Eamonn Foley Medical Elective May/June 2018

Gorkha Reflective report

A required component of the 4th year of my university course is to conduct a medical elective project either in the UK or abroad. I was keen to use this opportunity to travel to a developing nation with opportunities to engage with grassroot medical practices, work on sustainability projects and produce a reflective style report based around pain, its management and cultural perceptions. With a great deal of help from Linda, Naomi and the Gorkha Development Scheme (GDS) I was able to achieve these aims.

After an uneventful but lengthy flight from the UK to Nepal, I spent a few days enjoying the bustling culture of Kathmandu; a rapidly developing and welcoming city that catered for western tourists whilst remaining true to its complex and diverse religious heritage. Having spent a few days in the capital, I travelled to the Gorkha via a microbus. The journey took approximately 4 -5 hours along a narrow and unmade road; the majority of this was spent admiring the breath-taking scenery as we meandered through the hills and valleys of central Nepal.

On arrival in Gorkha I was greeted by the very thoughtful and hospitable Sarita. Sarita is Secretary of GDHEDS the committee in Gorkha who work with GDS and also head of the Gorkha Women's Association and had kindly agreed to host me in her beautiful home. On arrival at the family home I met the rest of the family. Large parts of the next four weeks were spent enjoying the company of Sarita's family, playing a highly addictive traffic light game with the younger members, trading minilanguage lessons with the older members and visiting some of the many attractions Gorkha has to offer as a family.

The lifestyle, although very different, was easy to adapt to. The most marked difference was the dietary customs. A stable diet of Dal Bhat, various curries with rice and a vegetable side was consumed at least twice a day - once midmorning and again in the evening, with a lunchtime session sometimes occurring. The evening course was served promptly at 8:30 every evening with everyone in bed by 9 O'clock ready for an early 5am start. The working week ran from Sunday to Friday lunchtime, an admirable work ethic that saw the children study between 5am and 8am only to study for a further two hours when returning from school at 4pm.

Gorkha District Hospital

Gorkha District hospital is the main hospital for the Gorkha district, an area that caters for a population of approximately 270,000. It consists of 2 eight bed wards, one deigned for males and the other females. An Outpatient Department, and Emergency department and an Obstetrics unit.

The day started promptly at 9am with Junior House Doctors leading a ward round with medical students. I was amazed by the responsibility bestowed upon the young doctors — only a year or two out of medical education, they alone were completely responsible for the managements assessment, diagnosis, management and discharge. The medical students were incredibly helpful and friendly. They offered a medium between myself and the clinical staff, translating and giving me the opportunity to engage in clinical skills I would not have the opportunity to complete back in the UK. For example, I was supervised constructing a cast for a patient with broken arm; a skill usually only undertaken by specialist clinicians.

The obstetrics ward was the busiest unit in the hospital. It consisted of a delivery room, an induction room and a recovery suite. The delivery room was always busy with all four beds constantly occupied with expectant mothers. I was shocked to learn that no analgesia, not even a simple

ibuprofen, was offered to the ladies in Labour. When asking Health care professionals, the reason for this omission, I was told that the Nepalese ladies viewed pain as a necessary part of a natural process, there was a sense of great pride in a culture of resilience, and they could see no reason why such attitudes required changing. Such cases provided invaluable in the construction of my reflective report.

The Outpatients department was a manic free for all. People who had travelled hours on foot, hustled in the corridor for their chance to consult a doctor. I found it interesting that patients often crammed into the room whilst a consultation was taking place. I find it interesting that in western culture we hold principles such as patient dignity and confidentiality with such high regard; we are at a premium whereby we have the facilities to cater for these needs. At Gorkha Hospital outpatient's department however, these demands are not met, as a rapid-fire production line of consultations remains the top priority.

School hygiene Project

GDS also fund and run a much-needed school hygiene project run by the Womens Group, the project is a beacon for preventative medicine in an area where infectious disease is highly prevalent. I thoroughly enjoyed delivering this project to the local school children, many of whom rarely brushed their teeth or washed their hands before eating. The project consisted of a short presentation followed by a practical demonstration, showcasing basic hygiene themes we would usually take for granted. I was delighted by the engagement and enthusiasm shown by the children, and belief continued delivery of the project will go a long way in improving health outcomes among the fb login

paediatric population.

School Scholarship Scheme

The school scholarship scheme also funded by GDS, helps children from the neediest families in the Gorkha district. It provides vital support in the form of educational supplies and uniform for children that show a desire to learn but are often hindered by financial constraints. I was fortunate enough to be involved in the delivery of supplies for these children, a truly moving experience that allowed me to appreciate just how much simple items such school bags, uniforms and books meant to the children of Gorkha. What really impressed me was the children's willingness to engage with their studies; even at their young age, they seemed to have an appreciation of the fact that education was their greatest opportunity to escape poverty, an ideal that can be facilitated by the School Scholarship programme.

Gorkha University

In addition to these activities, I was fortunate enough to visit Gorkha University Campus. The university is situated in a remote area across the valley, and can only be accessed via a 30-minute journey on a motorbike or bus. I was pleasantly surprised by the well-equipped nature of the campus which featured sports halls and a computer suite. The classrooms were however, dull and poorly furnished with over 40 students cramming into rooms only fit for 20 people. Whilst visiting the campus, I was fortunate enough to meet two young ladies who were being sponsored by the GDS and had just completed their first year of business school. They were from very disadvantaged backgrounds, and had survived poverty and abuse to reach where they were today. It was inspiring to see that they had a real opportunity to better their situation though study.

At the end of a busy 4 weeks, I prepared to leave Gorkha with great regret. The kindness shown to me by the Medical students, Sarita's family and the whole local committee of GDHEDS was truly overwhelming. The perfect scenery and simpler way of life build around habit and routine was relaxing and a lovely change. I learnt a great deal about the importance of basic medical practice. The necessity of perfecting Histories and Examinations in the absent of diagnostic tests, and the just how greatly pain its perception and management can be altered by cultural beliefs.

I would like to thank Linda, Naomi, Zoe and the whole GDS committee in the UK for making this trip possible. Sarita, Laxman and the GDHEDS committee in Gorkha with their hospitality and kindness and Gorkha District Hospital and medical students from Kathmandu, who helped me get the best out of my project and placement.