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Why I chose to study on the European Studies programme

One of the deciding reasons I chose to study at Manchester Medical School was the European Option. At the time I had just finished my French A-level and I was keen on maintaining my level of French and also improving. The opportunity to spend 4 months in France was yet another unique opportunity that I felt I could not pass up.

It is clear that no matter what specialty you are interested in pursuing in the future, competition for specialist training jobs is becoming increasingly fierce and the margins between successful and unsuccessful candidates progressively more fine. Therefore, having something interesting/different on your C.V can only be beneficial when applying for these jobs and the European Option certainly falls under that category. Additionally, having the ability to speak different languages will not only make you more employable but will undoubtedly open up more opportunities to work in a different country if that is your goal. If nothing else, I hoped that studying French would serve as a welcome distraction from the intensity of studying medicine during the week!

Living in Paris

Finding accommodation in Paris will obviously be one of the first hurdles you will face once finding out you have been allocated to one of the Parisian universities. Alas, here is my first cautionary tale! Given that the placement began on February 1st and my Medical Exempting Exam results were released on Friday 29th January, I did not have very long to prepare myself for leaving for Paris. In hindsight, the stress and time commitment that the finals exams required in the months preceding January completely took my focus away from organising accommodation or generally anything to do with my Erasmus placement. I had decided that should I not pass my exempting exams, I would not carry through with my Erasmus placement; however, given that I did pass I was left in a difficult situation. The result was that I ended up booking a hotel for the first few days in the hope and expectation that I would be able to organise some sort of accommodation whilst I was there and speed up the process by doing it face to face. As admirable as this plan was, I would not wish this upon my worst enemy as finding accommodation in Paris is like finding a needle in a

haystack. I tried many different Parisian estate agents who offered either hideously expensive apartment/studios or required weird and wonderful documentation that I could not produce at such short notice. At one point, I was extremely close to signing for a small 1 bedroom apartment but was not allowed to view it beforehand and, hence, my mental alarm bells told me that it was not a good idea. After getting in touch with the Erasmus coordinators at both Descartes and Manchester, I was extremely fortunate to be offered a place at the student accommodation at cite internationale universitaire de paris (CITE universitaire). To put this into perspective, the waiting list for cite universitaire is months long and to get a room at such short notice is nothing short of miraculous on the part of the Erasmus coordinators and to this day I am eternally grateful!

My advice to prospective students is this: please don't leave organising accommodation to the last minute as I did! Anticipate that during the months of October to January you will be preoccupied with Finals preparation and get your accommodation organised before then. With that said, I would highly, highly recommend applying to the cite universitaire campus by June/July of the previous year. It is essentially an enormous student campus at the very south of Paris. It is divided up into houses by nationalities with each 'maison' having its own character and charm. I was allocated to the Cuban house which was in the eastern periphery of the campus. My building was full of young professionals (lots of medics) and, hence, a little more tranquil during the evenings whilst I know some of the other houses were more typical of student accommodation i.e. anarchy. All the rooms were of a good size, en-suite with a shared kitchen for each floor. Rent varied from 450 to 600 euros/month (including bills) depending on which building/room type. It was a fantastic way of getting to know other foreign students as everyone is in the same boat. The campus is humongous and caters for all hobbies/interests such as sports, music, film etc. The campus is extremely accessible with an RER B and 2 metro stops within 100-200 metres. There is a lidl across the road for budget food shopping as well as many other supermarkets (e.g. Carrefour) nearby. On the RER B it takes approximately 15-20 minutes to get into the centre of Paris and I just cannot recommend the campus enough.

Travelling around Paris

The transport network around Paris is generally excellent with the metro and the RER your mainstay of getting around. I would highly recommend getting a monthly navigo pass which works out at 68 euros a month but allows you to use almost forms of travel in Paris. For this you'll need a passport photo and be warned that the pass begins on the first day of the month no matter which date you purchased the card. I found the RER significantly quicker than the metro but it has less stops but the majority of people tend to favour the metro system.

It may seem a little daunting at first getting used to the different metro lines but after the first couple of weeks it becomes second nature. During rush hour time the metro can be extremely busy and a simple 'pardon' is customary to get squeeze past fellow commuters. Although personally I encountered no issues I was warned that both Gare de Nord and Chatelet stations can be a little less safe late at night so bear this in mind when travelling late.

Paris Descartes University

Originally I was allocated to Diderot, however, due to their complete disorganisation it was obvious that they could not offer me a placement for the full duration of the semester. At the eleventh hour, Descartes very kindly offered me an Ophthalmology placement, which was my first choice. The University itself is steeped in history and extremely prestigious. The medical faculty is found in the 6th arrondissement and the buildings display some stunning architecture. The Erasmus coordinator for Descartes is Mathilde Freger and is found in the medical faculty building. Mathilde is an absolute wealth of helpful information and definitely your first port of call if you are having any issues with your placement/would like to change your placement. She will also organise for you to collect student cards which will allow you to access the library.

My second cautionary tale is one of paperwork and lots of it. Before leaving for Paris, I was sent an extensive list of paperwork that I was required to handover on my arrival. Do not underestimate the French love of paperwork and be sure to make multiple copies of each document as your hospital will most likely need copies as well. A word of

caution regarding entering most public buildings in Paris; following the recent Paris attacks, it is customary for most buildings to have a guard at the door who will check bags and it is now standard practice. The Descartes medical faculty also has a library from which you can borrow up to 5 medical textbooks at any one time, although following exempting exams there was never any danger of this personally. During most afternoons, the French medical students have their lectures/seminars in this faculty building as their teaching is generally centralised but other than the first week I did not spend much time here.

Ophthalmology at Hotel Dieu/Hopital Cochin

As someone with a keen interest in ophthalmology, I had requested to do my placement in this as I thought it would be fascinating to compare the French and UK system as well as developing my knowledge of the speciality. Luckily, I was allocated such a placement at Hotel Dieu and was told to arrive at around 8 on my first day. Unfortunately, that was the extent of the information I was given and I subsequently spent the first day asking every living, breathing creature in sight where I could locate my supervisor. This is where we come to my 3rd cautionary tale of French organisation or lack thereof. I believe having become accustomed to UK efficiency; I had taken for granted the right to know where I needed to be, at what time and with whom. Do not expect the same privilege to be afforded to you in Paris; the onus is very much on you to be proactive and quickly get up to speed with where each clinic/surgery is taking place and at what time. I would highly recommend emailing your supervisor 2 weeks before starting and coming to an agreed arrangement to avoid the stress and inconvenience of turning up unannounced and being turned away.

Eventually, I did find my way to the right secretary's office but after explaining why I was there, it was met with a look of confusion, surprise and, ultimately, disappointment when I eventually managed to convey that I was an Erasmus student. Without a single morsel of identification I was given a white coat ('blouse') from La Salle de lingerie (be careful of faux amis) and instructed to shadow one of the registrar's ('interne'). From there I was introduced to some of the other medical students and made aware of the weekly timetable and briefly orientated. It's fair to say the first week is rather intimidating as my French was not at its peak performance and this was not really taken into consideration by

the registrars. I was thrown into the deep end almost straightaway and asked to see patients in clinic. The roles and responsibilities of French medical students are not comparable to those of UK medical students. The French students are essential parts of the medical team (essentially employees) and their opinions and examinations carry weight. I was taken aback by the depth of knowledge and training that the French medical student displayed in using specialised ophthalmic equipment such as OCT scanners and taking retinal photographs. In the UK this would be done almost exclusively by trained technicians. However, after making it clear I was not trained to use this equipment I was given a 30 minute tutorial by one of the registrar's and shown how to use the slit lamp. This was by no means ideal but with more practice with patients I became more confident. With regards to history taking, this is rather similar to how we are taught in Manchester, however, it is more detailed and can take up to 30-40 minutes depending on the patient.

It became quickly apparent that the consultants ('chef de service') are seen and heard minimally and it is the senior registrar who leads the clinics and hands out instructions. I was extremely grateful to the other French medical students who were generally very helpful even though many were stressed by their upcoming exams. Although many are very competitive, they do try and help the Erasmus students and don't be shy in asking for help. In contrast to the rather limited role of a UK medical student, there appeared to be no end to the capabilities of French medical students in carrying out procedures that would normally be reserved for specialist trainees in the UK system. I witnessed a fellow student administer an anti-inflammatory intraocular injection without training (obviously under supervision) to a patient who was none the wiser. As 'informed consent' goes, I remain sceptical of the French definition!

The majority of my placement involved me working in different clinics throughout the week, e.g. uveitis clinics. Normally, this may have been monotonous but due to the diverse ethnic demographic of Paris I was privileged enough to see many rare inflammatory conditions that I may never see again. Testing for HIV and TB is effectively routine and this is regularly done without consent. This ties into the fact that the French healthcare system appears to be very paternalistic and I found many consultations to be a monologue instead of a dialogue. The novelty of the ICE framework we are taught at Manchester has perhaps

worn off; however, when witnessed in its absence it is only now I have truly begun to appreciate it.

I found both Hotel Dieu and Cochin to be relatively modern, dynamic environments to work in. Hotel Dieu is a very special hospital and there is a romanticism/privilege involved in having the opportunity to work in the world's oldest hospital, home to figures such as Trousseau, Bichat and Dupuytren. It is located directly next to Notre-Dame and there is a surreal feeling in walking past Notre-Dame everyday after a shift. Hopital Cochin is more modern and has more of the feel of a UK hospital. Both are world-renowned and I was pleased to have the opportunity to experience both.

Differences to UK hospitals and practice, the medical training programme, the contrasting medical cultures.

The differences between the UK medical system and the French system are stark and fundamental. I won't pretend to completely understand the French system but in essence almost everybody can access healthcare but unlike the NHS it is not free at point of access. Patients in France pay a flat rate fee from which most of this fee is reimbursed to the patient by the state-run health insurance provider, leaving a small fee that must be covered by the patient. In some cases, the full fee may be reimbursed depending on whether the patient was referred by their GP. Globally, France is renowned for having the best healthcare system in the world and, on occasions, it is clear to see why. Even for minor complaints, patients are investigated thoroughly (some would argue too thoroughly) and in terms of research/innovation there is clearly a huge amount of funding for this.

With regards to actual clinical practice, the greatest difference I have noticed is the dynamic between the patient and clinician. There is a significant emphasis in the UK (especially training in Manchester) on making each interaction centre more on the patient's agenda than on the doctor's. This is partly due to the litigious society doctors now have to practise in but also to help patients take greater responsibility for their own health. I did not notice this dynamic at all during my placement in Paris. I would argue that the French system is a remnant of medicine from decades gone by where the consultation is very much

a physician monologue rather than a discussion between 2 individuals. The use of medical jargon was commonplace and I felt, at times, patients were not comfortable airing their concerns in front of the physician.

Medical training in France is also very different from the UK. The most statistically difficult obstacle to becoming a doctor in the UK is applying for medical school but once enrolled on a programme, the pathway becomes more straightforward. This is the direct opposite of in France whereby every student may enrol onto the medical programme but faces a battle to stay on the course after the first year when all the students have to sit the concours exam. In the UK, we have 2 years of foundation training to establish our competencies, develop career interests and have time to build applications, however, french medical students face a brutal exam at the end of their 6th year which decides which specialty programme they will be enrolled onto. This is clearly very stressful for final year students here and I was aware that most of them were having private tutoring lessons and evening classes after a long day in the hospital/lectures. Examinations and assessments in France are very much knowledge-based with very little scope for assessment of communication skills/bedside manner. OSCE-style exams simply do not exist in France and I did feel this was reflected in the consultation style which was often abrupt and business-like. On the other hand, it was evident that the scientific/medical knowledge of the french students was vastly superior to that I have experienced in Manchester. The students had much more confidence in their patient interactions and were able to answer almost all questions from patients with a degree of certainty. This is one lesson that I think could be taught better at Manchester; having greater confidence during consultations and perhaps a firmer approach to questions.

Linguistic development, inter-cultural understanding and future plans

After passing my DALF C2 in June of 4th year I hadn't really kept up with my French before arriving in Paris due to the time stresses of 5th year. It's safe to say that the first 2 weeks of the placement were a transition period and I did initially struggle with keeping up with conversations and instructions. My reading and writing have always been far superior to my listening/speaking skills; however, I had never put in a concerted effort to change this. I found myself not particularly struggling with the medical French terms which are all fairly similar to the English equivalents but with the colloquial phrases. However, the beauty of being on placement in France is you cannot escape listening to French! After around 4 weeks, I think my brain started to dissect common phrases and I became much more comfortable holding conversations. There were still difficulties with patients who had lisps or particularly strong accents but that's to be expected in any foreign language. By the end of the placement I would not say I am completely fluent, however, I can keep up and understand most conversations which is a big improvement from the start.

In terms of inter-cultural understanding, there are still so many French customs which I have not got to grips with from culinary differences to simple things like not needing to knock to enter rooms. Some simple things that I have picked up include addressing shopkeepers as you enter their stores, remembering to use 'vous' with new acquaintances and realising that a green light for pedestrians does not mean a red light for drivers! This last point is particularly disconcerting as French drivers are not famed for their patience so have your wits about you when crossing roads! With regards to future career plans, I don't think I would ever consider working in France due to the vastly different cultures and healthcare systems. I think we're very blessed in the UK to have the NHS and free healthcare at point of access and although the French system does have certain perks (such as quick access to specialists) I wouldn't choose to work in the latter. Have I enjoyed my placement in Paris? Yes, absolutely. Would I ever work there instead of the UK? I'm afraid the answer is no.

Practical Tips

- Please, please heed my advice regarding accommodation. Get it sorted before November!!!
- Apply early (June/July) to the Cite universitaire (even if it is a backup option)
- Bring extra copies of all your paperwork just in case
- Buy a monthly navigo card
- Email your supervisor 2/3 weeks in advance otherwise don't be surprised when you turn up and you are met with blank expressions
- It is normal for the first 2 weeks to be daunting-be confident, don't lose your enthusiasm and learn quickly!
- If you need a form signing/have issues with your placement, don't rely on emails. In my experience, things get done much faster in person than through correspondence.
- Before leaving for Paris, ensure you have all your UPSAs/UCEXs/UCMDs signed off as (1) It is difficult to get these done in France as it is unheard of over here (2) On returning to Manchester you will have very,very little time to get any remaining things signed off before your portfolio review so it is best to get them done before starting your Erasmus Placement
- ENJOY! Although it is strictly a placement, don't forget to pursue the things you enjoy and take time to relax post-finals.

Useful Contacts

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