

Aitor de Gea Rico  
Final year Medical Student  
Barts & the London School of Medicine  
Buenos Aires, April 2014.

## Head and Neck Surgery: an Argentinian experience

Buenos Aires is the capital and largest city in Argentina. It is also the second largest metropolitan area in South America after Sao Paulo in Brazil. It is an autonomous city since in 1880 was federalised and removed from the Buenos Aires Province. In the census of 2001 there were 2,891,082 people living in the town. It has a large number of hospitals including public, policlinics and private hospitals, the also called "sanatorios".

Argentina does not stint on health care, spending 9.5 per cent of GDP, matching European levels. However, I was told that services were badly disrupted by the financial crash in 2001-2.

Care is generally good, but with fewer facilities in parts, particularly the poorer North. The country is adequately staffed by doctors. There are 3.2 practising physicians per 1,000 citizens. That is slightly down on Western European averages, but more than in the UK (2.7 doctors per 10,000).

Health care is mainly provided through three systems. The public system is free health care for all, which is written into Argentina's constitution. Standards vary, as do waiting times for consultant appointments and surgery. The "obras sociales" or union-backed health insurance funds are the system used by employees or staff groups. There are more than 300 such health funds, with each chapter being organised according to the occupation of the beneficiary. Cover varies greatly, as does care provision. Finally, the private system covers nearly two million Argentines. They use private medical insurers. Private hospitals are usually better equipped and better staffed.

I benefited from arranging my elective clinical attachment in a Head and Neck Surgery Unit with clinical practice in a mixture of settings, a private hospital named Hospital Británico de Buenos Aires and a public one called Instituto de Oncología Angel H. Roffo. I certainly enjoyed being exposed to both the public and the private health provision and had a good insight on how both systems work within this specialty.

The Hospital Británico de Buenos Aires is a private community hospital that has been providing care to the population in the city for 168 years. Initially established in 1844 by a group of British citizens living in Buenos Aires, it has currently a strong teaching and research platform being a University Hospital for the UCA (Universidad Católica Argentina) and a teaching unit for the UBA (University of Buenos Aires). I was there attached to a team of two Head and Neck Surgery Consultants, Mr A. Cameron and Mr R. Adán and a junior trainee, Dr M. García Resident in General Surgery, who was completing his 3 months rotation. Both Consultants had had training as General Surgeons completing a basic rotation of 4 years in General Surgery and further training in Head and Neck Surgery as a post-basic specialisation.

Mr R Adán was also chief of the Head and Neck Surgery team at the biggest oncological hospital in Buenos Aires and Argentina, the Instituto de Oncología Angel H. Roffo. "El Roffo" as called by clinicians and patients alike, is the result of a project developed by Drs Cranwell and Roffo and subsidized by the Academia Nacional de Medicina in 1922. It was specifically launched with the aim of studying and treating cancer and currently holds 63870 consultations a

year. The surgical section intervenes between 180 and 200 patients per month with 6 fully equipped theatres. The medical section holds a Day Unit treating 400 patients with ambulatory chemotherapy. The hospital currently belongs to the UBA and provides teaching to more than 300 medical students per year. It also has a large Nursing School. I attended this hospital three times a week, normally there were two all-day sessions in theatre and one clinic a week. I was there attached to the Head and Neck Unit which included Mr Adán and two other Consultants, Mr Garayalde and Mr Jaciansky. There was also a 3<sup>rd</sup> year Resident in General Surgery and another Medical Student completing her attachment in Surgery.

It was interesting experiencing the differences between hospitals. El “Roffo” had been built in the early years of the 20<sup>th</sup> century and had not suffered significant changes since. I noted it was formed by a number of old pavilions erected at different stages with no homogeneity and separated by outdoors corridors. It was also striking the site where we hold the outpatient clinics, being a rather small, temporary like construction with a tiny waiting area and a long cue of patients waiting outside. Patients were seen in the same room with chairs separated by 5 meters from each other where maintaining patient confidentiality was impossible. I was told that patients had to wait long time, even months sometimes for surgery to treat cancer and there had been cases where operable patients had been cancelled due to the advanced stage of disease at the time of surgery. However, “Instituto Roffo” has huge popularity and excellent reputation not just within the city and the country but also internationally. It was well equipped and had the best professionals in oncological medicine and surgery in the country. It is also well renowned for its research and under and post-graduate teaching and there was large competition amongst medical students wanting to do their specialist training there. The experience was indeed very rewarding not just from a clinical point of view but also from the human, fraternal perspective. I had the opportunity to see a large number of patients in clinic and managed to take histories and discuss exceptionally interesting cases given their late presentation with advanced disease coming from all around the country and from neighbor Latin American countries. My involvement with the team was the highlight. They were a cohort of really nice, welcoming and very supportive professionals. I felt the aforementioned clinic setting provided a very friendly, warm and comfortable environment where patients felt well treated and clinicians supported each other making the whole experience wonderful. Patient-clinician relationship was close and familiar but still professional and this I thought made a difference.

The Hospital Británico on the other hand, was a much newer space with very well organized and equipped clinical settings. Theatres were equipped with the latest technologies in surgery, clinics were well structured and run smoothly and wards were all new and tidy with the majority, holding individual rooms for patients. It was a very pleasant environment. I mainly worked and socialised with the General Surgery junior doctors team. They were all accommodating and friendly and I noted their hard work and support amongst themselves especially seniors with juniors. They were like a family and they lived in the hospital!

The clinical experience was excellent and I gained invaluable exposure to some surgical procedures I had not seen during my years as a maxillofacial trainee. A mixture of thyroid, and parathyroid pathology, neck tumours, cysts and oncological procedures including cancer of the larynx and vocal cords completed a fascinating 6 weeks period with this Head and Neck Surgery team.

I really value the attachment, I would recommend it to every student colleague and will definitely return as soon as I can.