

Elizabeth Wicks – Medical Elective – Johannesburg, Summer 2015

For my elective I worked in Helen Joseph Hospital, a medium sized hospital in Johannesburg, South Africa. I spent my time working in the Emergency Department which was split into medicine and surgery. Given the large volume of trauma patients due to both the high violent crime rate and the high road traffic accident rate I spent most of my time working on the surgical side to make the most of the opportunities and challenges which these patients offered and which may not be so readily available in the UK. This was the main reason I chose to do my elective in Johannesburg as I wish to specialise in Emergency medicine and Trauma and this represented a good opportunity to learn and improve my skills.

My expectations of a Johannesburg Emergency Department turned out to be well founded- there were a much higher number of trauma patients presenting to the surgical side than those with surgical problems which are the mainstay in the UK such as acute abdomens.

My role in the department was similar to what I had expected; I was treated as another doctor in the team, and was able to assess and manage patients much more independently than I would expect in the UK. I feel this independence I was given vastly contributed to my improvement as I was able to practice many practical skills such as cannulation and suturing as well as assessing and devising management plans on my own, although always approved by a senior clinician. Another aim of my elective was to gain confidence in clinical skills which I feel I was well able to achieve here. As well as gaining confidence at more basic skills I was taught how to intubate and insert central lines and intercostal drains, and was able to practice these under supervision.

While working on the medical side there were the challenges of a high volume of patients often with poorly controlled chronic disease and diseases such as HIV and TB which are less prevalent in the UK. There was also the challenges of resources- there were very few consultation rooms- which made the patient pathway very different from that in the UK which took a while to get used to especially when dealing with fairly ill patients. There were very few monitored beds- only 6 for medical patients and 8 beds in the resuscitation bay, which was fairly disconcerting when there were patients you would like to be able to monitor more closely but were unable to. A shortage of beds in the hospital and particularly ITU also caused problems for the ED. There were often ventilated patients that waited days in our resus bay to be given a bed on ICU or unfortunately died before a bed could be found.

The patients also displayed very different attitudes to those in the NHS. For patients in Johannesburg attending a public hospital a trip to ED is often a day long affair, even longer if imaging such as CT is required and it was not uncommon for me to see patients that I had treated still awaiting scan or blood results when I came in the next day. Even so, many patients were glad of the treatment offered even if it took a long time coming.

One of the most interesting experiences for me was on a night shift working in the surgical area. We had bays in the resus area free but no stretchers for many of them. A young man was brought into resus in a wheelchair in a state of peri-arrest due to two large stab wounds to the back. As we had no bed for him we had to lay him on the floor and it was obvious that he needed an urgent intervention to relieve the pressure in his pleural space. I had seen a thoracostomy done before and had inserted several chest drains myself, but I was handed the scalpel to do this thoracostomy. On piercing the pleura a large volume of blood poured onto the floor and the patient's breathing improved. This was my most memorable experience as it summed up the violence and lack of resources; that we had a patient in extremis lying on the floor in a pool of blood surrounded by doctors kneeling on the floor with a medical student doing a surgical procedure.