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GENERAL  
MEDICINE

# Elective Report: Marian Hospital, Palai

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I have spent five weeks of my elective in Kerala. I worked at Marian hospital under the supervision of Dr Reynolds, who works as a General Physician in the hospital.

## **How is Healthcare (focus on General Practice) delivered in Kerala? What are the major differences to the system in the UK?**

The healthcare service in India is significantly different to the healthcare system in England. There is no equivalent to the National Health Service (NHS) present in India, which allows prompt and free treatment to patients. Patients are required to pay for the treatments themselves, and the amount varies amongst hospitals. Marian Hospital is a hospital run by the church. It allows treatment of all patients regardless of wealth. Poor patients are offered free treatment. Other hospitals, mainly private hospitals, charge patients a lot of money, which most patients cannot afford. Equal access to healthcare, regardless of wealth, is still a major issue in India. Private insurances are available in India, however only a fraction of the population can afford it, leaving the majority of India's population to self-finance their medical care (1).

Another major difference to the UK healthcare system is that patients in India need to see a doctor in General Medicine/Practice in the hospital and not in the community. The majority of doctors, with some exceptions, are based in government or private hospitals. Some patients need to travel for more than one hour before they can see a doctor in a hospital. This is mainly due to the fact that most patients live in rural areas, with inadequate access to a doctor or other healthcare professionals. Most doctors of General Medicine see a significant amount of patients to compensate the lack of hospitals. Most patients will be asked to buy their medication from the hospital pharmacy, which will dispense most medications. More serious cases will be straight admitted to the hospital. Doctors of General Medicine have ward rounds every day to see these patients in addition to seeing patients in outpatients.

## **What are the common conditions seen in General Medicine in Pala, Kerala? How do they differ from the UK?**

The common conditions I saw in General Medicine in Pala were very similar to the conditions I have seen in the UK. The commonest diseases patients see a doctor for are Diabetes mellitus and hypertension. Diabetes has become very common over the last decade. Over this period, rapid economic growth has led to significant changes in lifestyle. The consumption of sugar has increased over the last years, due to low prices. Furthermore a sedentary lifestyle has contributed to a rapid rise in diabetes mellitus in Kerala. Increased cholesterol is also an increasing problem in Kerala. Mainly due to the social changes mentioned above, eating habits have changed. Whereas people use

to cook with fresh ingredients, nowadays more processed food is consumed, leading to high lipid levels.

In addition to the common conditions seen in General Medicine, I was also able to see conditions that are rare in the UK. Infectious diseases especially diarrheal diseases were very common in the area when I was working in the hospital. It was the start of the monsoon season in Kerala and infections were becoming more prevalent. Moreover conditions such as the hand foot and mouth disease were seen in the hospital. With the monsoon season, infections such as dengue fever become more prevalent in Kerala. The south of India is mostly affected of dengue infections during the monsoon season. Towards the end of my placement, many patients presented with suspected dengue fever. We daily had almost 20 patients who came to see the doctors.

**Learn about dengue fever and its prevalence in the Indian state of Kerala. What Impact does it have on patients?**

Dengue fever is becoming a major concern in some parts of India, including Kerala. Most outbreaks occur during the monsoon season every year. Dengue fever is caused by a virus belonging to the flaviviridae and is transmitted via mosquito bites. Most infected patients initially present with flu-like symptoms, however in some individuals the symptoms rapidly progress to cause dengue haemorrhagic fever (DHF) or dengue shock syndrome (DSS), which may be life threatening. Patients often present with fever, headache, arthralgia and myalgia. Additionally patients with DHF often suffer from generalised rashes and gum bleeding. An effective vaccination has not been developed yet, therefore dengue fever will remain a problem especially in India. Most patients presenting with common symptoms were admitted to hospital for observation and to manage rapidly progressive infection.