

With the generous support of St Vincent's Pacific Health Fund, I had the opportunity to spend the month of January in the small Pacific island nation of Samoa. The purposes of my trip included conducting groundwork research for a project group aiming to implement the neonatal Guthrie test at Tupua Tamasese Meaole (TTM) Hospital, completing a clinical placement in obstetrics and paediatrics, and learning about Samoan culture in order to gain more of a holistic understanding of the lives and health of the Island people.

The Guthrie test, also known as the heel prick test, is a routine component of neonatal screening used to detect a number of metabolic conditions, such as congenital hypothyroidism, phenylketonuria, and cystic fibrosis. Congenital hypothyroidism is an example of an important condition identified by the test because a mere two-month delay in treatment can result in a form of irreversible neurologic impairment and stunted physical growth known as 'cretinism'. As part of a small group of medical students and doctors from Australia, New Zealand and Samoa that aimed to introduce the Guthrie test at TTM, starting with a trial of testing for congenital hypothyroidism, I spent time meeting with the Samoan members of the team, observing existing post-natal testing, and researching the barriers to the success of the program.

The clinical part of my trip was divided between obstetrics and paediatrics. During my time on the wards, I was welcomed by the medical team and learnt about conditions that are now rare in most of Australia, such as rheumatic fever. I also observed the tension between ancestral and modern medicine in Samoa with frustration around presentations such as sepsis being delayed by some first seeking traditional Samoan healing massages. Another thing that stood out about the clinical experience was the lack of resources at the hospital, such as CT scanners and surgical equipment. While these things are required to improve healthcare in Samoa, I observed how staff developed strong clinical skills to work around the lack of resources and advanced technology. This idea was reinforced by a Ground Rounds presentation on wound care that was delivered by a vascular surgeon visiting from Australia. The speaker showcased cutting-edge dressings used to improve wound healing, but emphasised how it's still possible to provide effective care and achieve rapid healing with less expensive resources and good clinical skills.

Outside of the hospital, I had the opportunity to attend a teaching session on Samoan culture at Oceania University. I also travelled around the more rural areas of the country, including the main island of Upolu as well as the adjacent island of Savai'i. I stayed in a Samoan hut or 'fale', attended a church service, tried traditional food, and swam with villagers under waterfalls. I listened to women share their stories and was very appreciative as they invited me to experience many beautiful aspects of the culture.

I'm very grateful to St Vincent's Pacific Health Fund for supporting the rich learning experience and hope I'll get to visit Samoa again in the future.

