

## **Medical Elective 2016- Vanuatu**

**Matthew Peverelle**

**MD4 St. Vincent's Hospital**

### **Introduction**

In January 2016, I had the pleasure of spending four weeks undertaking a medical elective placement as part of my medical degree at the Vila Central Hospital (VCH), Vanuatu, largely thanks to the support received from the St. Vincent's Andrew Dent Scholarship. I spent the month with five other medical students from Melbourne University, and together we shared an experience that we will remember for the rest of our lives. My decision to undertake a placement in Vanuatu was driven by a number of factors. Firstly, based on reports from people who I had spoken to, Vanuatu was an amazing place to spend four weeks in- both in terms of my professional development as a future doctor, and as a place to enjoy some leisurely time in a tropical paradise. Secondly, as a medical student I have too often seen photos or videos of volunteer doctors and nurses working in impoverished nations, trying to treat patients with very limited resources and even more limited help at their disposal. This has always stirred within me a sense of responsibility- that as someone who has been lucky enough to have learned (albeit basic) medicine, it is my responsibility as a person to use my training to help others who cannot help themselves. And nowhere in the world is this more important or badly needed than in disadvantaged nations such as Vanuatu.

And lastly, in early 2015 Vanuatu suffered its worst natural disaster in its history- Cyclone Pam- which left the country devastated. To this day the country has not fully recovered. Volunteer work is always needed in Vanuatu even at the best of times, and so this need is even greater now following Cyclone Pam.

### **The Place:**

A small island nation in the south-pacific, Vanuatu and is made up of over 80 islands all stretched throughout the Pacific Ocean, and has a population of 250,000 referred to as "Ni-Vanuatans". The Republic of Vanuatu was established in 1980 after 100 years of joint colonial rule by both Britain and France. Because of this, there are 3 predominant languages spoken in Vanuatu- English, French and the national language Bislama.

### **The People:**

The people of Vanuatu can best be described as poor in possessions but rich in heart. They truly are some of the nicest people you will ever come across. Whilst in Australia people will more often than not keep to themselves in public, in Vanuatu almost every person you come across will greet you with a genuine smile and a hello and wish you a good day. This is despite the average wage being a measly \$2.50 an hour and the living conditions that they reside in more than often not being quite poor.

Our path to the hospital each day took us past villages where groups of families live. The children from the villages would all wave at us from afar, or would sometimes come up to us to say hello. There is a real sense of community and belonging amongst the Ni-Van people, and their friendliness to non-Vanuatan people really made me feel almost as if I was part of a larger family.

### **The Hospital:**

Vila Central Hospital is a 200-bed hospital that has four wards- general medical, surgical, paediatrics and maternity- as well as an emergency department (ED). The hospital is one of the only sources of healthcare in Port Vila and the surrounding islands and as such has a very high number of patients frequenting it daily.

Resources are very limited at VCH- there is no CT or MRI, no cath lab for people who have had heart attacks and only two surgical theatres. As a result, doctors are often very limited in what they can do for their patients. I distinctly remember one case where an elderly woman was brought into the ED, obviously suffering a stroke based on her clinical history and examination. Whereas in a large tertiary hospital such as St. Vincent's she would have received the very best care available- such as a CT scan and thrombolysis or surgery- in VCH all that could be done for the woman was to monitor her for any deterioration in her vitals, prescribe her aspirin to try and prevent any strokes in the future and send her home.

My time at VCH was mainly divided between the general medicine ward, the paediatric ward and the emergency department.

The outpatient clinic begins at 9am each morning. The waiting room for patients is set outside in the heat and humidity where often 50+ patients are waiting to be seen. There are no appointments, and people are seen on a first come first served basis. I was struck by how patient and understanding each person was about the entire situation. Even after waiting for hours on end, each patient was grateful to be seen by the doctor. I thought back to my own time spent in doctors' waiting rooms and felt a pang of selfishness that I have previously felt frustrated at having to wait 20 minutes past my scheduled appointment time. Yet here were these Ni-vans, some who had been waiting since 7am, patiently waiting in a cramped outpatient clinic waiting room for hours to be seen by a doctor for 10 minutes. This really put things in perspective for me about just how fortunate we are in Australia with the healthcare system we have.

### **Paediatrics Ward:**

The paediatrics' ward was where I spent two weeks with the treating team, helping to monitor and treat the children admitted to the ward.

Most children were admitted for respiratory illnesses such as pneumonia, which are very common in Vanuatu given the poor sanitation, cramped living quarters and poor health literacy. Vaccination rates are not high in Vanuatu and this makes many children susceptible to the foreign pathogens that children in Australia are able to fight off.

Perhaps the most confronting cases I saw in the paediatrics ward were the cases of marasmus (starvation) in some children. These were terribly sad stories of children who were malnourished, whose parents didn't have the food or funding to feed them, and who have come to the hospital after all else has failed. Many of these children had not developed physically and mentally as they should have at their age. In other words their growth and development had been stunted by a problem as simple as not being fed enough food- a problem that would be easily reversible in Australia, but much more difficult to address in Vanuatu given the socioeconomic issues. One 12 month old child I vividly remember had been brought in for malnourishment by her exhausted parents. She was lying on the bed with a NGT inserted for feeding, looking up at the paediatric ward round, too frail and too weak to move. She was clearly developmentally delayed and her body was that of a 6 month baby despite her being double that age. Nowhere was the difference between our Australian healthcare system and Vanuatu's more plainly visible than in this child's suffering. Fortunately, thanks to the rigorous feeding regime she was placed on, the child slowly began to

recover and achieve an acceptable weight for her age. It truly was a confronting experience and one which will stay with me for a very long time and fuel my desire to undertake more volunteer work in disadvantaged countries in the future.

The highlight of my time spent at VCH came during the nights spent in the emergency department, where I finally got a taste of what practicing medicine is all about. ED was often quiet during the day, but at night became very busy, with a range of presentations- from acute asthma attacks to car accidents to food poisoning. Given that the ED was managed by nurses after 4pm (with doctors on call if needed), we were afforded a large degree of freedom in the ED to assess, treat and discharge patients as we pleased. As medical students in Australia we would not dream of being afforded such responsibility so early in our medical career. However, given the lack of medical training in any of the nurses working in the ED, suddenly we became the most knowledgeable healthcare professionals in the hospital. Needless to say we relished this opportunity to finally manage our own patients, and with some basic guidance from the senior emergency nurse- such as medication doses and availability- we were able to gain some unparalleled experience in assessing and managing patients in an emergency setting. At one point I was having to manage and frequently monitor three patients who had been admitted for acute exacerbations of their asthma, one patient who had presented with suspected appendicitis, and a 10-month old child who had been brought in with suspected pneumonia. Whilst this was obviously quite stressful and exhausting, I finally knew what it felt like to be a medical practitioner, with people under your care who are relying on you to treat their ailments. It was a truly gratifying and invaluable experience, and one which gave me tremendous confidence in my abilities to put the years of studying medical textbooks to practical use.

I had the most wonderful time in Vanuatu and have returned to Australia richer in both personal and professional development. I will never forget some of the experiences I had whilst over there. These experiences have galvanised my desire to volunteer again in the future in the Pacific, or in similarly impoverished areas. I cannot thank the Pacific Health Fund enough for generously awarding me the Andrew Dent Scholarship, and allowing me to gain invaluable experience during my time spent in Port Vila, Vanuatu. I strongly recommend anyone who is passionate for global health, helping disadvantaged people, or having responsibility thrust upon their shoulders to consider a medical elective in Vanuatu.

Matthew Peverelle,  
MD4, St. Vincent's Hospital Melbourne.