

Elective report on Belize and Colombia

What are the main presentations and public health issues in Belize's polyclinics?

The main presentations encountered in the polyclinic in San Pedro, Belize, were type II diabetes, hypertension, HIV, Upper respiratory tract infections, and in the obstetrics patients it was mainly urinary tract infections. Also in this period we saw many cases of gastroenteritis. These issues are similar to those faced in east London GP clinics. They have Pap smear programme, but as in England, many women do not attend due to lack of understanding of its purpose.

How is the health service run in Belize compared to the UK?

The health service is mainly provided by the government similarly to the National Health Service in the UK. Medical treatment is free. However, patients need to pay for investigations such as x-rays and ultrasound scans, unlike in the UK. Belize's health service computer system, called the 'Belize Health Information System', is the same system used in all polyclinics and hospitals. Therefore, all patients details are available everywhere, except in the private health care sector. The government is trying to get the private sector to use this same computer system. In England, individual hospitals and primary care trusts have different computer systems, and therefore the doctors will not have all the information about the patient at first glance and will have to usually take comprehensive histories on first meeting a patient.

Health care is mainly served by the polyclinics and then the hospitals, similarly to the GP surgeries first and then hospitals in the UK. There is only one polyclinic in San Pedro, so anyone can use it at anytime, even for emergencies. There are no hospitals in San Pedro; as a result the patients would have to travel to mainland Belize for investigations, such as an echocardiogram. In mainland Belize, there are many polyclinics, and are meant for the people who live within close vicinity, unlike how it is in San Pedro. This is similar to GP Surgeries, where people who live in close vicinity are the patients for the individual Surgery.

However, Belize is ahead of the UK in using polyclinics mostly. Polyclinics are a new feature in the UK and were proposed for only London by Lord Darzi of Denham. The first few polyclinics were opened in 2009, and in 2010, the health secretary, Andrew Lansley put hold on plans to increase the number of polyclinics, but aimed to relocate the GPs to them. Polyclinics in Belize contained the doctors consulting rooms, antenatal consulting rooms, and a wound care rooms run by nurses.

The doctors and nurses work longer hours than those in the UK. Most, if not all health care professions speak both English and Spanish, as these are the two main languages spoken in Belize. 80% of the patients we came across spoke Spanish. Whereas in England, in particular London, the population is multicultural, and therefore if a healthcare professional can speak any language on top of English will usually be helpful, otherwise we have translators in person or over the phone.

What are the main trauma conditions common to Neiva, Colombia?

In descending order, the main causes of productive years of life lost and disability in Colombia are Trauma, infectious diseases, cardiovascular diseases and then malignancy. Most of the health care budget goes towards treating infectious diseases rather than trauma.

In Neiva University hospital, they receive 200 trauma patients a month. In descending order of the common conditions faced after trauma in this hospital are cardiovascular diseases, oncological diseases, biliary diseases, pneumonias, epilepsy, diabetes, abdominal problems, then renal and urinary tract infections.

The main causes of trauma in Colombia are road traffic accidents and homicide. Road traffic accidents are very common and most often fatal because half the population ride motorbikes, carrying their family on them, as their only means of transport. This plus dangerous driving, with traffic lights ignored and pedestrians ignored create very high figures of mortality and long-term morbidity. There are black vans whose sole role is to collect dead bodies off the roads, because road traffic accidents are so common and fatal.

Homicide rates are also high mainly from gunshots, due to there being lots of guns available with easy access. There is a civil war going on. The main vulnerable homicidal groups are male drug dealers and users, as well as male farmers or people who live in the countryside, as they work in producing illegal drugs.

How is the health service run in Colombia compared to the UK?

People need health insurance for health care except in emergencies, where they will receive essential care only for free. If treatment is too expensive, the patients won't get it unless they can afford it, which they are usually not able to. The government does not give enough money to the hospitals and so they lack resources. Unlike in the UK, health care is free, and free in emergency settings for non-UK residents. The government puts a lot of money into the National Health Service.

The private sector in Colombia has low health expenditure because the people running it save the money for themselves. Therefore the patients who usually go for private health care now have to go to receive care from the public sector, meaning more patients and even less resources.