

Erasmus placement report

I undertook a four-month placement in Lyon from February 2018 to May 2018.

European studies:

The European Studies programme didn't actually factor into my decision-making process when applying to medical school, indeed I don't remember whether I was aware of its existence. Manchester was my last choice medical school, chosen somewhat at random based on its geography and good reputation as somewhere to live. It was also the only medical school to offer me a place so, although I wish I could list a more romantic reason for choosing the course, that's what it came down to. The European Studies programme seemed to be an excellent opportunity to continue developing my French, which I had studied at IB Higher Level, and add something a bit different to my CV. Language classes on a weekday evening can sometimes seem a bit of a chore, especially after a long day in clinical years, but overall, I have been very happy with the ES experience. Studying French alongside medicine often provided a welcome change from the seemingly all-consuming medical workload. The resulting language diploma and Erasmus experience will undoubtedly stand out on future job applications and open doors to positions that otherwise would have remained out of reach. Furthermore, at risk of sounding a bit cliché, it is a fantastic life-experience that I would recommend to everybody regardless of background.

Lyon:

When it came to ranking my choices for the Erasmus placement, Lyon was by far my top choice. The cost of living in Paris and Lausanne ruled them out of contention, as did the climate of Nantes and Rennes. Lyon is located in the central-east part of France not far from the alps, at the confluence of the Rhone and Saone rivers. If you include its large metropolitan area it is France's second largest city, including a large student population of 150,000 split across three main universities. The city is split into three main areas by the rivers that pass through it. To the west is Vieux Lyon, a district of ancient winding streets filled with traditional Lyonnaise 'Bouchon' restaurants and one of the principal tourist hotspots of the city. Within the district are many semi-hidden passageways called 'traboules' which generally contain beautiful architecture and were historically used as shortcuts to the river and then, later, resistance smuggling and escape routes during the city's Nazi occupation. These can be difficult to find but are well worth keeping your eyes peeled for. Between the two rivers is the Presqu'île area extending from Hotel de Ville in the north to Confluences in the south. The northern part of the area is full of grand architecture, museums, and shops, while the southern Confluences area is a regenerated docklands area comparable to a more successfully realised Salford Quays. To the east of the Rhone is the main working and residential bulk of the city, including the majority of the hospitals. It is also worth pointing out the bohemian Croix-Rousse area on the hill above Presqu'île, which is full of independent cafes and bars, traboules, fresques, and many panoramic views of the city.

Organising accommodation can be a daunting prospect, especially in the run up to finals, with a fair few options available and relatively little guidance. I personally decided to opt for student halls due to their low cost (~€260pcm for an en suite) and ease of organisation. I chose the en suite option principally because I didn't want to share a bathroom, but this also proved to be a good choice geographically. La madeleine halls are in Lyon's 7th

arrondissement which is just east of the Rhone, a comparatively 'young' area with many bars and excellent transport links. By contrast, the main non-ensuite halls (~€200pcm) are up a massive hill in Lyon's 5th arrondissement and can be quite a pain to get to and from, especially after midnight. The room and en suite are small and basic but have plenty of storage space and are fine for four months. The kitchen is shared with 15-20 people, but I never had much difficulty getting a space to cook and is generally clean. I didn't actually socialise with many people in the halls in the end, but that opportunity is there for you to form a friends group when you arrive; there are many other Erasmus and international students.

There is of course also the option of finding a flat share, either with other Manchester/Erasmus students or with French people. This guarantees you a nicer place and more of a broader choice of location, but the cost is in the realm of €400-500pcm for most rooms and the process of organising somewhere before you arrive can be tricky. A few Erasmus students stayed with host families with spare rooms, sometimes there was a commitment to speak English (or another language) with the children whereas other people had a standard lodger arrangement. Unfortunately, I am not too sure how you would go about finding these arrangements as many seemed to have been passed on between friends of friends/in Facebook groups.

All students are entitled to reclaim a third of their rent back from the French government through the 'CAF' system. I started this process but was frankly baffled and overwhelmed by the sheer amount of bureaucracy involved in getting just about anything done in France. Opening a French bank account involves more paperwork and documents than I have ever encountered before, and I eventually just gave up. Other people I know have been more successful, but most were still stuck somewhere in the process when I left. If you feel more confident I'd recommend starting very early in, or even before, the elective and ask for support from the administration of your halls (if that's where you're staying).

Moving abroad can be a very daunting prospect, particularly with regards to finding people to socialise with (although I hear the Manchester contingent is going to be a lot bigger next year). I would highly recommend attending at least the first French class offered by Lyon Est (also open to Lyon Sud students) as it is where you will meet all the other Medical Erasmus students who have arrived for the semester; everyone is in the same boat and, in my experience, more than up for getting a 'verre' after the class. The lessons themselves are quite useful as Solange, the teacher, is excellent and helps with informal language and the kind of phrases Erasmus students often trip up over in hospitals.

In terms of things to do in the city, Lyon has plenty. As I have described above there are several distinct areas of the city to explore, full of great architecture and bars/restaurants. The city is also home to some great museums: the unbelievably cheap Carte Musees (€7) gets you unlimited entry to 6 museums, including the Musee de Beaux Arts which has a great collection. Outside of this card there is also the Musee de Confluence which is huge, free for under-25s, and perfect for a rainy day. The Musee de Cinema is also worth a visit if you like films and is in an amazing old building in Vieux Lyon. Lyon was the birthplace of cinema and there are often interesting films being shown across the city with Q&As afterwards with the directors.

Lyon is widely considered the gastronomical capital of France (some would expand that further afield) and the city is packed with amazing restaurants. The traditional 'bouchons' of Vieux Lyon are your best bet for local cuisine, although a bit pricey, alongside the massive Brasserie Georges near Perrache. Away from haute-cuisine, the city is also home to the confusingly named 'tacos', which is a local invention somewhat like a cross between greek gyros with a fajita. The city is packed with bars to discover and the nightlife generally has a really friendly atmosphere. Once the weather gets warmer, huge numbers of people flock to the banks of the rivers for a few verres, often accompanied by a makeshift cheese board. Finally, if you are a fan of electronic music the Nuits Sonores festival in May is a must. Aside from the official (and rather expensive) events, there are countless free events across the city in some very picturesque settings with great DJs.

Public transport in the city is reasonably good, with buses, trams, and four metro lines. A student pass for all services costs €30 a month; you'll need to get a 'tecely' card from one of the TCL offices first. The city also has a bike share scheme similar to boris bikes called Velov which costs €15 a year and also works via your tecely card. For getting to the airport, I would recommend booking the Rhoneexpress online in advance because it's cheaper, or get a BlaBlaCar for even cheaper.

Placements:

Neurogeriatrics, Charpennes:

My first placement consisted of four weeks spent on the neurogeriatrics ward at Charpennes hospital. I had applied for geriatrics in the mindset that the medicine would be rather general and the pace of turnover slower than in other services, allowing me some time to orientate myself within the French medical system and get my language up to speed. Upon my arrival, I had a meeting with the 'assistant' responsible for externs at the hospital which served as an induction and brief tour of the hospital. She and all the other staff at Charpennes are lovely and more than happy to help with any problems or queries, both related to the placement and more generally.

Charpennes itself is a specialised geriatrics hospital located towards the north of the city, technically just within the neighbouring municipality of Villeurbanne (a distinction much like that between Manchester and Stockport). Charpennes is well served by public transport, on both the A and B metro lines as well as the T1 tram line, making it easy to get to from the majority of the city. From my halls (La Madeleine) the commute was a mere 15 minutes.

The neurogeriatrics service itself is an 18 bed unit that accepts patients who have had a stroke in the past few days in order to complete their investigatory 'bilan' and to medically optimise them before transfer to a rehab centre. Most patients were more or less medically fit and required a stay of around a week, however there were always a few highly complex patients who required much more involved care. The medical team consisted of the 'assistant', an intern, two externs (including myself), and the 'chef de service' who was for the most part busy in clinics.

The working day was very similar to that of a UK medical ward with a ward round in the morning and jobs/clerking of admission in the afternoon. Once we were familiar with the workings of the ward the assistant was happy to let us externs see the simpler patients ourselves on the morning ward round, which allowed me to quickly improve my working

French. The clerking of admissions was generally done with, or under the supervision of, the intern. With only 1-2 admissions a week it was not uncommon to be allowed to leave just after lunch.

Neurology, Hoptial Neurologique :

My second placement was on the neuroinflammatory ward at the neurology hospital, which principally treats multiple sclerosis. I chose the placement as I feel that neurology is one of the subjects to which we receive the least clinical exposure at Manchester and I felt I could benefit from some time assessing and examining patients with neurological presentations. It should be noted that when you apply for a neurology placement you don't get a choice of service and could be placed on any of a large number of wards ranging from neuro-oncology to epilepsy.

The Hopital Neurologique is part of the large Groupement Hospitalier Est complex which to the east of the city, technically in the commune of Bron. It is relatively easy to get to by public transport, but certainly more of a hassle than my previous placement in Charpennes. The hospitals in the Groupement are currently only served by a bus from Grange Blanche, where the medical school is located, but the service is regular and only takes 10 minutes. Construction of a tram line to the hospital is currently underway however, and may be completed in time for the next cohort of Erasmus students.

The neuroinflammatory service is actually divided into two services which the externs split their time between, generally three weeks on each. I started my placement in the conventional inpatient ward which mainly takes admissions for investigation of new symptoms and known MS sufferers for treatment of flares. The patient load is quite varied with patients at all stages of their diseases as well as numerous very rare conditions and diagnostic mysteries. The role of the externs on the ward was to attend the morning ward rounds led by the consultants and then clerk new admissions in the afternoon under the supervision of the interns. The three weeks I spent on this ward were probably my favourite of the whole Erasmus placement due to how interesting the cases were and how much autonomy was afforded to the externs. I greatly improved my neurological exam and ability to localise a lesion, and also had the opportunity to perform a lumbar puncture. The main downside to the placement was the fact that the (inexplicable) French system of only accepting admissions after 14:30 often led to the day stretching to 6 or even 7pm.

The other half of the service is a day hospital that delivers treatment infusions to patients, predominantly MS sufferers, on a regular basis. Each patient for the day needs to be seen by an extern/intern and examined to ensure that their condition is stable before their treatment can be started. Depending on the drug being used they may also need an ECG and specific functional tests designed to monitor disease progression. The day starts earlier than on the conventional ward (at 8am) but is often over by 1 or 2pm as once the treatment infusions are underway there is little else that needs doing. I must admit that this routine quickly became very repetitive and dull as it essentially boils down to repeated neuro exams on stable patients without any diagnostic uncertainty. On a positive note I can now perform a very comprehensive neuro exam in under 5 minutes and interpret the findings without much difficulty.

Paediatric nephrology, Hopital Femme Mere Enfant (HFME):

My final placement was on the paediatric nephrology, rheumatology, and dermatology service at HFME, part of the Groupement Hospitalier Est. I am interested in paediatrics as a future career and chose the placement in order to get more exposure, as well as to see how the system works in France. I put the placement last as I thought it would be the most challenging from a French perspective, which proved to be both true and false. On one hand children use a simpler sentence structure than adults and often speak at a slower pace, making them easier to understand. However, a different vocabulary is needed to seem natural with them and gaining the confidence of a shy toddler can be extremely difficult as a non-native speaker. None of my previous experiences had allowed me to develop these language skills, so in hindsight I don't think it would have mattered where the placement had fallen.

The service consists of three main 'ward' based areas plus outpatient consultations. On the first day the externs spent about an hour working out a timetable so that we were evenly split between the areas. This translated to two weeks spent on the traditional inpatient ward, one week on each on the rheumatology and nephrology day hospitals, and two weeks spend in the OPD. On the conventional ward the externs are assigned patients and are responsible for following them alongside the interns throughout their admission, as well as clerking new admissions on their arrival. The day hospitals consist of examining and clerking the patients before their treatment/investigation can begin. Finally, the OPD consisted of observing consultations.

The French medical system:

There are of course both similarities and differences to note between the French medical system and the NHS. Overall, my time in France was highly informative, allowing me to observe ways of organising that do not exist within the NHS and a rather different medical culture. The starkest differences were to be seen in the undergraduate training structure and the resulting effects on the attitudes of French medical students.

French medical school is tough and incredibly competitive. The first year of the six-year course is shared with all other students studying health sciences (eg. Physio, nursing, etc) who all sit a common exam at the end; only the very top performers in this exam then proceed to continue with medicine. There are then another two non-clinical years followed by three semi-clinical years with increasing time spent on the wards. This all heads towards a national series of written exams called the ECN or 'concours'. Similar to first year, this is a ranked exam which decides the speciality and location of your future training without a chance to resit. The students are completely focussed on this exam and the sense of stress and anxiety is palpable in comparison with in the UK. Indeed, their placements in clinical years are also decided by their ranking in end of module exams adding to the constant state of competition.

I would say that the French students have far greater theoretical knowledge than those in the UK (or Manchester at least) but are weaker in the more practical side of medicine. There is almost no communication training or formalised bedside teaching, and no practical OSCE style exams. The result in my experience was an impressive ability to answer questions on pathology and pharmacology but occasionally floundering clinical assessment skills and rather poor history taking. I particularly noted a difficulty in sensitively approaching topics such as depression and suicide, including among interns.

Immediately following medical school is a 5-year internship within your chosen speciality. All the interns I encountered were excellent, and the overall standard of care on the ward was often better than in the UK. Helping this situation is an abundance of beds and adequate staffing; I never witnessed any bed pressure at all during my stay, even on geriatrics during winter. The lower patient-doctor ratio and relaxed attitude towards discharge means that more time is spent with patients and they are better supported towards a safe discharge. From an investigation point of view, I found that the French tend to CT/MRI/PET scan at every opportunity which, although could be seen as unnecessary exposure, could go some way to explaining their higher cancer detection and survival rates. Medicine in France also seems to be much less guideline based, with guidelines only existing for major conditions and even then rarely consulted.

The culture and environment on the wards is far better than in the NHS. There is a real team spirit that I have rarely noted in the UK, with better continuity of team members and a much flatter hierarchy. The medical team and medical students all take lunch together for at least half an hour, usually more, in the 'self' (canteen) which is a really good way to get to know each other. (On a side note, the food in the canteen is generally excellent and at a flat rate of €4 per meal for a main, side, side salad, desert, bread roll, cheese, and coffee can lead to weight gain if eaten on a daily basis.) The downside to the culture is the complete acceptance of very long working hours, 10-12 hour days are very much the norm in all specialities. This in part seems to be due to an inefficiency that I couldn't put my finger on for the whole time I was there, for some reason most clerical tasks seem to take twice as long as they would in the UK. Coupled with frequent 24h on-calls, I am unsure how interns in France are expected to have a social life or interests outside of medicine. Furthermore, interns are paid shockingly poorly for this throughout the 5-year programme: even a heavy on-call rota could net just €2000pm before tax.

I greatly enjoyed my time on placement in France and am grateful for the opportunity to have got to know a foreign medical system in such depth. Before the elective I could potentially have seen myself working there in the future, but I have come to see the working conditions of the NHS from a new perspective. I could still consider the idea of moving there as a consultant, but the ridiculous hours and poor pay rule it out of contention as a trainee. I do, however, hope to use my French in some capacity, perhaps in the context of voluntary work abroad.

Useful contacts/sites/apps:

Solange Brandolese (international mobility coordinator)– EMAIL

Flixbus (cheap intercity bus travel)

Ouibus (more expensive but more widespread intercity bus travel)

AllBikesNow app – shows you where there are free Velov parking spaces and bikes

Moovit – in my experience the best of the public transport apps, the official TCL one is pretty unreliable

Skimania – company offering cheap(ish) day travel to and from ski resorts + lift passes

BlaBlaCar – car sharing site