

# An brief experience in Obstetrics and Gynaecology

## Abroad: The Belizean Story

Belize, as a country, is vastly different to many of the Central and South American countries, let alone the UK. It is extremely underdeveloped and its facilities are much more limited due to the lack of resources available in the centre. Locals may have to travel to different towns for high level emergencies as the local centres are not equipped to deal with such cases. Having said that it is interesting to see how people do not rely on modern medicine or drugs as heavily as we do in the UK. In some ways, they are still managing patients with no pain management, not even gas and air. Women in Belize give birth naturally and although some women choose to do this in the UK, Belizean women are not given the choice.

The population is completely different to what is seen in the UK, which is an extremely multicultural society with women of all shapes and sizes. Within Belize, the demographics are roughly the same, very petite women with a small frame in their younger years, but as they get older they seem to tend to gain weight centrally. Additionally, females that were under obstetric care were very young, in fact most of them were still girls or young adults at the most, when they come in with their first pregnancy. It is interesting because the UK government launch campaigns and health promotion schemes to encourage safe sex practices to reduce the incidence of sexually transmitted infections and teenage pregnancies, but within Belize it is the norm to have children at such a young age.

In San Ignacio Women's clinic, there are a handful of doctors and nurses as it is a very small centre. Although it seems that there are a vast number of patients being seen in clinics every day. On some days, a doctor can see around 40-50 patients in a morning session. Obstetric and gynaecological examinations will include a brief physical examination with chest, abdominal and neurological examinations. However, everything is carried out at a relatively quick speed, but despite this I could never understand how the doctors managed to go through so many patients in one session. By far, the biggest women's health related issue is pregnancy in Belize. It seems that gynaecological conditions are much more rarely seen. What is interesting is that within this centre, they will probably see only 2 births a week, compared to a busy hospital like Whipps Cross that probably sees around 15-20 births per week. This definitely puts things into perspective as it is very easy to get caught up in the working environment you are used to, but to see the complete opposite makes an interesting change. In terms of the examination techniques themselves, these are no different to the ones that we use in practice within the UK overall. This was comforting because no matter what the infrastructure of the medical practice may be in a country, the basic clinical skills and medical knowledge always remains the same.

In terms of medical practice, as mentioned before there is a handful of doctors within the hospital, but there is one main doctor within the local town. He is extremely well known by the local population and he is first point of call for most medical emergencies. In fact, the ambulance service will take patients to his private residence in the middle of the night or they will come and pick him up to take him to the health centre. He will assess the patient and if they are stable he will continue to make a management plan for them or alternatively, he will send these patients to higher trauma

level centre. The San Ignacio Women's Clinic has a basic resources but it was interesting to see how very little they had available and how there was often a lack of materials available. What was striking was how old the CTG machine was, despite the fact it was completely functional and did the job, it was definitely extremely old. Even the ultrasound was nothing like some of the state of the art equipment that we are extremely fortunate to have. It just goes to show that we rely on expensive equipment to make our diagnoses, but in other less developed countries they are still able to function without it. However, having said that statistics have shown that maternal mortality in the UK is lower than that of Belize, so there is reasonable justification for the equipment.

Belize has both public and private healthcare systems and there are 3 regional hospitals with several health clinics in rural areas. Public healthcare is available to everyone in the country. There are no known restrictions. However, it is clear that these health centres are understaffed, lack the proper resources, problems with management and as a result there is a reduced access to quality care. However, as most patients are unable to afford private healthcare, they are left with no choice but to utilise what is at their disposal. However, these patients don't tend to complain and have a lot of respect for the medical staff. They listen carefully to the advice given to them and tend to follow it properly. There is a sense of gratitude from all the patients and not once did any patient show resentment towards the doctor looking after their care. This is interesting as it is often within the UK system that patients are unhappy and can also seem very unappreciative while refusing to listen to the advice being given to them.

Belize has adopted the disease prevention by vaccination and it seems to have been very successful as there have been no reported cases of poliomyelitis or measles in over 20 years within Belize. Having said this, there are many national concerns of disease including malaria and respiratory diseases. They are also actively working towards health promotion, in particular with sexual health as HIV/AIDS is a problem within this country.

This is very much a developing country in more ways than one. It seems that there are so much that needs to improve but the complete lack of resources and funding makes it very difficult. It seems that there are also very few opportunities available for locals and as a result, there is a lack of motivation. This is not just in medicine but throughout the country. However, the people are hard working and have managed to come so far with the limitations that have been posed to them. An important take home point from this elective period is that this profession is versatile with so many opportunities available to explore and it does not just have to be in the country you train in.