

## Medical Elective in Madrid – Los Meses Mejores

### 1) Why did I choose to study on the European Studies programme?

One of the main reasons for my choosing Manchester as a University was the fact that it offered the Spanish European Studies programme. I really enjoyed studying arts and languages at A Level, particularly studying Spanish culture and literature, so I wanted to continue to do so at University alongside my degree. Additionally, I had travelled around Central and South America and felt and still feel that I would really like to move out there to work in the future. Thus, keeping up my Spanish was a priority for me. The ES programme facilitated this, allowing me to study Spanish and to go on to complete clinical placements abroad (which I did both during my SSCs and my 4 month ERASMUS placement). These placements provided a really useful insight into what it is like to work abroad, within another healthcare system, as well as giving me the opportunity to improve my Spanish.

### 2) Living in Madrid

When choosing whether to opt for 4 months in Granada or Madrid, I reasoned that Granada would be a beautiful place to visit for a few days, whilst Madrid – being so much bigger- would be much more difficult to get to know in short amount of time. I'm so happy I ended up where I did, but I can say with certainty that whichever city you end up in, you'll feel really content as there are many advantages to both.

Madrid is an incredible city. I hadn't been there before moving out for my Erasmus placement and I had originally thought that it would be a relatively conservative, traditional place. However, Madrid is so vibrant and culturally and aesthetically diverse with many different sides to it. Granada is definitely cheaper for rent etc., but it's so easy to live cheaply and really well in Madrid, particularly as the euro is currently so much weaker than the pound, and the Erasmus grant is unbelievably helpful.

#### Rent

Students paid between 280-450 euros and in the centre I would say 350-450 is average. I paid 390 and lived in Lavapies, which is a really interesting, alternative area with cobbled winding streets and lots of art galleries, squares, tapas bars, flamenco halls (Candela; Casa Patas), theatres and markets. There are also big lebanese and senagalese populations here so great restaurants and lots of shops where you can buy cheap otherwise hard-to-get ingredients. I lived with 2 spanish people, a girl and a boy, and found this helped my Spanish enormously so try to live with at least one Spaniard if you can! I would also recommend La Latina, Malasana and Barrio de las Letras as fun areas to live in.

## Food

There are so many amazing local markets (I recommend Anton Martin Market, San Fernando and Mercado de la Cebada), as well as cheap supermarkets like 'dia' and 'lidl', to get all the food you could ever need. In most cafes across the city, a croissant and a café con leche is a mere 2 euros and you can get an unbelievably filling menu del dia for 7-10 euros.

## Transport

Some students bought a monthly travel 'abono', which you can organize when you arrive (you just need a passport photo and to arrange a meeting with the transport office at a major metro station like sol: obviously this is easier said than done but by no means impossible. I just bought 10-ticket passes for 12.20 euros, as I only used the metro 5 times a week in the mornings, because my hospital was only a 45 minute walk from my flat so I walked back every afternoon. However, if you're placed further away, an abono is definitely worth it.

## **3) Working in Madrid - Spanish Clinical Placements**

I found my time in a Spanish hospital to be really interesting. There are a lot of differences between UK and Spanish medical training. Spanish students have a 6-year degree programme and at the end of this, take the MIR – a national exam that ranks all students. They then, on the basis of their score, get to choose their preferred hospital and specialty. They go on to do 5 years of specialty training before they essentially become consultants or 'adjuntos', which is a big contrast to the number of years spent training in the UK and ultimately they have a lot less exposure to general surgery and medicine before they go on to specialize. However, in some ways I felt that this was not a completely negative thing, as UK graduates are required to undertake community placements (eg GP and psych) or surgical placements at F1 and F2, regardless of whether they already know they want to go on to specialize in medicine (and visa versa).

In general, doctors move around in big teams on a ward round and junior doctors have much more support from senior team members than in the UK for general ward cover and clinics. The staff are often all very sociable and go for coffee together and there is much less of a sense of hierarchy there than in the UK.

## Hospital Infantil Universitario Nino Jesus

This is a massive paediatric hospital next to El Retiro park. The docencia office are really helpful and I would recommend doing a placement here. I

heard good things about the gastroenterology and dermatology departments in this hospital from the other students (I was mostly with 4th year students and other Erasmus students and it was quite a sociable placement: we all went out as a team at the end of the month for pizza).

### Paediatric Cardiology

I really enjoyed this placement. My Jefe, Dr Antonio Bano, and the rest of the team were really friendly and it was a nice placement to start on as I was in clinics all the time and was able to build up my Spanish history taking skills. I learnt how to take a focused paediatric cardiology history, which will undoubtedly be useful in the future as my first F1 job is in paediatrics, as well as gaining an understanding of how to interpret echos.

### My Day

-My usual day started at 930 and was made up of new patient and follow up clinics. I saw a variety of really interesting things (Williams' syndrome, marfan's, edward's, patau's, noonan's) and listened to a wealth of murmurs.

-I then attended the echo clinic in the afternoon and had teaching on how to interpret cardiac echos as well as being able to assist in performing them.

-I also helped translate an academic article on cardiac changes in male teens with anorexia nervosa. This was a useful way to practise my Spanish and to be useful to the team I was working with. I would really recommend asking your supervisor if he or she has any projects like this that you can help out on as it's such an easy way to get published or at least acknowledged in an article.

### Hospital Universitario de la Princesa

This is one of the main Universidad de Autonoma hospitals. It's in a posh (pija) area called Salamanca that's a 20 minute walk from the centre. The other Autonoma hospitals are bigger but further away from the centre (with is 'Puerta del Sol'), although probably have more specialized units for certain things. I wanted to do a neurosurgery and dermatology placement and La Princesa provided both of these, as well as being linked to the paed's hospital Nino Jesus. The docencia is on the first floor and they were prepared for our arrival and we organized to have a locker for our time there (the hospital departments were not aware we were coming, but were very welcoming!). Whilst here, I also decided to join the 5<sup>th</sup> year lectures in the afternoons, to improve my spanish listening and to meet other students.

### Urgencias

This is definitely a useful placement to do, wherever you are. La Princesa isn't a major trauma unit so in comparison to places like La Paz or Doce de Octubre, things will be a bit less hectic, but in some ways I think I found this useful, as there was more time for me to chat to the doctors and to ask questions.

#### A Typical Day in Urgencias

I would arrive at 9 am and leave at 3-330pm, without a break (as you finish your day and then get to have lunch). I spent most of my time in 'Rapidos' as I wanted to practice my history taking skills and this was the 'Minors' section of Urgencias. Patients would arrive, have a full history taken and examination performed in a clinic setting before being triaged into medicine, surgery, ophthalmology, trauma or dermatology by the residentes (junior doctors) supported by the adjuntos (consultants). There would then be a handover to the doctors on call (la guardia) at about 330 that I would stay for.

This placement gave me the opportunity to improve my Spanish and to keep up my medical knowledge. I did, however, find it really difficult to translate my normal English history structure into Spanish. It took me a few weeks before I could feel confident in remembering questions necessary to rule out differentials and form my likely diagnosis. For this reason, I don't think I would advise doing it early on in your 4 months, as it might be a bit overwhelming.

I also spent some time in the Ophthalmology Urgencias, where I was able to practise my ophthalmological examination and history taking and to improve my knowledge of eye pathology. I thought that this was really useful as I

#### Neurosurgery

This was my third placement and was also in La Princesa. I split my time between ward rounds, clinics – both follow up and new patients – and theatre.

#### A Typical Day in Neurocirugia

-I would arrive at 8 or 830 every morning for a neurosurgery meeting or MDT with traumatology, vascular surgery, ICU or neurology. Every other Monday, the trainee residentes gave presentations on interesting cases. All of these meetings were beneficial for both my language learning and medical understanding.

-I would then head down to surgery in one of the 2 'cirufanos' or 'theatres'. I saw a wide variety of neurosurgery and was able to scrub up a couple of times to assist the scrub nurses. There was a lot of interaction between neuroradiologists, neurophysiologists and neurosurgeons in the majority of surgeries. The most interesting surgeries that I saw were ones where neurophysiologists helped to determine the effectiveness of surgical interventions, which were placed using the anatomical information provided by

concurrent radiological scanning. These included deep brain stimulation surgeries, for Parkinson's Disease, and mapping of the homunculus of the motor cortex to avoid damaging motor function when removing a metastatic tumour.

-I was also able to attend 2 conferences (on back pain and Arnold-Chiari malformations) during my time in the department.

## Dermatology

As I had never had a dermatology placement before, I was able to learn a lot here. There were 5 residentes of varying levels, 4 adjuntos and 2 jefes.

### A Typical Day in Dermatology

-I spent the morning (930-3) in clinic and minor surgery and then attended the meetings at the end of clinic. There was also an MDT once a week. This placement gave me the opportunity to practise my dermatological history taking and examination skills as well as to improve my knowledge of common dermatological conditions. I saw a lot of common things (psoriasis, acne, eczema, fungal infections, different kinds of skin cancers and benign lesions) as well as more rare conditions (dermatomyositis; pyoderma gangrenosum associated with irritable bowel syndrome).

-On two afternoons a week I had the opportunity to go and see a PUVA treatment session for psoriasis, and I also had the chance to watch and help out in minor surgery if I wanted to.

In summary, my hospital placements were fairly relaxed but interesting. It was initially challenging to actively participate in clinics or ward rounds due to the lack of confidence I had after not using my Spanish for 9 months, however, this improved a lot and by my final placement I could happily chat to patients and staff using both medical and colloquial Spanish. The only challenging thing is getting your placement sign offs validated, no matter how many times you explain it, and you UPSAs signed off, as you won't have much of an opportunity to do any prescribing or to undertake any practical skills. I would recommend completing all your UPSAs before leaving the UK and printing copies of your placement assessment forms to get them signed and stamped by the hospital, rather than getting them to sign your iPad.

## **4) Differences between the hospitals of Spain and the UK in terms of medical practice, the medical training programme, and medical cultures**

There are a lot of differences between UK and Spanish medical culture. Medical teams in Spain are often a lot closer than in England, and junior doctors are very much supported by senior medics, whereas during my student assistantship I felt that UK junior doctors were relied upon to manage



patients more independently.

Differences in doctors' attitudes to patients made me feel that I would find it difficult to practice medicine in Spain. We have been trained to think of medical care as being patient-centred and led and Spanish medical practice often differs from this. This in no way meant that I didn't feel that the doctors were as proficient, but their approach to patients was often very different, with little emphasis on their 'ideas, concerns and expectations' in history taking, as well as minimal discussion on patient preference for treatment or explanations on how to improve their symptoms outside of using prescribed medication.

Confidentiality was another issue that is regarded as incredibly important in the UK, whereas in Spain, if someone came in to ask about the state of a patient, information was often given freely and without question. Furthermore, privacy was a real issue, with doctors, patients and nurses walking through consulting rooms in both A&E and dermatology, when patients were frequently exposed as part of their examination.

Watching a bad news being broken was also a bit of a shock, as there seemed to be no real structure to their doing so and no consideration for the patients previous knowledge or perceptions or for how they or their family might be feeling after. However, it's difficult to objectively decide what is a 'better' or 'worse' way to practise medicine when you've been educated in a specific paradigm that differs from the one that your immersed in.

La crisis was something that was constantly referred to throughout my time in Madrid and not least in the hospitals. You're not guaranteed a consultant post once you've finished your training, so many doctors choose to go straight into private work (particularly from my dermatology team). Many other doctors work privately in the afternoons after mornings in public hospitals, as a normal working day in a public hospital for a junior doctor in Spain is generally much shorter than in the UK. Their pay is also significantly less than a junior doctor in the UK (starting at around 1400 euros a month before tax). Typically, medics start at 9 and surgeons start at 8 and everyone finishes by 3, at which point they head off home to have lunch and the hospital is just covered by on-call staff.

## **5) What have I gained in terms of linguistic development?**

My Spanish definitely got a lot better, in terms of vocabulary and fluency when I was speaking and especially my listening and I improved massively, according to the Erasmus online test that you had to sit before and after your trip. I felt so much more confident in my speaking ability as time went on, which in turn means you speak more and improve exponentially. However, 4 months is really so little time to establish yourself in a city, find your way

around, make friends, explore the multitude of interesting places and improve your language level.

My first month was productive but really hectic (trying to find somewhere to live after the start of the month can be quite challenging) and over the next few months I had a lot of visitors and went on some weekend trips: it's amazing how quickly time passes. For that reason, I would really recommend living with some Spanish speakers, and, if you can, organizing a Spanish course for when you're there, particularly because the university reimburses you up to £250 to do so. I'd also recommend going to Cine Dore (an amazing old cinema near Anton Martin metro station ) to watch some Spanish films; going to language intercambios (Bar La Carmencita do a really good weekly one, or advertise on [www.tusclasesparticulares.es](http://www.tusclasesparticulares.es) to find a keen Spanish amigo/a), and reading Spanish books.

## **6) What have I gained in terms of intercultural understanding?**

I think this is a really interesting and exciting time to be in Spain, as 'la crisis' has meant that so many more young and old people are politically engaged and there is a sense of a need for change in the country, with a lot of support for the politics of 'Podemos' (quite a different atmosphere from returning to the UK to confront another 5 years of the Conservatives). As I lived with Spanish people, I got a sense of how they had been affected by the economic hardship and high levels of youth unemployment due to dwindling job prospects (both of my housemates felt really unsecure in their jobs, even though one was a dentist and one worked for google, and I could see this was incredibly stressful).

Spanish people are so warm and generous and I felt my awkward Englishness dissipate considerably by the end of my 4 months in Madrid (in fact, in Spanish, the only word that comes close to describing the feeling of being 'awkward' is 'incomodo' meaning 'uncomfortable' with no direct translation). I really appreciate their enthusiasm and openness as well as their laid back approach to things. I also discovered so much more about their art (make sure you go to Museo Sorolla, Museo de la Reina Sofia y El Prado), literature (read some Lorca y Antonio Machado) and food and drink (La venencia, sala de despiece, taberna la carmencita) and appreciated the fact that everything starts and is open so late on a daily basis (being someone that enjoys taking time over decision making).

## **7) How has this experience impacted on my future plans?**

I loved living abroad and 4 months felt like nowhere near enough time for me. Spain has so much to offer: the food, art, weather, music and energy twinned with a much more laid back attitude to life make me sure that I will return for

more than just a holiday – perhaps to do research as there is a prestigious cancer institute here and I definitely want to do a PhD in the next 5-10 years.

I also really want to work abroad in South or Central America. I enjoy teaching a lot and so if I was to have a year out after my 2 foundation years in London, I think I could definitely see myself applying to teach English and travel in Argentina or Chile or to apply to do some research at a University there.

## **8) Practical issues for future students – Good things to know!**

-I initially stayed with some friends of family friends, but all the other students got an Air BnB for the first 2 weeks. You can find pretty cheap offers and it saves on a lot of stress and hassle when you first arrive.

- Get a phone ASAP. I got a Mas Mobil 'pre-pago' contract that gave me 1 GB of data and 50 minutes of free calls for 10 euros a month. I never needed more than that – the free calls early on are incredibly useful to ring up landlords and arrange house viewings. Other than that, everyone uses whatsapp (from 10 year old children to 60 year old landladies – in my personal experience) so all you'll need is the data for you to communicate to your heart's content.
- Find an apartment. I suggest [www.idealista.com](http://www.idealista.com). New places arrive online on a daily, if not hourly, basis. It actually becomes quite addictive to check it. Rooms range from 280-450 plus bills (about 20-30 per month)

Single currency cash passports are useful as you can avoid withdrawal charges. The Erasmus grant arrives on a card similar to these called a Corporate Cash Passport, given to you by the university.

Useful Webpages:

Weekend Trips: ALSA Bus Company Website: [www.alsa.es](http://www.alsa.es)

Useful website for flat searching: [www.idealista.com](http://www.idealista.com)

[www.pisocompartido.com](http://www.pisocompartido.com)

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