I chose to do my elective in St Peters hospital surrey, so that I could further expand my knowledge and interest in vascular surgery a little further. I chose to stay in the UK to simply make things easier logistically, and because I believed that vascular problems, would be less common elsewhere apart from the west, something which I came to reflect on later.

Over the past few weeks which I have spent on my elective, I have gained a lot of knowledge and experience from which I have a lot to reflect on. By spending my elective in vascular surgery I've now gained a much greater appreciation for the field and what it involves. Seeing the breadth of the speciality was quite an eye opener, as my previous exposure to this field has been quite limited.

The reason I chose an elective in vascular and general surgery was so that I could improve my surgical knowledge, as I felt that that was something I felt was always slightly lacking. This was an opportunity to finally focus on improving my surgical and anatomy knowledge, which is something all doctors must be know well, regardless of which speciality they are in. So I felt it was necessary for me to use this chance to improve my understanding of the topic. Spending the last few weeks in St Peters hospital in Chertsey, was expectedly quite similar to my experiences in hospitals in and around east london, however this time I had a bit more freedom to truly appreciate the scope of the field.

Most of time was spent either observing surgeries or sitting in clinics, which gave me not only information on the technical skills involved in surgery, but also the medical and background knowledge involved. The types of surgeries I saw involved AAA repairs, carotid endarterectomies, stenting, varicose vein surgery and angioplasties. Although I had seen some of these before, this time I managed to learn more about the technical aspects of them, and learn more about them, for example how EVAR repairs were now becoming more and more common compared to open repairs, and how endovascular surgery itself is rapidly advancing and becoming more popular, due to reduced complications of surgery and shorter inpatient stays etc, but this is meaning how surgeons are having to practise more different skills, and issues of long term effects still being under research.

I also saw how to deal with patients and what sorts of questions to ask when history taking. Although I already had basic enough knowledge and understanding of these, this was a good chance to improve them. For example in clinics, when taking histories for new patients, and watching the other doctors I saw the importance of not only taking a full medical history, but how important the relevant risk factors were. It was something which stuck out to me it particular, almost every patient in the vascular surgery clinic had similar risk factors, such as diabetes, cardiac disease or other cardiovascular risk factors, or was a smoker.

The classic patient was an overweight diabetic, smoker with angina who didn't exercise; this made me think that vascular problems are one of the consequences of a western lifestyle, and that perhaps that is why it is such an important field to specialise in. I came to realise how important the role of the doctor is not only in diagnosis and management, but also with primary and secondary prevention. A large percentage of patients simply had no idea at how they were putting themselves at further risk, something I think as medical students we take for granted. A lot of patients don't always realise the simple things they can do to minimise risk.

I also got to see how effective this was; the common advice to make lifestyle changes such as to lose weight, do regular exercise, stop smoking, seemed to make a huge difference in follow up patients

who were suffering from intermittent claudication, after making these changes reported much fewer symptoms, and this highlighted the importance of preventative medicine to me, previously I had not put much thought into the degree of change this advice can make, but seeing patients having almost no symptoms following just lifestyle changes, has made me realise how important it is to advise patients properly, and is something I will definitely put into practice myself.

In summary my elective in vascular surgery was a great opportunity for me to further educate myself about the topic, from spending time in theatres, to taking histories from patients, although this was similar to my experiences in the past, I was able to get a lot more out of the experience this time, as now I had a much bigger knowledge base, and wasn't merely following a routine, but now understanding more about what was going on, and I learnt many valuable lessons from which I will take away and put into my own practise, once I start working as a junior doctor in August.