

Elective Report Vanuatu 2014

During April and May 2014 I undertook my medical elective at Port Vila Hospital, Efate, Vanuatu. I was placed on the medical ward for the duration.

Describe the pattern of diabetes mellitus in Vanuatu. Discuss the pattern in the context of global health.

Diabetes mellitus is a chronic disease of increasing prevalence that presents a major burden on the health of people the world over. A great deal of morbidity and mortality may be attributed to the disease and as a result, it exerts a great deal of financial impact. From my relatively brief time in Vanuatu it was clear that the nation does not buck these trends. In fact, from my snapshot it would be fair to say that type 2 diabetes is more common than in the UK and that the prevalence may be comparable to that observed in the South East Asian population of East London. These assumptions are supported by statistics gathered by the International Diabetes Federation (IDF), which show the prevalence of diabetes in adults (aged 20–79) in Vanuatu to be significantly higher than the average worldwide in all age groups (Figure 1). The overall prevalence of diabetes in adults in Vanuatu in 2013 was approximately 21%, while there were 27,950 newly diagnosed cases.

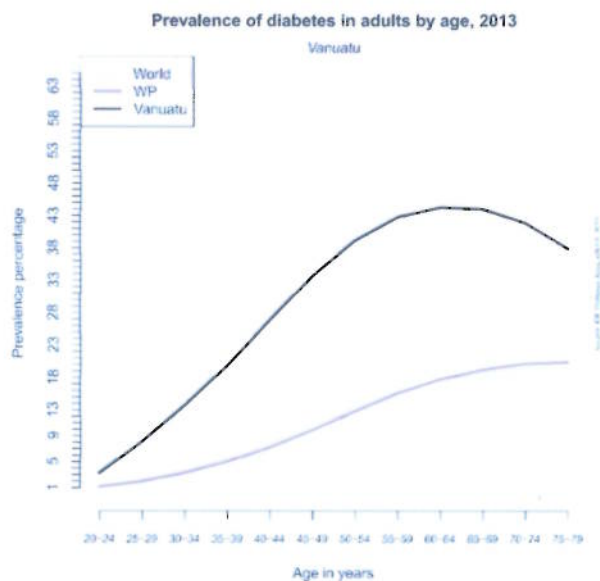


Figure 1 - The prevalence of diabetes mellitus in Vanuatu, 2013

How is diabetes mellitus managed in Vanuatu? Compare this to the management of diabetes in the UK.

The management of diabetes in Vanuatu appears to be poor. During my short stay there were a large number of patients admitted to the medical ward with very high blood sugar readings while others complained of symptoms secondary to recognised complications of diabetes. There are a number of explanations for the poor management of this common disease. Firstly, and perhaps most importantly, many of the local population are relatively poorly educated about their conditions and as a result had little understanding of how important it was for them to adhere to any medication prescribed to them. Furthermore, local attitudes towards

'western' medicine when combined with the widely held belief that illness is equivalent to weakness (stigma) leads to a very poor adherence with treatments, even when its importance is understood. Secondly, there are only two relatively affordable medications for the management of diabetes; insulin and metformin. Most of the population do not have access to 24/7 electricity and therefore cannot store insulin safely. Metformin is often not tolerated due to its gastrointestinal side effects. These problems result in a large number of untreated diabetic patients and a high incidence of diabetic complications such as renal failure, retinopathy and limb amputations.

Within Vanuatu there are only 2 major hospitals that are responsible for a population of 250,000 people that are spread over 82 inhabited islands. This obviously presents its own difficulties to the management of patients with diabetes.

In the UK, patients with diabetes are managed by a multidisciplinary team that includes a hospital consultant, diabetes nurse specialists, general practitioners, podiatrists, physiotherapist and occupational therapists. There are numerous medical treatments available to patients and patients are seen at least every 12 months to screen for complications of the disease.

How are chronic conditions managed in the community?

The management of chronic conditions in Vanuatu was difficult to assess. Outside of the main two hospitals there is very little healthcare infrastructure. Many people live in relatively inaccessible locations on islands which are inaccessible in themselves while many remain in tribal villages untouched by the west. There are clinics that are supported by Australian, New Zealand and Japanese aid as well as an ambulance service in the capital city. There are no general practitioners and therefore very little evidence of regular monitoring of patients with chronic conditions such as diabetes. This goes some way to explaining the poor management of the conditions as well as the number of patients attending hospital with diabetic complications.

Aim to improve clinical assessment of patients. Aim to improve practical skills. Reflect on all aspects of the elective period.

My time in Vanuatu was very useful. I was able to observe and be involved in the management of patients in a much more restricted healthcare system than that with which we are blessed in the United Kingdom. Working with less experienced doctors than those I am accustomed to in the UK, led to more responsibility as well as a feeling of empowerment when it came to decision making. I was able to practice some basic practical skills such as blood taking but there was little scope for more complicated procedures.

It was particularly of interest to me to see a totally different country and culture than the UK. Vanuatu was certainly not a disappointment.

Vanuatu is a beautiful country with lovely people. I was lucky enough to spend some time exploring a few of the islands.

Overall it was a brilliant, once in a lifetime experience. All the people I saw and the places I went, I will never forget.