

Andrew Dent Scholarship Report

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- Vaiola Hospital Tonga – Jan 2023

During my two-week clinical elective placement at Vaiola hospital, I gained a unique insight into the challenges faced by healthcare professionals in a resource-limited setting. The experience was eye-opening and provided me with a new perspective on the importance of cultural competency, adaptability, and teamwork in the medical profession.

I arrived in Nuku'alofa in mid-January which was one of the hottest months for Tonga. The humidity was a shock, yet I managed to settle in quickly due to the incredible hospitality shown by the Tongan people, living up to its nickname as the "Friendly Island". This is likely due to the fact that family and community are at the heart of daily life, and social interaction is a fundamental aspect of the culture. This was evident in the close-knit communities that I encountered, in which religion also played a vital role. Christianity is the major religion in Tonga, with communities gathering every Sunday to attend church and feast. It is illegal to work on Sundays as it is reserved as a day of rest and worship.



Vaiola Hospital



The view from the balcony, demonstrating Tonga's rich tropical climate.



Ruins along ha'atafu beach due to a tsunami in early 2022.

When I began my placement in the medical ward, I quickly found that Tonga has one of the highest rates of obesity in the world, with over 90% of the population being overweight or obese. There are several cultural and social determinants that contribute to this high prevalence of obesity in Tonga. One of the primary factors is lack of health literacy manifesting in the traditional diet, which is extremely high in starchy carbohydrates such as yams and plantains. The availability and affordability of unhealthy processed foods and sugary drinks as well as the import of mutton flaps also contribute to the high obesity rates. Cultural practices including the aforementioned feasting and attitudes towards body size and shape also play a role, with larger body sizes being seen as a sign of health and prosperity. While I was on the ward, this meant that almost every patient had metabolic syndrome and I would see blood pressures of well over 200 systolic and blood sugar readings averaging 16+.

One of the most significant differences between healthcare in Tonga and Australia I observed was the lack of resources available to medical professionals in Tonga. Supplies were scarce and provided entirely by donations from neighbouring countries. I found myself using equipment such as cannulas that were well expired on a daily basis. The hospital also lacked a blood bank or dialysis machine and only had one x-ray and CT machine. Due to these factors, deaths that would be preventable in Australia would occur frequently. Cancer was very much a death sentence in Tonga and the hope that is present in Australian patients was not apparent in Vaiola Hospital. These stark differences in healthcare outcomes deepened my appreciation for the many medical resources that are readily available in Australia.



Picture with Dr Lolo before driving to a remote village for outreach clinic.



Posters warning of diabetic complications within the hospital.

I further spent half of my elective in the eye clinic shadowing the sole ophthalmologist in the entire country. It was incredible to observe the differences in surgical technique during cataract surgery. In Australia, phacoemulsification is widely used yet relies on expensive and high-tech machinery. In order to save on these costs, manual small incision cataract surgery is the go-to and requires the surgeon to break up and remove the cataract themselves. It is also better suited to the patient population of Tonga, as patients present much later and thus, the cataracts are firmer and would be difficult to remove via phacoemulsification. Another standout memory from attending the operating theatre was seeing the use of a blowtorch to heat a metal wire to be used in place of diathermy!



Dr Duke Mataka performing manual small incision cataract surgery.

In conclusion, my experience in Tonga was both challenging and rewarding. The healthcare professionals in Tonga demonstrated impressive resilience and flexibility in a resource-limited setting, while still involving and educating me in the process. I would like to express my gratitude to the Andrew Dent Scholarship for helping to fund my clinical elective. This experience has left a lasting impression on me and has reinforced the importance of public health measures, cultural competency, and adaptability in the medical profession. There is no doubt in my mind that part of my future career will include working in global health due to this.