

Erasmus Lyon Report – 2017/2018

Why did I choose European Studies?

I have had the dream for a long time to be fluent in another language. I studied French and German for my GCSEs but unfortunately could only continue with French at AS-level due to the necessity of the sciences for applying to medicine. I was aware of the option to study a language alongside medicine at Manchester and was thus really keen to learn French again at University.

I have really enjoyed the European Studies component of the course. I looked forward to Medical French every week as an opportunity to learn something completely different to my medical studies and engage a different aspect of my brain. Whilst it was at times difficult to manage the workload, it was always a nice way to break up the PBL work.

The ability to speak French to a near fluent level has been life-changing for me. I loved my previous placement in Montpellier in 3rd year where I completed my second QEPEP and couldn't wait to go out to a different city for even longer. It has changed my perspective on the world on how meeting so many people from a variety of countries have so much in common with us. It has made me keen to learn even more languages going forward.

Living in Lyon

Lyon is a fantastic city. The architecture is beautiful and there is so much to do, from nights out with numerous bars and clubs to lovely peaceful areas such as the two rivers and the amazing 'Parc de la tête d'or'. There are 3 universities here, of which the medical department is based in Lyon 1. The transport system is excellent with all the buses, trams and metro service run by one organization called TCL. They are hence all accessible under one ticket, which for students is only €31.50 monthly (plus €5 to buy the card at the start). You can pay for a €15 annual fee to have access to the cycle system in France in which you can pick up a bike from one of the many stops on street corners, use it for an hour, and then drop it off at another stop.

I arrived via the main airport Lyon Saint-Exupery from Manchester. It is a bit out the way from the main city so I split a taxi with my friend to go directly to our halls of residence. The other option could have been to take the 'Rhône-Express' tram to the centre of town 'Part-Dieu', a cheaper alternative to the train but still fairly expensive sadly. 'Blablacar' is a really useful car-pooling service that you can use to get to the airport for your return flight and the cost of a seat is often €5.

I chose to live in student halls due to the fact that France in general is not a cheap country to live in. I paid €204 a month to live in the Crous Lyon Andre Allix residence which was basic but did the job. I had my own room which was a decent size where there was plenty of storage space; however a shared bathroom was less convenient. The residence had a couple of shared kitchen areas on each floor which had basic hobs and a microwave. Each bedroom had its own fridge which I found quite noisy personally so bring ear plugs if you're a light sleeper! In reflection, I would personally recommend Crous Lyon residences that offer ensuite rooms such as La Madeline in Jean Macé as it is in a much better location for going out and for going to placement.

The main thing to be aware of for living in halls is that YOU WILL NEED POTS & PANS! I wasn't aware of this when I arrived but thankfully I split the costs with my friend who'd come to Lyon with me. At Allix there was a 'magasin solidaire' where they actually give you access to free pots and pans upon arrival, on the basis that you will give things back when you leave. I didn't know this beforehand but it was a helpful discovery when I did!

The French course is an excellent way to make friends with other Erasmus students who I ended up spending the majority of my time. You will meet a brilliant group of people who've come from all over Europe and we even had some students from South America too. I encourage you to speak French together with them as it's an excellent way to practice with other people who've learned it as a second language so it can be a bit easier to find your feet. However, if you're all worn out from a day of French, they all speak English to an amazing level so you'll always have that option too!

Life in Lyon is not cheap but there is lots to do and see here. You can get a youth/student museum pass which allows you one year's unlimited access to 6 of the museums in Lyon for only €7 – a brilliant deal, particularly for the art museums and another which portrays Lyon in the Second World War. There are lots of other tourist attractions including the brilliant basilica Fourvière and you can always enjoy a nice walk and a spot of relaxation by the river. Vieux Lyon has plenty of amazing restaurants and bouchons for authentic Lyon cuisine with varying prices and set-menus. Hôtel de Ville is a great location to go out in with bars that have much more reasonably priced drinks compared to normal – except for the numerous English/Irish pubs unless you plan on forking out over €6 a pint! There are lots of 'happy hours' on offer so keep your eyes peeled for your cheaper pints, conversely the wine is pretty cheap wherever you go and the quality is vastly better here!

Working in Lyon

I did 3 placements over the 16 weeks I was out there. I started on Neurology ward 101 at l'Hôpital Neurologique (Pierre Wertheimer) which forms part of Groupement Hospitalier Est block of hospitals. It is a 10 minute bus/cycle ride from Grange Blanche, where the faculty of Medicine is located. As mentioned in a previous report, Neurology was a difficult one to start on. The team were very nice with me and didn't seem to really mind if I left when there was nothing to do. Typically I'd leave between 3pm and 5pm each day. I felt like I was standing around for a lot of the time on ward rounds etc. I preferred being able to see the new patients (entrées) where I'd have the opportunity to clerk and then present to the case to the junior doctors (internes – FY1/2 doesn't exist in France, they are more equivalent to ST1/2 level in England as doctors specialise straight away here after graduating). I also managed to perform my first ever lumbar puncture so if you're feeling brave then the opportunities are there! I spent one week on 'hôpital de jour' where patients requiring an infusion not necessitating admission would be consulted. I spent this week with the nurses to practice inserting cannulas and taking bloods again, both of which will be essential skills when I start as a FY1 in August.

My second placement was Paediatric A&E which was also at the Groupement Hospitalier Est block, this time at l'Hôpital Femme, Mère, Enfant (l'HFME). It started off slowly on the short-stay wards adjacent to A&E where it was much more administrative from a medical student perspective. There were no real clerking opportunities and it resembled much more doing TTOs as a foundation doctor in England. It however improved rapidly on CNP for 3 weeks (the equivalent of minors) where I was able to see patients independently, present them to the doctors and then agree a treatment plan together. This was excellent practice for my French but also in revising general paediatrics so I believe I got a lot out of it. I spent one week on UV (the equivalent of majors) which functioned in a similar manner but there were less patients to see so I found myself waiting around for longer. Whilst it was tiring doing lots of consultations, I definitely enjoyed this placement the most and it really helped me improve my spontaneity and fluency in French.

My final placement was Endocrinology again at the same block of hospitals but this time at Hôpital cardiologique. I spent a week in each of the different sectors to experience how each aspect works – outpatient consultations, on the wards and the 'hôpital de jour' for patients who needed to be in hospital for a few hours for minor treatment and assessment. It unfortunately wasn't as enjoyable as the previous two placements as it felt much more oriented towards medical students in the earlier stages of the clinical years in the sense that there was much less hands-on opportunities. A lot of the placement involved observing consultations, the number of new patients was much less so a lot of the students were sat around until they arrived. Thankfully it took place in and around May when there were a fair few days off for bank holidays so at least it was less full-on than the previous placements.

What did you learn from your placements with regards to the differences in cultures in relation to medical practice?

The first thing to note, as was the case in the UK previously, doctors wear lab coats on the ward. I don't entirely like this concept in part due to hygiene reasons, but also the subconscious divide this then places between doctors and patients. This did however allow the positive of being able to be more flexible with regards to attire – I could wear trainers, a shirt and jeans which certainly made standing around much easier!

Nurses have a much more hands-on role with regards to patient care. They are responsible for taking blood and inserting cannulas which contrasts significantly with the NHS where it is much more the role of a junior doctor. Even in A&E I saw a patient with a suspected urine infection, was ready to carry out the urine dipstick as normal before the interne told me that I only had to explain to the parents how to obtain the sample and then the nurses would analyse it. This can be viewed in both a positive and negative fashion; it frees up doctors to focus more on clinical decision making than taking time out to perform such skills, however it can also be viewed as hindering doctor's abilities to be able to act in the case of an emergency when they would then be dependent on nurse colleagues with regards to performing necessary bloods and inserting cannulas.

Many things are similar. The 'internes' are very friendly and work with the students very well in a similar fashion to how foundation doctors help medical students in the UK. The consultants are a bit more old school but were pleasant overall. One aspect I really liked was how all the doctors and medical students on the ward placements went for lunch together. I think having the role of 'externes' is excellent for making the medical students feel part of the team rather than a spare part that get in the way of everyone else which I experienced many times over the past few years. Having lunch together I believe further strengthened this relationship between the two groups and helps encourage good team ethic.

The medical students here are paid a salary for the placements that they do. They take place in 6 week cycles and the medical students are full members of the team with fixed hours and paid leave. This is an interesting concept as it is a very useful learning experience for them on one hand and also helps integrate them with the other doctors. On the other hand, the placements are certainly tougher for the students and thus makes it harder for them to have a life outside medicine and be able to revise for their already high pressure exams. With a concours in first year to enter the medical programme (in which only 15% pass as anyone can enter the first year) and another in the final year which then determines the student's future career path, one could argue that the current course structure adds further pressure to what is already a challenging ordeal.

One of the most shocking differences I found was that not only do medical students have compulsory night shifts during certain placements, but that they also have to do 24 hour shifts. I could not compute how it was neither illegal nor deemed completely dangerous to

allow such practice. For the students, and also the doctors who are also obliged to do it (particularly during the internat), it is not good for their mental or physical health to be expected to work non-stop for 24 hours in taking very important clinical decisions. Furthermore, patients should not be treated by doctors who have worked excessive hours to the extent they may not be able to use their clinical judgement correctly in their care and could in theory make significant mistakes.

A particularly frustrating aspect for me was the fact that medications are prescribed by brand rather than the name of the medication – a view shared thankfully by many of the students and doctors. Whilst in the UK we use brands occasionally in the cases where it is important such as for anti-epileptics, it seemed needless that every medication was prescribed by its brand which made it confusing for patients and doctors alike.

Another interesting difference I noted was the composition of the medical personnel. The teams seemed much more white-dominated than in England which is renowned for its ethnic diversity. There were a few black nurses but they were few and far between, and in 16 weeks across 3 different placements I only met one ethnic-minority doctor. In fact, speaking to her and an interne from Algeria who I met on a night out one time, they said they didn't quite feel settled for one reason or another which was sad to hear. Considering there was a very diverse population in Lyon compared to that of the personnel, I hope that it will gradually become more representative of the diversity of the city in the future which will then help other ethnic minorities in the team.

How you have gained from this experience in terms of;

i) Linguistic development

The most important objective of this placement was to improve my ability to speak and understand French. It was certainly challenging throughout; the manner in which the natives speak with their speed and conversational manner is much more difficult to understand than conversing with fellow students who've studied it as a second language. Taking histories in A&E was particularly helpful in improving my understanding, whilst conversing with the members of the team and French students on social occasions was crucial to my overall progress. My ability would fluctuate particularly at the end of the day and if my brain wasn't functioning properly due to feeling tired or trying to wrap my head around something medical. The French class was excellent too for learning key grammar tips and useful expressions that made life in the hospital much easier. I felt I had made significant progress in my linguistic ability by the time I left.

A few language quirks you pick up early on include saying 'bonjour' and 'bon soir' when saying hello formally at the respective time of day and then 'bonne journée' and 'bonne soirée' when saying farewell respectfully. 'Salut' is used informally for saying both hello and goodbye which is a strange concept that doesn't exist in English but you will get your head around it. 'Du coup' is like the French equivalent of 'basically' but it is used in both posing questions and making a point ALL THE TIME! 'Quand même' is used a lot in a sense like 'either way/all the same' and 'voilà' is such a useful way for rounding off any point or story!

ii) Inter-cultural understanding

There are many of aspects of French culture that I like. The food in particular in Lyon is excellent; it lives up to its reputation as the gastronomic capital of France, whether it's for the renowned pastries from the bakeries or the excellent bouchons. It is relatively cheap to be able to buy an espresso in whichever bar or café you go – however if you're more a 'tea person' then it is much more expensive to fulfill your caffeine needs! The café culture is brilliant and you'll find often that all you need to do is find a table and then the waiters will come towards you. It is very important to always address people you don't know in the 'vous' form at first to make sure you don't offend anybody, this is particularly important in the hospital setting (except in the case of children in which 'tu' is used all the time). Ultimately, as previous reports have eluded to, I found overall we have so much in common in our relation to our cultures which smack in the face of the misconceptions portrayed in the frankly dismal European referendum campaign. I hope that Erasmus will continue to function in the UK and give other students the same life-changing experience it gave me.

iii) In terms of your ideas and future plans

Whilst I am not currently planning on working in a French speaking country long-term, having the opportunity to experience and learn what medicine is like in another country has been hugely beneficial. I think I would prefer to work in England for a few years to get my vital early experience and then can reevaluate career options once I have a better idea as to which specialty I would like to pursue. I am not against the idea of living and working abroad again for a period of time and would love to be able to have an apartment in France that I could use for holidays or other occasions to enjoy the culture and maintain my language ability. Living here in Lyon has been an amazing experience; after making friends in Germany, Italy etc. I now feel much more motivated to continue learning languages and exploring the continent further as I have not had many opportunities to travel previously.

Any practical issues that future students on this placement should know about

I think at first it can be difficult to settle within the medical team. The French medical students are nice but not necessarily very open at first – it can take some time to get to know them and in most cases it will be at an ‘associate’ rather than ‘friend’ level. You can quite easily feel left out at the beginning as everyone seems to understand how the ward works and will work like normal unless you flag up that you need some help. Once you’ve settled in and are able to contribute with the clerking or administrative tasks, the placements become much more enjoyable.

A strange bit of advice to give but I would encourage you not to feel too bad about asking to leave if you feel tired or if it’s quite late in the day. On some placements I was still there beyond 18:00 helping with clerking and other jobs when there was stuff to do. However, if there wasn’t much on or I felt a bit worn down, it’s not a big deal to leave as you’re not on the medical student rota and any help you provide is a welcome addition!

If you’re going to live in student halls, bear in mind the need for some basic pots and pans and that whatever day you arrive, you must pay the full rent for that month – even if it’s January 31st! You’ll need some room insurance which was like €40 for the year, but overall I spent far less on rent than the other students who found collocations.

Overall, it’s a fantastic experience that really opens your eyes to the world around you and to better understand the perspective of people from other cultures and backgrounds. Experiencing what it was like to be the ‘foreigner’ was very enlightening to which I learned and observed first-hand how minority groups form due to have simple things in common such as the same nationality and language. I will take forward what I’ve learned to make sure I am always understanding and appreciative of the difficulties that come with adapting to a foreign culture.

Above all just have fun - profitez bien!

Any addresses, phone numbers and contacts that might be useful for future students

Contact details of the supervisors during the placement abroad:

1. **Neurologie** – General : Chef de service - Professeur Sandra Vukusic

Coordonnées:

- Numéro de téléphone: 04 72 68 13 13

- Secrétariat: nathalie.thevenin@chu-lyon.fr

2. **Urgences pédiatriques** : Chef de service - Professeur Etienne Javouhey/ Professeur Dominique Ploin

Coordonnées:

- Numéro de téléphone: 04 72 12 97 37

- Secrétariat: annick.dockes@chu-lyon.fr

3. **L'endocrinologie** : Chef de service - Pr. Françoise Borson Chazot/ Pr. Philippe Moulin

Coordonnées:

- Numéro de téléphone: 04 72 68 13 04 (PM) / 04 27 85 66 66 (FBC)

International Mobility Officer: solange.brandolese@univ-lyon1.fr

Accommodation options details:

Crous Lyon (halls of residence): <http://www.crous-lyon.fr/>

Pari Solidaire (cohabitation intergénérationnelle): contact@leparisolidaire.fr