

CARDIO

ELECTIVE REPORT: by Nikhil Patel

With family situated sporadically in different corners of the United States of America there was an urge to see whether it was for me. I wanted not only to learn about cardiology but to understand the demographics as well as the lifestyle that an average American national practices. Whilst staying with a host family I got to experience both hospital and an everyday American life here.

An elective in cardiology is something I wanted to do especially due to the lack of exposure during my time at university. In my five years of medical school I had no cardiology experience until my final year where I took an SSC in Cardiothoracic Surgery which was a terrible SSC to do but it still intrigued me to learn more about what cardiology itself entailed as a career. Why Memphis? Stern Cardiovascular Foundation who have recently merged with Memphis Heart Clinic was recommended by a friend who had been to Memphis during her elective in previous years. They have been known to put emphasis on education; a principle inherited by the founder Dr Stern and is now being practiced by other cardiologists since his death. I witnessed many diagnostic procedures especially transthoracic echocardiogram and coronary catheterisation. The main objective was to meet as many patients and learn how to examine, diagnose and produce a treatment plan. After listening to at least a hundreds of hearts in clinics I finally managed to distinguish differences in systolic and diastolic murmurs which would be very useful skill to have as an FY1. The one thing that amazed me was how friendly people and patients were in Memphis, the lifestyle seemed more up beat and less monotonous. Whilst shadowing a cardiologist, I was attending clinics in the morning, shadowing procedures in the afternoon, the attending drug rep lead meetings in the evening not to mention the on-call I had to do twice. I had spent a lot of time with patients and being with them throughout the hospital stay to try and see how the system worked. They seemed to be proud of the American system and were very willing to teach and tried to involve me in most aspects of cardiology. In contrast to this my SSC in cardiovascular surgery at the London Chest hospital was quite the opposite- consultants there did not want to give enough time to teach and made it an unpleasant environment to be in. In Memphis I felt like I wanted to go to work rather than having to.

My objectives were mainly based around cardiology but I got to experience a lot more than just that alone. Due to an unexpected family bereavement the consultant had to take leave and offered me some options as to the next step. So I spent two weeks at Advanced Dermatology in Memphis and found a new fascination into Mohs Surgery- something I had never heard of but grew to love instantly. Originally developed in the 1930s, Mohs micrographic surgery has been refined into the most advanced, precise, and effective treatment for an increasing variety of skin cancer types. With the Mohs technique, physicians can precisely identify and remove an entire tumour while leaving the surrounding healthy tissue intact and unharmed. The equivalent to a one stop clinic where a patient arrives and has the basal/squamous cell carcinoma excised and then temporarily bandaged up whilst we look at the biopsy to see if we have got the cancer by assessing the edges. The patient is then sutured back in a cosmetically pleasing fashion. This profession seemed like an ideal career path that I would love to pursue, not only because it was love at first sight but also the financial rewards it brings. With an approximate \$15,000 per day earning for such procedure I would be silly not to look into this further.

The United States is the only industrialised country in the world without a universal health insurance system. Over a third of families living below the poverty line are uninsured. Hispanic Americans are more than twice as likely to be uninsured as white Americans while 21% of black Americans have no health insurance.

Overall the objectives for my elective had slightly changed but I gained more than what I had originally set out to do. Learning about the country and how the healthcare system works was an eye opener especially when some citizens cannot even afford to provide care for themselves or their family. Now although that is sad and they do not run an equivalent NHS system there it has shown me that the American system may not be as good as once thought. But saying that the NHS is not great either- from first hand experience I have notice patients being managed without adequate equipment and materials, the lack of cleanliness can make even healthier individuals unwell. There are so many pros and cons in both sides of the atlantic. For me personally I prefer the way the American system works- although it seems harsh in saying this but this private practice goes on everywhere in the world including India where thousands die everyday there because they cant afford it but doctors are still working there to make the best out of a bad situation.

If I had more time there I would have loved to have shadowed an orthopaedic surgeon who had a practiced next to the Dermatology clinic. If I had achieved this then I would have had a good idea on to the career path I would have chosen and may have concentrate more on that. Now my main aim is to complete my USMLE and move over to USA and practice medicine how I have seen it out there. Having said that I feel like I have gained a great experience and has made me an better and more competent doctor than two months ago. I was able to put my theoretical knowledge into practice.