

MEDICAL STUDENT ELECTIVE REPORT

Student name : Jafrin Alam

Elective subject : Psychiatry/Orthopaedic surgery

Elective location : Pejabat Pengarah, Hospital Kuala Lumpur, Jalan Pahang, 50586 Kuala Lumpur, Malaysia

Elective dates : 14/04/14 – 23/05/14

Supervisor name : Dr Hjh. Salina bt Abdul Aziz/Dr Riana, Dato Mr Fazir bin Mohamad/Dr Zainail

Objectives

1. What are the prevalent psychiatric conditions in Malaysia? How do they differ from the United Kingdom?
2. How are psychiatry services organised and delivered in Malaysia? How does it differ from the United Kingdom?
3. To gain further exposure to orthopaedics and improve my anatomy knowledge.
4. To reflect on my elective experience.

During my elective placement in Kuala Lumpur (KL), I was attached to the government run Hospital Kuala Lumpur (HKL) for a three-week Psychiatry rotation followed by a three week Orthopaedic rotation.

I found my Psychiatry placement very interesting and this was mainly because it was different from what I had anticipated. The closed psychiatry wards are situated in one of the old buildings in the hospital grounds. There are three psychiatry wards, aptly named Wad (ward) 1 – 3. Wad 1 and 3 are the male psych wards and Wad 2 the only female psych ward in the hospital. Three security guards are permanently positioned at the entrance at each of the wards. The wards were in a way similar to the psychiatry wards I have seen at the Homerton hospital during my 5th year SSC in that they had a communal area for patients and a nurses station/office. However unlike the wards in the UK, in each bay there were approximately 6-8 beds and provided patients with very little privacy. The psychiatry clinics were situated in a newly built building and I was very grateful for the air conditioning in this part of the hospital!

During my psychiatry placement, I was attached to general and old age psychiatry during the first two weeks and community psychiatry during my final week. I spent my time during the rotation attending clinics and wards where I was able to observe consultations and ward rounds. Unfortunately, I was unable to understand the majority of the patient consultations as they were conducted in Malay or Chinese. I was however able to conduct parts of the mental state examination on these patients by observing them during the consultation. The doctors were very helpful and would summarise the cases for me at the end of most patient consultations and then discuss the management options with me. For the patients that were able to speak English, the doctors encouraged me to take histories and then present the case to the doctor in charge. I found this very useful and I was able to practice both my psychiatry history taking skills and presenting skills. The common psychiatric conditions that I came across during my time both in clinics and the wards were depression, schizophrenia, schizo-affective disorder, bipolar affective disorder and obsessive compulsive disorder. One distinctive difference between psychiatric conditions in Malaysia and the UK is that alcohol related/induced psychiatric

conditions are relatively rare/under-reported in Malaysia and this is mainly attributed to Malaysia being an Islamic country.

In HKL, electroconvulsive therapy (ECT) lists run three times a week and each list has approximately 10-15 patients. Unfortunately, I was unable to witness ECT during my time at the hospital because the sessions clashed with my timetable and this is something I regret because I have never witnessed ECT in the UK and so was interested to observe it. The doctors in HKL were very supportive of ECT as a common treatment for psychiatric conditions and were perplexed as to why it is not practiced more in the UK. I believe that the approach to Malaysian psychiatry is influenced more by American psychiatry than European/UK psychiatry.

I found the organisation and structure of psychiatric services in HKL different to services in the UK. New patients present to hospital through self referral to the psychiatric clinic during office hours (8.30am-4.30pm) where they are triaged and then seen by a registrar or consultant or present to the Emergency department out of hours where they are seen by the on call team. When I asked if the equivalent of General Practitioners referred to the clinic, the doctors said this was not practice in Malaysia. HKL is a government run hospital and I was surprised to find out that patients pay for consultations in all clinics but this was subsidized by the government. For Malaysian residents this would cost 6 RMY (equivalent 1.2 pound) and for non-Malaysians this would cost 60 RMY (equivalent 12 pounds).

In the clinics and wards, there were no computers and everything was documented by hand. This included clinic appointments, where each doctor would have their own ledger to document patient appointments and patients would have their own green booklets to document appointment dates and times.

During my 3 weeks in Orthopaedics, I spent time in clinic and attended theatre lists and grand round. The clinics were very busy and I shadowed mainly house officers and was able to examine patients under their supervision. I was surprised at the organisation of the clinics because 4 different patient consultations ran simultaneously in one room and this gave patients little privacy. The main orthopaedic conditions that I came across in clinic were fractures secondary to trauma, especially road traffic accidents and sports injuries. Surprisingly, the orthopaedic team in HKL managed diabetic foot ulcers. There were no computers in the clinic rooms and this meant that all x-rays had to be interpreted by the doctors. I did struggle at times to interpret some of the x-ray images but the doctors were helpful in helping me to improve my skills and also my anatomy knowledge. In main theatres I was able to observe hip hemi arthroplasty and total knee replacements. Procedures such as carpal tunnel release surgery and ganglion excision were performed as day cases, which I was also able to observe. I used the time in surgery as an opportunity to ask questions to help improve my anatomy knowledge and the surgeons were very accommodating.

I would describe my elective experience as an amazing and once in a lifetime opportunity. I am so glad that I chose to go abroad for my elective and experience medicine in another country. KL itself is a great city, and the people were very helpful and friendly. After my first couple of weeks in KL, I had exhausted most the things to do in the city, but it was relatively easy to organise weekend trips out of the city to places such as Melaka. HKL is a massive hospital, with numerous buildings each dedicated to most specialties. My first day in the hospital was a bit of a mission in itself to orientate myself around to register for the elective and pick up my ID card. By the first afternoon, I'd found my bearings and also my way to the hospital canteen (I recommend the chicken rice). The doctors and nurses in both the rotations were friendly and eager to teach and also to learn about Medicine in the UK.