

Appendix 4: Elective Report

Elective Supervisor: Dr Ernesto Salazar & Dr Jesus Castilla

Contact details: Hospital Regional de Loreto, Iquitos, Peru.

Tel: 965934939

Objectives:

1. Discuss the most prevalent presentations in Peru and how these differ to the UK.
2. Describe the healthcare system in Peru focussing on the services provided and how they differ from the UK.
3. Global health is an ever-changing branch of medicine. Describe how what you have seen in Peru and the services it offers supports this statement.
4. How has working in Peru altered your perceptions of global medicine? Reflect on these changes illustrating your experiences.

Having spent the entire elective period in just one area of Peru, it is difficult to comment on the healthcare system and the array of illnesses in Peru as a whole. However, it is possible to discuss this with regards to Iquitos, a large city in Northern Peru. Before doing this, it is useful to look at the demographics of the area in order to understand the reasons behind the state of the healthcare system.

Iquitos is one of the largest cities in Peru, with 457,865 inhabitants, and is part of the Loreto district. Interestingly, it is only accessible by aeroplane or boat since it is situated in the Peruvian rainforest. The climate is very hot and humid all year round with a humidity of 85%. These facts are highly relevant to the pattern of disease seen in the Hospital Regional de Loreto, which will become apparent later in the report.

Although the supervising consultant was a neurosurgeon himself, he encouraged his students to attach themselves to departments that they had the greatest interest in. Choosing paediatrics was, I believe, a wise decision, as I was able to witness the difference in paediatric disease prevalence between Iquitos and the UK. By doing this, I was able to appreciate just how lucky the children of the UK are in comparison to those in Iquitos. A prime example of this is the prevalence of pertussis (whooping cough) in Iquitos, a disease that is rarely seen in the UK. The consultant paediatrician on the ward explained that the reason for this high prevalence is the poor quality of the vaccine. Children are having the vaccine, funded by the government, however because of the poor quality children are contracting the disease anyway.

Another quite prevalent disease in Iquitos is Dengue Fever. This is directly related to the location of Iquitos, as mentioned above, in that it is based in the rainforest. The Amazon River is a stones' throw away from the hospital itself and many of the more deprived families actually live in shacks on the river banks. There is a very high density of mosquitoes here, which directly correlates to the high prevalence of diseases like dengue fever and malaria. Not only are there dangerous insects near the river, but also dangerous animals such as snakes. In fact, I was lucky enough to see a patient with a snake bite, something that I am sure I will never see again in my life.

Seeing patients with such alien diseases to a medical student from the UK, demonstrated just how different the pattern of disease is between the two very different countries.

Another key difference between the healthcare in Peru and the UK is the actual healthcare system and how it works. In Iquitos, health care is private and every investigation, every treatment and every consultation costs money. Patients would bring their own bed sheets in so that they didn't have to pay the cost of borrowing hospital sheets. The patients were extremely ill and often presented later on in their illness. This is likely to be due to the fact that the parents try to avoid bringing them to hospital in the hope that the issue resolves and they would not have to waste their money. They often bring their children in when they are severely ill or even when it is too late. Some families had even travelled for 6 days along the river to reach the hospital by which time their children were very ill indeed.

In terms of the general healthcare, there are vast differences between Peru and the UK. The hospital wards themselves were very basic and unsanitary. The beds were broken and dirty, the bed pans were re-used, there were insects crawling all over the medications and sinks and most surprisingly there was no handwash or alcohol gel in the hospital. Interestingly there were no curtains around the beds and a complete lack of confidentiality amongst patients. For example, the paediatric ward round would involve the consultant sitting in the middle of the room with 6 babies in their cots with their mothers sitting by their sides and the consultant discussing each case with all 6 mothers at a time. It was completely alien to me and completely different to anything we are used to in the UK healthcare system.

Whilst the health care system in Iquitos appears to be a long way behind that of the UK, global health is an ever changing branch of medicine and there was evidence that changes were in motion. There was one particular consultant in the paediatrics department in particular who seemed keen to make changes which was refreshing to see. This is best demonstrated by discussing a sad patient case in which a newborn baby died on the intensive care unit through human error. The baby, who was on a mechanical ventilator, died overnight because someone had set the machine to incorrect values. Despite this being a very preventable death, it was refreshing to see that action was taken following the event. The consultant reported it immediately to the management of the hospital and also used the information for an audit. This is evidence that

improvements are being made to the running of the hospital and the quality of health care in general. While there are clear-cut differences between hospitals such as these and those very advanced hospitals in England, it is encouraging to know that these hospitals are developing slowly but surely.

I have thoroughly enjoyed my elective placement, it has opened my eyes to the kind of challenges being faced by doctors in less privileged parts of the world and most importantly, has made me feel very grateful for the healthcare we have here in the UK.