
Impressions of Sri Lanka

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I arrived on a typical Sunday, the day before my elective in Colombo. A trip that had taken what felt like an age. My suitcase, covered in condensation following its short journey from the belly of the plane to the airport terminal, gave me an idea of how I would have to cope with the weather on my trip (although it must be said, I'm getting better!) Out I stepped from the airport terminal – Sri Lanka.

At once my eyes were opened to the sights of the island I'd arrived on. The noise, the people, the vibrant colours and smells; all of these things I'd told myself I wanted to know, and wanted not just to experience, but to be a part of. This was the most basic element and purpose of my journey.

The study module itself was to be the first "clinical rotation" in my senior year and I wondered how I would be influenced by my stay. My elective was to be split between the Community Medicine Department and various clinical departments attached to the medical faculty at the University of Colombo.

The people in the department are like those who inhabit the rest of the island – friendly, welcoming, accommodating and pleased to show a guest what Sri Lanka is all about. It seems as though everyone in the faculty has taken a personal interest in me and my studies – each of them has helped me in whatever small way they can (advising me on studies, texts, history, almost everything Sri Lankan). These qualities were also found in those walking the streets, the stall workers and the local bus drivers – everywhere and everyone. Something as simple as this was still something of a surprise to me – I couldn't think that those in the capital city of my country would be as welcoming (nothing personal, it's just that's what Londoners are like; Northern cities are much friendlier, trust me!).

My programme was to introduce me to the healthcare system and the teaching of the future doctors of Sri Lanka. As far as I'm concerned this was managed amazingly in such a short period of

time! I was included in lectures (sorry for interrupting!), shown the assignments you have to produce (I enjoyed the community attachment reports and the patient reports in the IWCs). I was also sent into the community in Colombo, and informed at national centres about various public health issues, like the ongoing Anti-Malarial Campaign, and the drive towards managing sexual health issues. All of this information was helping me to build a picture and an idea of the country, and this in turn helped me build on my experience of the people who live here.

The health problems in Sri Lanka are different to those in UK. We worry more about obesity, and subsequent diabetes: mostly long term, chronic disorders. We've also started to be concerned over TB again. We worry about managing all of this. We worry about money. Ultimately, we worry about the same things that you do, we just have a slightly different focus. Still though, I have to wonder how you do what you do on the resources you have. It's amazing to see you look through drug lists to find out not only which is best for the patient, but for the economy too. The American model of medicine, which puts patients through a battery of tests to try to find a diagnosis without really talking to the patient seems ridiculous (and thankfully not something we practice in the UK), but it is only recently that cost effectiveness is becoming more and more relevant to our practice as doctors in the UK. Using the Sri Lankan models, we could go further. The sheer number of patients queuing to attend clinics and acute medical departments is mind boggling to me. I don't know even now, how your healthcare system copes. I'm sure you guys have something to do with it!

The similarities don't end with wanting the best for our people. There is a passion in your faculty for what it does. It teaches medicine. It teaches about life and death, and it teaches about people. The faculty wants to share this passion and their ideas and ideals with anyone who is interested to listen, and take some time to learn. This passion exists in my teachers. They enthuse, they push,

they test us. They want the best from you, and they want it because they know that it is how they and in the future, you, can best serve the communities you will work in and be a part of. It doesn't matter which area of medicine you find yourself in, you'll be helping to make a difference and a change for the good.

When I qualify next year, I'll be embarking on a career that I've waited for, for many years. I don't know in what area of medicine I'd like to work (although I do know that I don't want to be entirely a research scientist), or what kind of doctor I will make. But I hope that I would have learned to do the best I can for the people I serve. As I while the hours away in a busy ward or run around a hospital filling in request forms, patient notes and drug forms, I can think about my time with another island people. Those welcoming, and passionate people I had met not so long ago, and I can think about the things I've learned about your

country, the way you learn, and the way you look after your patients, to remind me how to look after mine. And I can wonder about those of you who are now approaching finals, and will start their first medical job at around the same time I start mine. I can wonder how you will be enjoying your first experiences of "doing it alone", and about the people you are helping: those of Sri Lanka.

Should you find yourselves on your way to work on another island, maybe one in Europe, make sure you wrap up warm, and bring some spices (British food is very bland). We'll make you feel welcome and try to teach you some things, as well as learn some things from you – just as I have here.

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