

## **ELECTIVE (SSC5b) REPORT (1200 words)**

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

### **Understand and familiarise myself with the presentations and causes of sleeping disorders, appreciating the breadth of conditions that can affect sleep. Discuss the impact of these effects on mental health and society.**

During this elective, I realised just how wide the spectrum of sleeping conditions truly is. Certain conditions, such as obstructive sleep apnoea, have complex pathophysiologies comprising various different systems, but the treatment is relatively simple by offering a mechanical intervention such as a mandibular orthosis or a CPAP machine. Conversely, conditions such as insomnia have relatively simpler pathophysiologies, but the treatment requires quite a bit of effort from the patient in order to escape the vicious cycle that exists with insomnias. The impact of these conditions is also widely different. Patients with severe sleep apnoeas will sometimes not even realise this and will only come in to check their sleep because of the bed partners complaining of their snoring. It's only once we check their polysomnography that we realise truly how serious their apnoeas are, and how much pressure it is putting on the cardiovascular system. Meanwhile, patients with insomnias feel awful and their insomnias become a big part of their lives and mental health. In both patients, treating the condition could lead to a major improvement in their quality of life, despite them being so different in their pathophysiologies and presentations.

The impact on mental health is particularly important for sleep conditions. Almost every medical condition can have an impact on mental health, but this is especially true for sleep disorders. Patients with insomnias and OSA will never feel refreshed and might constantly feel exhausted, affecting their ability to lead their lives as they wish. Other conditions such as hypersomnia or larger sleep needs are difficult to deal with due to societal pressures and working lives and thus, these people will also be constantly depriving themselves of sleep to fit in. A sizable number of patients that came to the sleep clinic would break down in tears during the consultation, as they had been exhausted sometimes for years, which had had the effect of exhaustion of mental resources. Thus came the psychiatric aspect of sleep as a specialty, where we had to prescribe antidepressants to help people rebuild their internal resources while treating the sleep conditions.

### **Explore healthcare in Belgium and appreciate the differences with healthcare under the NHS. How does the governance of healthcare in Belgium affect patients differently and what they are offered.**

The healthcare system in Belgium is quite good. I think that what the NHS stands for is really something precious to me, and I really wish I could work in a system such as that. I think the Belgian healthcare system is a little bit more realistic unfortunately. Everyone in the country is entitled to "basic" healthcare from a fixed 7.35% of your gross salary, but then each individual can pay different amounts for different "tiers" of private healthcare insurance, allowing them to benefit from different specialties for various amounts. This thus allows everyone to still have a good standard of care no matter the income, but for the healthcare system to still get funded properly from the various healthcare insurances. While this still benefits the wealthier more than the poorer population, it also means that the quality of care in Belgium is typically quite good and that everyone can get the healthcare they need. The prescription costs, similarly to the UK, are subsidised and so, typically not too costly. The poorer parts of the population can also apply for specific status that allows them to pay much less (or even nothing) for healthcare and prescriptions, thus not putting them at a disadvantage for healthcare. Overall, just like every healthcare system in the world, it is not perfect, but it works quite well and is a system I could see myself striving in.

## **What reversible global health conditions affect sleep and how does this affect an individual's personal health and function?**

Due to the wide spectrum of sleep conditions, different global health conditions will have drastically different effects on sleep. The most obvious association is obesity and OSA. If everyone had a BMI of 20, the number of patients suffering from OSA would probably be cut by 80%. Thus, the consultant would often joke about how bariatric surgeons were the only other doctor that cures his patients, as the surgeries they offer allow patients to lose vast amounts of weight and a complete remission from their apnoeas as a result. However, being overweight has absolutely no impact on other sleep conditions, such as parasomnias and insomnias.

A number of sleep conditions are actually impacted by societal pressures in general, rather than specific global health conditions. Insomnias are a good example of this. A number of patients get insomnia due to stress related to their work, personal lives, etc... If our society was more at peace and had overall less stress, a number of patients would never have developed insomnias to begin with. Insomnias stem from the body's adaptation of sleep insufficiency and abnormal rhythms. Thus, anyone can get insomnia. However, depending on someone's personal circumstances, patients will have broadly different thresholds for this. Someone who has night shifts or generally different work hours than your average 9-5 worker is much more prone to having issues around sleep. This is not due to a global health condition specifically, but just due to how society is organised and the work people do.

Mental health is also a strong culprit in the development of insomnias, with someone having depression or a burn-out easily impacting their sleep and thus, develop insomnias. However, mental health and sleep has a complex interaction, with certain sleeping conditions causing an exhaustion of mental resources and thus, certain psychiatric conditions; while poor mental health can cause its own issues around sleep itself.

On the other hand, certain conditions are not affected at all by global health conditions. Parasomnias are caused by a person retaining a large amount of deep sleep despite being adults. While this is great for the quality of their sleep, it also means that they are at risk of having a parasomnia "crisis" following sleep deprivation. There's no specific global health condition that affects this, and this affects all sorts of people.

**Recognise the differences in the healthcare system and overall working of healthcare professionals between Brussels and London to determine which system works better for me in the future. I want to understand if Brussels works better for me as an individual and as a future healthcare worker.**

I think that rather than learn about Belgium and its people, this elective just confirmed how I felt already. Whenever I stay in Brussels, I realise that this is where I belong. The way Belgians live and interact with one another truly fits me and thus, I find myself being happier with every passing day here. This is important for me, with the context of my fluctuating mental health for the past two years. Whilst I am not going back to the UK with nervousity, as I am looking forward to working as a junior doctor within the NHS in Scotland, I do think that one of my end-goals for my life will probably be to come back to Brussels and work as a doctor here.

I find that the Belgians have a much better outlook on everyday struggles of life. People here do not get mad as easily, and don't tend to reproach as much to each other. The consultations at the sleep clinic were 30 minutes long, but depending on the presenting complaint, this would often take us longer than this. This meant that we regularly had quite some delay in seeing patients. Not a single patient complained about this. Whenever there was a problem with the CPAP machines or anything else related to sleep, the patients were very rarely angry at the medical staff, and usually everything went smoothly. I think that in Belgium, there's this overall atmosphere that everyone is trying to do their best, and that getting angry or frustrated at each other is not going to solve anything and thus, it is better to be amicable to each other and sort things out calmly.

Thus, patients tended to be more compliant with their treatments and doctor's advice, problems were resolved easier and colleagues tended to be more reliant on each other.

While working in Belgium might be more fitting for me in general, I still find the NHS to be a better system for patients in my view. The fact that patients can get any healthcare for free is something I truly believe in personally and so, I would love to see a system like the NHS work properly, offering the best patient care possible.