institute were paid per consultation as opposed to being on a salary. In order to earn extra money, doctors rely upon drug commission from drug companies. Drug reps would visit daily with new medications and samples. The doctors also receive free flights for the families and access to conferences with no expenses spared.

Aside from this I feel the doctors were passionate about their jobs and, although money orientated, did treat patients well. The outpatient's department gets extremely busy, there could be up to 3 different patients in the consulting room at a time. Given this, I feel they cope with the stress and pressure of being a doctor very well.

**What did you learn about the health care system in that country?**

I had been India a few years ago where I had a placement in a prominent private hospital in New Delhi. My placement this year highlighted that there is a huge contrast between the healthcare received by the poorer population as compared to the rich. The private hospital I visited in the past was of a similar quality to the Royal London in terms of services, but patients all get individual rooms with ensuites. The rooms are akin to a 4 star hotel. However, patients attending the Banarasidas Chandiwala institute were packed into the waiting rooms and consulting rooms like sardines.

**What were the best bits?**

The whole experience was good, I cannot pick out a 'best bit'.

**What were bits you least enjoyed?**

On some days there were not many patients in the outpatient department, so did not get to see many patients on those days.

**Were there any shortcomings?**

No.

**Would you recommend it to another student?**

Yes.

**Would you do anything differently?**

I would request to do more than an observership, allowing me to do some procedures.

**What did you learn about yourself?**

I learnt that if I am thrown in at the deep end, I can speak Hindi if required.

**Where there any deviations from the risk assessment?**

Nil.

**How was your accommodation?**

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Accommodation was good. There were three of us and were given a 2 bedroom apartment within the hospital building. We were treated very well.

**How were your travel arrangements?**

Travel arrangements were also organised by the institute.