ELECTIVE (SSC5b) REPORT (1200 words)

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

Exploring the differences in Emergency Medicine between Thailand and the United Kingdom

Introduction

Undertaking a medical elective at the Emergency department in Thailand provided the opportunity to compare the healthcare systems between Thailand and the United Kingdom including the similarities and differences in how hospitals are run, the protocols followed and the technology and equipment used as well as the treatment plans put into place. Despite the cultural and language differences between both counties, this elective proved to show that patient safety is of utmost importance no matter the culture or language.

Outline the disease prevalence in Thailand and the significance of it regarding global health

In Thailand, disease prevalence varies from area to area. In Bangkok, the capital city, emergency services deal with a significant patient load and medical needs due to its dense population and urban lifestyle.

In Bangkok, non-communicable diseases such a heart disease and cancer are prevalent. According to the Thai health authorities' non-communicable diseases account for 74% of all deaths in Thailand with heart disease being the leading cause. Such disease is often Socrates with risk factors such as sedentary lifestyle, poor diet and pollution which is more likely in an urban environment like Bangkok. Furthermore, according to the World Health Organisation, the total deaths grouped by category from most common to least common include non-communicable disease, ill-defined disease, and injuries. Non communicable cause is the most common cause and includes neoplasm, neuropsychiatric conditions, cardiovascular cause, respiratory disease and even skin diseases. The second most common cause of death is due to ill-defined diseases which includes respiratory infections, nutrition deficiencies, infectious and parasitic disease. Injuries are also another factor which accounts for death and is of least common cause. On the other hand, hospitals in the United Kingdom face a different scenario where infectious diseases are a notable cause for admission more than the non-communicable diseases which are significant in Thailand.

The significance of these differences in disease prevalence and emergency care between Thailand and the UK, extends globally and understanding these variations can help to create effective healthcare and address global health challenges via international collaboration and multi-disciplinary team discussions. Learning from different healthcare systems will also ensure that there is equitable access to healthcare services for all populations regardless of their geographic location or socioeconomic status.

Compare and contrast the healthcare observed in Thailand with the United Kingdom

In both Thailand and the United Kingdom, emergency departments face overcrowding issues, with patients closely monitored and attached to various equipment. However, there are some notable differences.

In Thailand, patient identifiable details are printed and taped onto beds, but the clarity of allergy information for staff is quite uncertain. Conversely, the UK employs an approach in which patient details are displayed in whiteboards above the patient bag and each patient also have a wrist band with their full name, date of birth and hospital number. If the patient has any allergies, the wrist band is red which helps staff to easily draw attention to it and consider any possible interactions before the administration of any medication.

In addition to this, documentation also varies between the two countries. In Thailand, a combination of electronic and handwritten is used, with a page for nurses to record observations and handwritten medication lists. The UK also uses a combination of two documentation methods but includes patient folders with a history of all previous admissions, results, and management plans. It is securely kept and is also a place in which all specialties involved in the patient care can record their review and management plan for the patient.

Medication management also differs. For example, in the UK, some areas provide booklets or electronic versions listing current medications with signatures of the prescribed and details of the date and time of administration of the medication as well as the signature of the administrator. This helps to ensure accountability. Moreover, bolder sections of venous thromboembolism (VTE) prophylaxis and drug allergies are also highlighted to emphasise patient safety.

Describe the cultural and social factors shaping health outcomes in Thailand

In Thailand, cultural and social factors play significant roles in shaping health outcomes, influencing many aspects from lifestyle choices to healthcare usage.

One prominent cultural factor is the prevalence of traditional medicine alongside Western medical practices. Thai culture places a strong emphasis on holistic health, incorporating traditional practices such as herbal medicine, massage and spiritual healing. While these practices can provide alternative treatment options and potentially less invasive, it could so lead to delays in seeking urgent medical attention, especially for chronic condition.

Socially speaking, socioeconomic status could also determine access to healthcare services especially as healthcare isn't completely free in comparison to the National Health Service. Urbanisation and economic development have led to lifestyle changes, including dietary shifts and sedentary habits contributing to increasing rates of non-communicable diseases such as diabetes and cardiovascular disease. Furthermore, gender roles and societal expectations could also influence health-seeking behaviours. For example, women could often prioritise their family over their own health and end up neglecting their healthcare. Traditional gender norms may also deter men from seeking medical help, particularly for mental health issues, due to stigma and perception of weakness.

In conclusion, understanding the cultural and social determinants of health in Thailand is essential for developing effective interventions and promoting equitable healthcare access.

Explain how clinical and communication skills were developed in a different medical and cultural environment

Participating in a communication skills session tailored to healthcare professionals illuminates the pivotal role of trust, emotion, and cognition in fostering robust doctor-patient relationships. These sessions emphasise strategies for cultivating trust and empathy, essential for facilitating shared decision-making processes regarding patient treatment.

One prominent aspect addressed in such sessions is the delicate task of delivering distressing news to patients, which can be navigated with the aid of frameworks like SPIKES. By following this structured approach, practitioners ensure that patients are informed in a compassionate and clear manner. The framework involves setting the stage, addressing patient perception, and providing insights, and knowledge, all while demonstrating empathy and understanding.

Crucially, empathy is particularly effective in communication, enabling healthcare providers to navigate the wave of emotions patients may experience during the stages of grief such as depression, anger, bargaining, and acceptance. Moreover, participants gain insight into the significance of nonverbal communication, discovering that gestures, tone, and posture constitute a substantial portion of communication. This highlights the importance of developing

both verbal and nonverbal communication skills to ensure messages are conveyed accurately and sensitively.

By engaging in such sessions, healthcare professionals equip themselves with the tools and understanding necessary to communicate effectively, foster trust, and navigate challenging conversations with empathy and professionalism, ultimately enhancing patient care and satisfaction.

Conclusion

In conclusion, the comparison between Emergency Medicine practices in Thailand and the United Kingdom provides a comprehensive understanding of the diverse healthcare landscapes shaped by cultural, social, and epidemiological factors. While Thailand contends with a prevalence of non-communicable diseases influenced by urbanisation and traditional healing practices, the UK faces a different scenario with a higher burden of infectious diseases alongside advanced healthcare documentation systems.

Moreover, recognising the cultural and social determinants of health in Thailand underscores the importance of tailored interventions and equitable access to healthcare services. By addressing these factors, healthcare providers can strive towards patient-centred care and improved health outcomes.

Furthermore, the pursuit of personal and professional development objectives centred around effective communication skills enables healthcare professionals to navigate diverse healthcare landscapes with compassion and professionalism, ensuring the delivery of high-quality care to patients globally.