

GENERAL
MEDICINE

Elective Report

6th May 2013

Dr G Rivas, San Ignacio Community Hospital

I had the privilege of carrying out my placement at San Ignacio Community Hospital. The hospital was located very near the main town in which we were staying. It serves a large population of around 22,000 people across 22 communities despite only having 16 beds. The services provided by the hospital are limited to Emergency, maternal and varying outpatient clinics that are arranged by different specialties. The focus of our elective was the maternal services offered by the hospital.

San Ignacio Community Hospital is classified as a tertiary centre meaning that the hospital is only equipped to deliver a certain level of care and in the event more invasive treatment is required patients are regularly transferred to the next local hospital in Belmopan. With regards to the maternity department this has an impact on the care they give and therefore the role they have in the community. The antenatal services looks to flag any mothers that may go on to have complicated pregnancies. As the hospital does not have a theatre it isn't possible to perform caesarean sections, hence antenatal screening has never been more pertinent.

A fellow colleague and I helped run an antenatal clinic one morning with Dr Goncalves. We were thrown in at the deep end and asked to clerk in the patients and carry out a clinical assessment. This would not have been so challenging if it wasn't for the language barrier; Spanish being a language I am not so familiar with. Thankfully Dr Goncalves was on hand to interpret. Having taken part in many antenatal clinics in the UK I was intrigued by the differences in the clinic in Belize. The doctor was keen to find out about the mothers oral hygiene and whether they had any cavities which I found quite peculiar in the context of antenatal care. I was then informed that this was a good marker of the mother's general health and living standards; hence an indicator as to how well they could look after their baby. This was a real concern given how young the expectant mothers were. After a few consultations and looking down the row of seat in the waiting room the demographic requiring these services was obvious. I was shocked at how young the women were and those that were 'older' (ie in their late twenties) were for example having their 5th pregnancy. Dr Rivas explained that was the culture there and girls would frequently get pregnant before the age of 18.

Being a public hospital medication and services were free. I was quite taken aback by this, as for a country so poor they were able to offer such a service that doesn't discriminate against people's financial or social circumstances. Despite medication being free post natal women were declining birth control, even though they were being offered different forms of contraceptives (eg pill, injection, coil). There were was information about birth control available in the maternity department in the form of posters which I found very positive. When asking some of the mothers why they declined the offer of contraceptives they explained they didn't have time to come back every three months to get the top up injection. Although this doesn't seem entirely implausible it seemed that there may be another reason. When discussing this with Dr Rivas we considered whether religious beliefs may play a part or even lack of education amongst that age group, we were unable to draw any firm conclusions. This culture appears to be driving the country's baby boom,

hence why the government is reluctant to intervene and promote health education regarding this matter. It bodes in their favour to expand their population in this time where the country is embracing its independence.

The antenatal care provided is very similar to that in the UK in terms of how it is carried out, the frequency of visits and also the health professionals involved. The midwife will initially see the patient and take a brief history and measurements then the patient is seen by the consultant for a more detailed consultation. The hospital has recently converted to an electronic record system which was highly impressive and it made it easier to look at the patient's previous history. There were many similarities with our national health system however one key difference I noted was in how cervical screening was carried out at the hospital. They used the PAP smear technique and the test was available to all ages and not restricted to those over 25 as in the UK. They were also very opportunistic as they tested women who simply came in for their routine antenatal check if it hadn't been done before.

Health promotion was evident within the hospital with the numerous posters and references to breast feeding. The hospital and its staff had a strong point of view about encouraging breast feeding which they discussed with women even in their early antenatal stages. There was also a large vaccination programme for babies with all the same vaccinations a child would receive in the UK up to one year of age. I was pleasantly surprised by this and very impressed with the efforts of the hospital and its staff despite limited resources.

The biggest revelation for me and adjustment I had to make was getting used to the very different doctor-patient relationship. The principles that we've had instilled over the years relating to consent and confidentiality, and even patient centred care were challenged by the 'white coat' culture at the hospital. The patients seemed extremely grateful for the care they were receiving and thankful to the doctor, a culture I think you are more likely to see in deprived areas as opposed to in the UK where people see healthcare as their right.

My experience of healthcare in Belize was positive and an eye-opener. A country that was once part of the British colony has inherently adopted traits of our national health system. It was encouraging to see the health promotion carried out and the efficiency of the service being provided through structured clinics and a computerised system. Although I didn't have many expectations before arriving I feel my experience surpassed all that I could have hoped for. This was owing to the friendliness shown to us by the doctors and nurses, in particular Dr Rivas for allowing us to shadow him and for taking the time to teach us.