

Elective Report

I organised my elective placement in the city of Dubai which is one of the seven cities of the United Arab Emirates. I decided to do my elective in cosmetic surgery as I have a keen interest in this field and I thought this would be a good opportunity to explore this speciality. I also wanted to gain a taste of cosmetic surgery alongside gaining an insight into the healthcare system in this country and how it compares to the NHS healthcare system in the United Kingdom.

There are a lot of private hospitals in Dubai and hence the vast majority of health treatment here is via the private sector. Cosmetic surgery is done under private health care. There is a government funded health system which is only reserved for the local citizens. Due to the expanding population of expatriates which are about 85 % of the whole population the healthcare system has now shifted mainly towards private healthcare with many private hospitals now developing. The standard of healthcare is increasing which has largely been helped by the development of Dubai healthcare city. This idea of private healthcare is completely different to that of the NHS which we are fortunate enough to have within the UK. However cosmetic surgery within the United Kingdom is now rarely carried out on the NHS and is mainly done privately.

During my elective placement I was able to sit through a wide variety of clinics and consultations. I found this to be a highly interesting experience for me. The consultations were different to the type of consultations I was used to whilst at medical school. I quickly realised cosmetic surgery is all about what the patient wants and therefore the doctor tailors his treatments entirely to the desire of the patient. This was very different to the consultations I had previously experienced which were about what the patient needed and what was in the best interest of the patients. I learnt that cosmetic surgery is most common in women but now is becoming more popular amongst men too. The most common procedures carried out were rhinoplasty, breast augmentations and liposuction in women, and in men the most common were breast reduction and hair transplants. This is very similar to those carried out within the United Kingdom.

I was able to learn a lot from my consultant through the consultations. I picked up some clinical skills as well good practical skills such as minor suturing. I was able to see a wide variety of cosmetic surgeries such as blepharoplasty, abdominoplasty, liposuction, breast augmentations, rhinoplasty and lip reduction surgery. In the clinics I was able to see minor operative procedures such as excision of a mole, excision of a ganglionic cyst and the administration of Botox injections. During the surgical procedures I received good anatomy teaching from my consultant. I therefore feel much more confident in my anatomy knowledge; especially with regards to the anatomy of the abdominal wall.

As I mentioned previously cosmetic surgery costs are not funded by the government and so all the costs have to be covered by the patient. This concept of private health is different as the patient is always looking for the cheapest option and this may not always be in the best interests of the patient, therefore it was very interesting to see how the consultant dealt with such issues. Since my elective was organized in a private hospital, even the cost of procedures such as the excision of a mole was not covered by the government. Patients often opted for the cheapest option which involved the patient deciding to do certain procedures under local anaesthetics in the clinic rather than doing them under GA which would often double the price due to the hospital costs and the involvement of many more medical professionals. An example of such a case involved a patient I saw that came in wanting a lip reduction and a nose reduction. He wished to have the procedure under GA as he was quite anxious about being awake, however once the price of having it done under local anaesthetic and general anaesthetic was discussed the patient opted for the local even

though he was quite fearful. This type of case put the surgeon in a dilemma as he lost a little confidence in the patient being able to tolerate the procedure under local anaesthetic, with this slight doubt in his mind the surgeon still went ahead with the procedures and it was a success with no problems.

The clinics were very interesting as I was able to see a wide variety of patients from different nationalities and ethnic backgrounds. It was also very interesting to see how the patients portrayed their problem to the consultant. For example, in one particular case there was a patient who was very distressed about the shape of her nose to the extent that she said she was embarrassed to go anywhere in public as she had become so conscious about the shape of her nose. I never realized that facial aesthetics can play such an important role in a person's life, and this was the first time I was able to understand that aesthetics can be just as distressing to a patient as many other health problems and chronic diseases. I learnt that aesthetics is more than just a field of glamour but it can also be a condition that significantly impacts a person's life and lead to specific cases such as this which can be quite distressing for the patient.

The part of the attachment I enjoyed the most were the surgeries as I gained good anatomy knowledge and the surgeries were very interesting they were something new to me as I had never seen such surgeries before. The part of the attachment I didn't enjoy so much were the minor operative procedures as I found them quite boring and repetitive. Botox injection administration was very common. Initially I found it interesting but then it became quite boring and repetitive. I also don't find the procedure particularly rewarding as the effect wears off every 4-6 months, so the patient has to keep coming back to the clinic for a repeat administration of the Botox.

To conclude, my elective placement was organized in Dubai in cosmetic surgery. I really enjoyed this attachment as I felt the clinical exposure I had here was different than I had experience throughout my time in medical school, hence the reason why I organized my elective in this particular speciality. I was able to see a wide variety of major surgical and minor surgical procedures. I was also able to see a wide variety of consultations which I found particularly interesting as consultations in cosmetic surgery are very different to a standard general medical or surgical consultation. I would definitely recommend this elective to upcoming fifth year medical students as this is a good chance to observe different cosmetic procedures and observe the healthcare system in this part of the world.