

Medical Elective, Galle Sri Lanka

I undertook my eight-week medical elective, with the generous support of funding from the Myre Sim Fund, in Karapitiya Teaching Hospital, Galle, Sri Lanka. I was not entirely sure what to expect before arriving in Sri Lanka. The country is much more stable politically and safe since the end of the civil war in 2009. I travelled with two friends down to the coastal and historic city of Galle, at the centre of which is a colonial Dutch Fort. We stayed outside the Fort, near the hospital, and this was our base for the trip.

We arrived at the hospital, which was a very large teaching hospital. It seemed extremely busy- healthcare in Sri Lanka is free at the point of use like in the UK. We spent our first four weeks on the paediatric ward. There were many patients in each bay, without any curtains for privacy, which highlighted to me the importance of confidentiality. They did however have mosquito nets as dengue fever, rather than malaria, is endemic to Sri Lanka. Also, there were no obvious hand-washing facilities in the ward, so I was a little bit worried about infection control. However we brought our own alcohol hand gel.

We spent our weekdays on the ward rounds with the Sri Lankan medical students and going to their teaching sessions. I did not realise prior to undertaking the elective, but because Sri Lanka was colonised by the UK, the medical degree is identical to our one, and they even use all the same textbooks! The doctors and medical students all spoke English on the ward, so that was not an issue, and when we took histories from patients the medical students kindly translated from Sinhalese for us.

The next four weeks were spent on the adult general medicine wards, where we met patients with a range of conditions. I noticed that the role of the nurse was very different in Sri Lanka to at home. Also

there were no healthcare assistants on the wards. The jobs of the nurse seemed to be things like cannulas and medications, and it was the patient's family that provided care such as bathing and feeding. This made me consider food provision in the NHS, which is helpful for patients healing and wellbeing and also they may not have relatives nearby to care for them. However in Sri Lanka, which is a lower-middle income country, it seems to be a sensible way to manage their resources.

The hospital seemed fairly similar to ones at home, except it had resident stray cats and dogs living there! The availability of some tests such as ABGs and MRIs was much more limited as well. I was surprised to see almost equal numbers of male and female medical students at teaching sessions, as in Sri Lanka there are still very strong gender roles.

Outwith the hospital we managed to do some travelling during Sri Lankan New Year, which is a national holiday. We went on an incredible safari, visited some of the most beautiful beaches and explored Buddhist temples and ancient cities. I found Sri Lanka to be such an amazing country, with the perfect climate and the people there are so friendly. I loved the Sri Lankan curries, which are coconut-based, as coconuts are readily available there. I made incredible friends there with Sri Lankan medical students as well as other British medical students who were also on their elective.

In conclusion, through the support of the Myre Sim Fund I was able to undertake my medical elective in Sri Lanka, which is an incredible and beautiful country. I gained exposure to healthcare in a lower-middle income setting, and saw the limitations and prioritisation of resources. I learnt that medicine is the same everywhere in the world, and was able to meet patients with a wide range of medical conditions, which will help me to prepare for working as an FY1.