

# EUROPEAN OPTION

## PROGRAMME

### ERASMUS PARIS 2016



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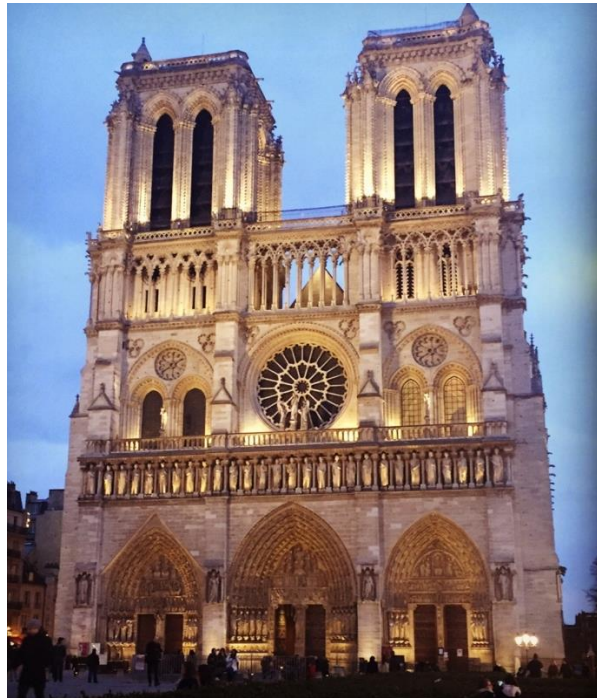
#### **Introduction**

My Erasmus in Paris was more than discovering another culture and learning the French medical system. It was indeed an incredible adventure; one that immersed you into the history of France through its monarchy, its wars and the famous French revolution, its 'Cuisine Gastronomique'; its 'canard confit', 'foie gras' and 'escargot aux ails et fine herbes' and without forgetting, all the work left by some of the greatest artists of the world namely Van Gogh, Leonardo Da Vinci, Monet, Moliere and Edith Piaf. What made Paris so special is the magnificent crafted architecture of the buildings which decorate the landscape. The very core of Paris is infused with arts and music.



**The Trinity Chapel at Fontainebleau**





**Notre Dame de Paris at night**



**La cuisine Gastronomique- Le Reminet (left) and Abri Restaurant (right)**



**Sacre Coeur**

## **Why did I decide to do an Erasmus?**

First and foremost, I was born and raised in Mauritius which was colonised first by the Dutch followed by French and British before becoming independent in 1968. Therefore, it is not surprising that we have been influenced by these different cultures with a dominance for French. From my very young age, I have been in touch with the French culture. The main reason which encouraged me to do this Erasmus can be summarised in these few words: "love of adventure". Not only I love discovering a new culture but I also enjoy exploring the country and learn about its history. I have chosen Paris because it is the capital of France and in my opinion the most representative of the French culture.

## **Overview of my experience of living in Paris**

While living in Paris, I realised that the most striking difference between the French and the British is that the French love to take their time. Although people in Paris are known to be always in hurry, in actual fact, everything runs slower. One of the things I enjoyed the most is probably the way they appreciate their lunch and dinner. One hour for lunch is a must with the glass of wine. During lunchtime or even at night when the weather is good, a lot of people will be sitting outside drinking a cup of coffee or holding a glass of red wine in one hand and a cigarette in the other.

During my placement in the hospital in Paris, my daily routine starts as from 8.00 am with taking the metro to go to my hospital. Then for lunch time at around 1.00 pm, I would leave and buy pastry to eat but nothing beats a good fresh baguette from the bakery. Later in the afternoon, I would spend my time exploring every single corner of Paris; from museum to gardens and monuments. My Sundays were reserved for market shopping- in place like 'Place Aligre' or 'le Marché de Bastille' where one can find real gems like fresh exotic fruits and vegetables, fresh seafood, a wide variety of bakeries and oysters to be eaten straight away. These markets are always crowded with people doing their shopping.



**Pierre Hermès Bakery-** known to be one of the best in Paris

Apart from touristic attractions such as Louvre museum, Eiffel tower, Disneyland and Versailles, I highly recommend to visit the gardens in Paris- a true raw diamond in itself.



**Park Monceau**



## **Overview of my experience of working in Paris**

My sending institution was Paris Descartes University. My first two-month placement was otorhinolaryngology in HEGP, 'Hôpital Européen Georges Pompidou' under Dr Linda Slaim. My second placement was internal medicine in IMM, 'Insitute Mutualist Montsourris' Hospital under Dr Pierre Charles.

The Erasmus experience helped me to be able to adapt myself and act in a new situation. I became more open-minded and ready to face new challenges. Additionally, since I had to deal with so many complicated situations, I am now able to think in a more logical way, assess critically and find solution to complicated situations or any challenging context.

Working in this different cultural environment, I feel I became more tolerant towards other persons' values and behaviours. This experience is really an eye-opener for someone to really appreciate the value of different cultures. Today, I feel more capable to cooperate with people coming from other backgrounds and cultures.

Seeing how different the British medical training system is as compared to the French one, it makes me realised my own strengths and weaknesses. This experience can really help someone to think outside the box and see a situation under a different angle.

Moreover, since it was really hard in the beginning to understand the medical jargons, I had to borrow French medical books to study and really make the effort to ask questions to my team. In the end, I slowly started to enjoy myself going to the hospital and I believed I was able to correctly do my job as an 'externe'. On the top of that, I became more independent in my learning.



**Paris Descartes University**

## **The cultural difference between the French and English health care system.**

### **OVERVIEW OF THE MEDICAL TRAINING PROGRAMME**

First and foremost, medical studies in France are free and therefore every single year an incredible number of student tries to get into medical school. The medical training is divided into different phases namely: P1, P2, D1, D2, D3, and D4.

In phase P1 (Year 1), they have to go through an exam which ranked them according to their total score. Only the first 200 students will be accepted to study medicine and for those who just rank after will try their chance to make it by doing a second year.

It is only in P2 that basic of medicine is taught. Their P2 and D1 is similar to the first and second year of Manchester University medical school where they get lectures and learn the basic anatomy and physiology. As from D2 to D4, they start to have clinical placement like our 3rd to 5th year. Most of the time, students will attend their placement in the morning and then will attend lectures in the afternoon. The lectures are optional however most of the time the hospital department will organise compulsory teachings for the students.

In D4, they have a final national exam " Examen Classant National- ECN" which will rank about 8000 medical students. Those who have been ranked high up are given better opportunity to choose the speciality of their choice. After successfully completing the ECN, medical students will enter the internship where they will be trained for their speciality. This can last from 4 to 7 years depending on what speciality they have chosen. To complete their internship, they have to write down a thesis.

I have noted some differences between the French and British medical training system as listed below:

1. The French system focuses more on theory rather than clinical practice to train their medical students for the national exam ECN. The logic behind this it that the better the students are ranked, the more famous their university will be in terms of university ranking for ECN. There is no formal practical exam for medical students.
2. As a result, in terms of knowledge, French medical students generally know more than us. They all study on the ECN reference books, "Le college des enseignements". However, we are generally better in terms in clinical skills and communication since we are assessed on this. French students usually rely on their placements to learn the clinical skills and this is highly dependent to which service they are attached.
3. With difference in exam and assessment, it is logical that there is a different thinking process in how we see a condition. What I noticed is that the French medical students usually know a condition very well from the pathophysiological process to investigations and treatments. However, it is difficult for them to link the symptoms together or make a differential diagnosis

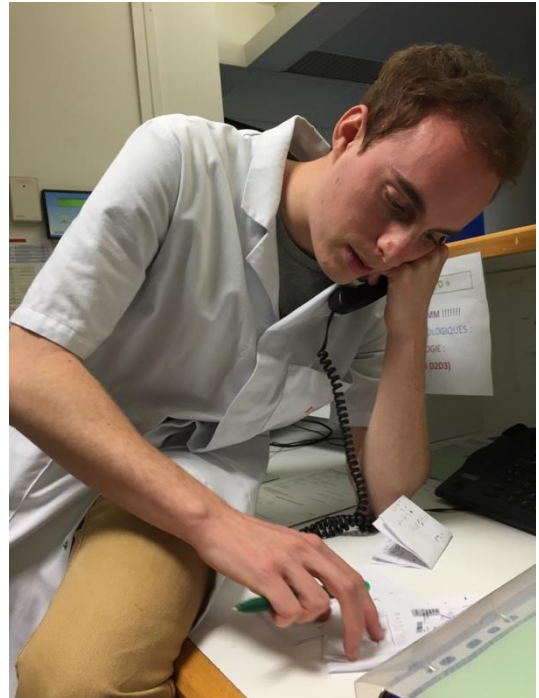
from a presenting complaint. Therefore, why I believed that we are generally better at making differential diagnosis because we have been trained to translate our knowledge into practice. However, French students are trained from the beginning to be good specialist. But then the British system gives more opportunities to the medical students to choose their speciality. Moreover, we have two years of foundation where we get more working experience in various specialities and thus we can make a better decision on where we want our career to go. On the other side, in the French system, the choice of your speciality depends solely on your ranking in the ECN exam.

4. To prepare the medical students for a component of ECN exam and later on their thesis to pass their internship, they do something called LCA "Lecture et critique d'articles" which is about reading, analysing and criticizing research papers. The teaching on LCA was an eye opener for me. Now I am more capable to critically assess a research paper and look at details such as who are the sponsors of the research paper and check if they have potentially influenced the study in a way or another and whether the population study chosen in an unbiased manner.
5. Since the final exam (ECN) is national, it is a very competitive environment. This encourages a lot of students to take extra tuitions usually in their P1, D3 and D4 in the afternoon. These are called "Les conferences".
6. Another difference is that as a medical student in France, one is paid for his clinical placement about 90-200 euros per month with the remuneration going higher from D1 to D4. Hence, generally speaking medical students in France have much more responsibilities in the hospital compared to us. For example, during my placement in internal medicine, I was expected to check patients, do clinical examinations and plan the management. Unlike in UK, we are usually the ones who write the history taking and the interns will only add on more information if needed. We are assigned responsibilities such as faxing papers, calling hospital to obtain report and photocopying all the reports the patients will bring.
7. Unlike in UK where junior doctors are expected to perform clinical skills such as putting a catheter, setting up an I.V fluid, cannulation, in France doctors leave all of these to the nurses.



## THE CULTURAL AND SOCIAL DIFFERENCES BETWEEN FRANCE AND BRITISH CARE SYSTEM

1. Dressing code: In France, the dressing code in hospital is very different from in UK. French doctors and medical students must wear a white lab coat. While jeans and sports shoes are permitted, religious accessories are not allowed such as a cross or a hijab. In France, everyone is expected to bring not only their stethoscope but also their hammer and pen torch.
2. Team-spirit: In France, lunch and dinner time are very important time of the day. And this applies to the doctors and nurses too. They will all take their one-hour lunch break unless there is something very important they have to do like the need to catch up the delay in the morning clinics. One good thing is that the consultants, STR, Registrar and the interns all have lunch together and will usually wait for each other to go for lunch in hospital.



**A French medical student wearing a lab coat**

3. Relation with patients: In France, patients have much more respect for doctors. One of my supervisor even told me that very often, patients prefer when doctors are very authoritative over their care as to them, it means they care a lot for their health. To a UK student like me, this way of interacting with patient may look rude and unprofessional but that's the way it is in France and patients do not seem to mind it at all. In UK, so much emphasis is laid upon creating a good rapport with the patients and explore their ideas, concerns and expectation.
4. Communication with the Patients: Relatively comparing to UK, doctors in France used a lot of medical jargons when speaking to patients. Most of the time patients would not questions what they have just heard, therefore most of time during consultations, I am not even sure if the patient understood what they have been just told. However, I did notice that even patients use a lot of medical terms too. Most of time they do not even know what it means. Thus it is always good to check what they understand by it or else misunderstanding can happen.
5. Confidentiality and work ethics: Patient's confidentiality in France is very different compared to UK. There is a paradox to it, it is absolute and yet not as respected to the extreme as in UK. Indeed, here in France, "le secret medical" or patient's confidentiality is supposed to be absolute. An example of this is when doctor is aware that an HIV patient is still having unprotected sex with someone else without telling the latter of his status despite the advice of warning his future partners, the doctor is not allowed to break confidentiality. This type of situation can very be frustrating for doctors as they feel powerless. In UK, if you are walking outside the ward and saying a patient name out loud or if you bring papers containing patient's names home, this will be considered as breaching confidentiality. As compared to UK, in France, medical staff does not respect this type of rules.

6. Finance: Here the patient must have a social security insurance “la carte Vitale” in order to be covered and reimbursed by the insurance for their medical treatment but also investigations. It works in a different way as compared to the NHS. If the patient is not covered by the social security, that is where the problems starts especially if the patients cannot pay for their expensive treatment. However, there is charitable groups that exists and help people in those type of situations.
7. Management: In terms of management, there is a protocol that exists in France such as the HAS “Haute Autorité de Santé” which tells you the medications or other forms of treatment available in France and when and in which situation they are reimbursed. However, in France, like my supervisor said: “Ici on peut faire ce qu’on veut, faire toutes sortes de bilans et prescrire toutes sortes de médicaments” meaning ‘Here, we can do whatever we want, do all sort of investigations and prescribe all sorts of medications.’
8. Yes, it is true although protocols exist, doctors can do whatever they want as long as the patients can pay or be reimbursed by the social security insurance. Hence, you tend to see doctors ordering more investigations compared to UK. I have encountered plenty of patients who were prescribed medications when there was without indications for it. However, it does not mean all doctors do it. My supervisor for example will always follow the indications for treatments but he will not hesitate to screen of all sorts of possible diseases even if the probability is low.
9. People with disabling conditions. In Paris, you can easily notice that the infrastructure is not adapted for people who have disabilities. Therefore, disable people in Paris are at their disadvantage, they can hardly use any public transport like the metro where there are barely any elevators or lifts.



## Conclusion

It is interesting and yet quite impressive how different medical training system can lead to so such a different working environment and the way of thinking. We all become good in certain fields and bad in others. We, Manchester students we are good in both theory and practical. However, unless we have studied hard for it, we do lack a strong base of medicine unlike the French because they have received a lot more of lectures and teaching than us.

Moreover, in my opinion, we have a better ability to put into practice our knowledge and we are better in communication and behaving in an ethical and professional way because we have been trained this way during our clinical years through OSCES, simulation and communication teachings.

In the end, I do believe that we all become competent doctors and end up having similar knowledge and clinical skills regardless of our medical training.

## **Practical Issues for Future Students**

The following will be my recommendations based on my experience in Paris:

- **Visa for Long Stay Student** (for International students only)

Set up an account on TLS contact website. Once you set up an account on the website and select what type of visa (Long Stay Student Visa), you will get all the details of the documents required. Then you can set up an appointment to go to London to the TLS contact office and you should make sure you bring all required documents with you.

I recommend that you start the whole visa process 1- 1.5 month (early December time) before leaving for France. Also you should make sure you book your accommodation before setting up a visa appointment because you will need a proof of address in France or if you are planning to stay at relatives 'place, get a photocopy of their ID card front and back and a signed letter from them confirming that you will be staying at their place for 4 months (include start and date time).

Moreover, the TLS contact will more likely ask you to bring a cover letter from the receiving university in France that confirm that you will do an Erasmus over there (your learning agreement will not be enough). A stamped letter from Manchester University to confirm your student status in UK will be needed.

- **Accommodation:**

Depending on what is your budget, you can go for student accommodation if you have a small budget. 'Cité Universitaire' is the best accommodation which is located close to 'Institute Mutualiste Montsouris' Hospital at 'Porte Orléans' Metro station or 'Cité Universitaire' RER. For about 500-600 euros, you can get an ensuite room and shared kitchen.

The area is relatively safe as there is a lot of students living over there. You can easily make a lot of international friends over there who are generally very keen to visit Paris.

I stayed in a rented Airbnb apartment which is 2 minutes walk from Grands Boulevards metro station in the '9th arrondissement'. I shared the accommodation with another Erasmus student and the total cost was about 600 euros each per month. Of course, you can get cheaper than this, the main reason my accommodation was a little bit more expensive was because it was close to Louvre museum, Opera Garnier (main opera of Paris), Galeries Lafayette Haussman and Saint Augustin (the resting place of Marie Antoinette and King Louis XVII). I really enjoyed living there as it was very central, the roads and streets became very lively at night time and thus I felt very safe.

- **What to bring in France?**

1. photocopies of all the documents (including proof of address, passport, ID card and letter that confirm that you are an Erasmus student), passport photos (if not there is plenty of photo booths in the metro stations)



2. For your placement, a stethoscope and a hammer are a must. In terms of clothing, people are very lax about there and in hospital everyone wears a white lab coat. You can even wear tennis shoes and jeans.
3. If you are avid of shopping like me, I suggest that you bring a small luggage into a big one and bring the bare minimum clothes. This way when you returned back to UK, you can bring one big 23kg suitcase and a small hand-carry one.
4. Bring cash (about 250 euros) to survive the first couple of weeks without a bank account.

- **Travelling in Paris**

I highly recommend getting a monthly 'Navigo Pass' (5 euros for the Navigo pass itself and about 71 euros for the monthly ticket). This pass allows you to travel zone 1-5 in Paris and can use the metro, RER, tram and bus. To get your way around Paris, download the 'RATP' application on your phone (if you have internet) or city mapper (if you don't have internet on your phone).

P.S. metro closed around 1-2am depending on the day of the week, however night buses are available.

Other means of transport is cycling (which is probably the cheapest one), you should register on the 'VéloP' website to get your pass (or you can use your Navigo pass). You can rent a bicycle and leave it at the bicycle stations.

If you plan to visit outside of Paris, you can book SNCF (grand lines) ticket to travel outside of Paris. To get discount on the SNCF ticket, you can buy a 'SNCF carte Jeune' (similar to a railcard) which is definitely worth it if you are planning to travel outside of Paris more than one time.

- **Opening a Bank account**

If you are attending Paris Descartes University (found at Odeon metro station- exit 'L'école de Médecine'), BNP Paribas or Société General Banks (choose the branch which is the closest to your university) accept Erasmus students. However, if they asked you for how long you are staying in Paris, you should say 1 year (this was an advice from our coordinator) to be able to open a bank account. Once you open your account, you will obtain 100 euros for free.

- **Getting a Phone Sim card**

Depending on whether you have a French bank account, I will advise taking SOSH orange (20 euros per month for 5 GB data) or you do not have one, then Free mobile is perfect for you then cost can range from 2-20 euros per month.

- **Tips to manage your budget**

1. The medical students are paid during their clinical placement. Depending on which year you are, in D2 you get paid about 100 euros tax included. Moreover, you can also get your Navigo Pass 50% reimbursed and thus obtain an additional of 35 euros. The first day when you start your placement, remember to bring your bank details (French or UK bank with your IBAN details etc) and go to the human resource office (Le bureau du personnel) to set up your monthly payment and your passport/ID card.

2. For your accommodation, you can get partly reimbursed for your rent (usually about 100 euros) by applying for the CAF ([www.caf.fr](http://www.caf.fr)).
3. Beware that most touristic attractions (museums mainly) are free for students or citizen of European union (applies to international students too who have a UK or France Visa) under 26 years old. Most of the time, you just need to show your French student ID which has your Date of birth or else have pictures your passport first page and your visas (for international students).
4. If you fancy good French food at a reasonable price and want discounts, download 'The Fork' application on your phone and use it to book posh restaurants.