ELECTIVE (SSC5c) REPORT (1200 words)

A report that addresses the above four objectives should be written below. Your Elective supervisor will assess this.

Elective Reflection

Title: Community Medicine

The topic of my elective is community medicine, based in Bristol. I chose this topic as I am interested in becoming a GP in the future. Therefore, further exposure in primary healthcare would be a very beneficial experience for me. In addition to carrying out my foundation year training in Bristol, I will also like to practise in this city in the future.

Objective 1: Describe the pattern of disease/illness of interest in the population with which you will be working and discuss this in the context of global health. What is the pattern of disease seen in Bristol?

My experience in primary care has been confined to East London, it would therefore be interesting to contrast this to primary care in Bristol. Bristol is also a large city with a diverse population, however I expect there to be differences to what I have experienced in London. The demographic of patients seen in Bristol were mainly middle-aged and were of Caucasian ethnicity. The majority of patients were upper class with professional jobs.

As with primary care in any location, a diverse range of conditions were encountered on a daily basis in Bristol. However, patients coming in with mental health problems was a surprisingly frequent occurrence. The main mental health conditions encountered was depression, and to a lesser extent anxiety, as well as a combination of both conditions. Consultations of these patients involved risk assessment, addressing of their concerns, as well as initiation and implementation of management plans. Other consultations involved the long-term management of chronic conditions, such as hypertension, diabetes, COPD and asthma. Management of these conditions involved patient education, lifestyle advice and medication review The very high prevalence of mental health problems in Bristol was in distinct contrast to what I have experienced in East London. Although mental health problems are prevalent in East London primary care, they are significantly less prevalent than in Bristol. From my experience, a large proportion of primary care consultations in East London were dominated by vascular disease, hypertension and diabetes.

Objective 2: Describe the pattern of health provision in the area you will be working in: what are the differences between healthcare provided to patients in primary care in Bristol, compared to London?

As is the case for the whole of the UK; the vast majority of healthcare provision is on the NHS. However, in Bristol I have found that a greater proportion seek and opt for private healthcare. The reasons behind this are the long waiting lists for tests and treatment, as well as a small percentage requesting a second opinion. An additional reason for this is that the patients I encountered in Bristol were of higher income, compared to those in East London who were of lower earning backgrounds.

However, long waiting times for GP appointments remained a prominent feature. This caused patients to go into A&E for non-emergency reasons. This would then subsequently put a strain on secondary healthcare services. There have been attempts to combat these issues by implementing evening and weekend appointment slots. However, this issue needs to be addressed urgently on a national scale in order for the NHS to continue functioning.

Objective 3: Health related objective: how important is health to the patients and how does their lifestyle affect their health?

Overall, the vast majority of patients encountered appreciated the importance of their health. This was evident by the number of consultations that was occupied by patients requesting lifestyle advice and information for ways to better their health from the GP. The majority of patients who were given lifestyle advice adhered to it. The importance of the GP effectively communicating the consequences of not following the lifestyle advice is pivotal for this adherence. However, there were still a number of patients who were not compliant with medication use and were not following basic lifestyle advice. Examples included diabetic patients who had persistently high blood sugars despite being prescribed maximal hypoglycaemic therapy, as well as advanced COPD patients who continued to smoke despite having frequent infective exacerbations. In general, I observed that the patients suffering from mental health conditions were far less likely to pay attention to their physical health and follow lifestyle advice.

Overall, the more educated patients were better informed on their conditions and often came to their appointments armed with significant medical understanding. On reflection, I have learnt the importance of communication skills of the doctor when relaying key information to the patient with regards to their health.

Objective 4: Personal/professional development goals: learn about the presentation and management of common conditions encountered in primary care.

One of my key objectives from this elective was to gain further insight into primary healthcare, as this is the field of medicine that I would like to pursue in the future. From spending time with my GP supervisor through tutorials and teaching sessions has helped achieved this. I now feel a lot more confident in the diagnosis and management of the conditions that patients are most likely to present with in general practice. Learning about community medicine in Bristol, an area where I will be

working in as a junior doctor, and its similarities and differences to London has proven an invaluable experience.

Being exposed to the common conditions in primary care has helped me to build upon my thought process and critical thinking with regards to formulating diagnoses and management plans. I have also received tips and important points that will help me to work well as a junior doctor, based on my supervisor's past experiences.

Overall, this elective has helped me to confirm my ambition to become a GP in the future, as well as better equipping me to care for the diverse range of patients and conditions likely to be encountered.