

## **ELECTIVE (SSC5a) REPORT (1200 words)**

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

I have found my time at Karl Heusner Memorial Hospital very interesting. I have a strong interest in paediatrics thus have been placed on the paediatric medical ward for this placement. During Covid-19 the paediatric ward got changed to a mixed medical ward and any paediatric patients were placed in the paediatric intensive care unit. This has not changed since and so the ward I have been on looks after both the general paediatric patients as well as those requiring intensive care. This means that there are only eight beds available, therefore during disease outbreaks, such as gastroenteritis, the ward can become very over run.

I have had the opportunity to sit in on some outpatient and community clinics. In these clinics I learnt that the recommended way to wean a child onto solid food in Belize is very different to how the NHS recommends weaning. In the UK, it is recommended that from 6 months old you introduce your child to all foods- including those that have a higher risk of being allergens such as nuts, shellfish and eggs but just ensuring that you only introduce them one at a time so that any reaction can be identified. The only foods that should be avoided until 1 year of age are salt, sugar and honey due to the risk of botulism. Whereas, in Belize there is a chart that parents are advised to follow with foods only being introduced at certain ages. For example, they recommend that wheat is not introduced until after 8 months of age. I learnt that this is to try and help minimise the risk of allergies developing therefore I am keen to do some more research into the prevalence of different allergies within Belize compared to the United Kingdom to see if these different methods of weaning have an impact.

Karl Heusner is the only tertiary hospital in the whole of Belize, a country with a population 405,272. Therefore, it receives patients from all over the country. Despite this being the only tertiary centre there are no specialist paediatric doctors here, therefore, for example, if a child has a cardiology problem then they are managed by both the adult cardiologist and the general paediatricians. This is the same for surgery with there being no specialist paediatric surgeons, therefore many patients have to be transferred to either Mexico or the USA to receive the surgery they require. Whereas in the UK there are 27 highly specialised children's hospitals and in London alone, there are 730 beds in highly specialised paediatric hospitals. The population size of the UK is 146x that of Belize which can help to explain for the higher bed count except for that nearly every hospital in the UK also has a paediatric department in it, therefore the 730 specialised beds in London (with more specialist centres also elsewhere in the country) is in addition to all the normal hospital paediatric wards. This shows how limited the paediatric services are in Belize.

Furthermore, Karl Heusner has only just started offering chemotherapy to their adult patients and has not yet been able to offer the same to the paediatric patients, instead these patients also have to travel to the USA to receive their treatment. This can be a huge cost to the patient and their family, therefore there are a number of charity organisations that can help subsidise the costs, however very hard decisions have to be made regarding if the patient is stable enough to transfer and if they are considered to require too many resources and thus it not being fair to send them over other patients, instead having to send the patient home on palliative care. I found this very upsetting to learn about since patients are being sent home to die when there are management options available for them, it's just the cost and lack of

resources being the limiting factor. This highlights how where someone lives can have a huge impact on their health outcomes. This links to what I found from my time in Newham Hospital, East London.

Healthcare in Belize is not free which is very different to the National Health Service in the UK. Instead, patients have to pay a contribution towards the cost of their stay/ procedure. Unfortunately, this results in many patients being unable to afford the treatment that they require. For example, I saw a 2 year old patient who required a CT scan however this is a large cost to the parents and so it is not as simple as the doctor being able to order the scan and the child being sent for it immediately. Instead, the parents have to go and talk with the financial department to see if they can afford the scan, if they need a payment plan being set up or if they have to decide against having the scan due to the expense. This is very hard to watch as again the limitations in healthcare that patients have access to are due to costs.

To conclude, I have really appreciated having had the opportunity to witness how healthcare is delivered in Belize and to be able to compare this to how healthcare is delivered back home in the UK. I would like to spend more time in the future learning about different healthcare services across the globe.