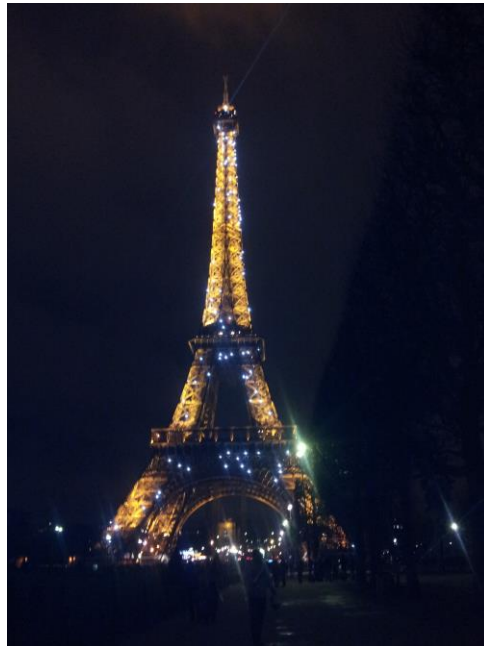


Paris Descartes University (Paris V) Placement Report



January 2014 - May 2014

WHY I CHOSE TO STUDY ON THE EUROPEAN STUDIES PROGRAMME

For me, the option to enrol on the European Studies programme was one of the main attractions of studying Medicine at Manchester above any other university in the United Kingdom. I thoroughly enjoy the challenge of learning languages and having studied both German and French at GCSE level, I opted to pursue my French studies further and completed an A level. I thought it would be a shame to not further develop my language skills at this point, having studied French for a number of years and I was keen to attain a good level of fluency. I felt that studying Medicine with European studies (French) would provide the ideal solution as it would allow me to combine my love of learning languages whilst also fulfilling my ambition of becoming a doctor. In addition, the opportunity to undertake SSC placements abroad in 3rd and 4th year, as well as a 16-week placement in final year, was also appealing and I knew this would provide a perfect chance for me to hone my language skills and acquire a good level.

My A-level tuition stood me in good stead for starting the language lessons in 1st year as we had been stretched beyond the A level syllabus and I found the lessons in the first few years to be fairly simple and easy to attend as they were timetabled during the day amidst our medical teaching schedule. However, keeping up with french lessons and completing required assignments during clinical years required more organisation and self-motivation. Especially, as language lessons were now and in the evening and I had immersed myself in a range of extra-curricular activities including learning another language. The teaching provided during lessons and homework helped build us up to the level required to pass both the B2 DELF exam at the end of 3rd year and the C1 DALF exam at the end of 4th year and all my class succeeded in passing both exams at first attempt.

OVERVIEW OF PLACEMENT

Having already undertaken a SSC in France in 3rd year and having spent a month in Montpellier, I had some idea of what to expect of my placement and how the French healthcare system works. Despite this prior experience, my placement was still a steep learning curve and there were times when things were difficult and I struggled. However, the difficult times were far outnumbered by the times where I felt a sense of achievement. The first few weeks were the toughest, in part due to the sheer volume of administrative work required and in part due to taking some time to settle down and adapt to my surroundings and the language. However, in spite of this, I thoroughly enjoyed the experience and have no regrets - I know that I was fortunate to have had this opportunity.

Another thing that I think is important to mention is the people - both within and outside of the hospital. I had heard that Parisians can be rather rude and unfriendly prior to my placement and having not visited Paris in the recent past, I relied on others experiences to give me an idea of what I would be facing. Therefore, I arrived in Paris prepared to be deal with unpleasant people. However, in my experience, the majority of people I came across were kind and very helpful, which surprised me at first. I think

that just like any other big city, there is less familiarity and people are busy and absorbed in themselves, but I did not find the majority of people to be noticeably rude or unfriendly. However, metro etiquette can be another story!

PARIS

ACCOMMODATION

I stayed in Paris university accommodation (CROUS) which I applied for during the summer before my placement towards the end of 4th year. There is a lot of competition for places but despite this everybody from Manchester who I know applied for a place before the deadline was offered accommodation.

My accommodation was located in the 18th arrondissement in the northern part of the city and consisted of a studio with an ensuite and kitchenette located next to a university campus. I did have second thoughts about accepting the accommodation, especially once I learned that my hospital was located in the South of the city on the other side of the river Seine. However, I am glad that I accepted this accommodation offer as I am aware of friends without prior accommodation arrangements having a stressful (and expensive!) first few weeks, whilst trying to secure suitable long term accommodation, whereas I was able to move in and settle in relatively easily and quickly. My studio cost 500 Euros/month and despite being at the northern edge of the inner city, it was very easy and not too time-consuming travelling to the hospital (30-40 minutes door-to-door) and less to some of the more central areas.

There was a great deal of paperwork involved for securing accommodation and prior to moving in, which had been sent via email but it was not very self-explanatory and I ended up completing it at the accommodation office. In addition, students in France are required to purchase housing insurance and civil insurance, have a French bank account and provide evidence of their enrolment at a French University and a copy of their University card.

The evening of the day that I moved into my accommodation, a soiree was being hosted in the cafeteria to welcome new student and I decided to attend. This was the first opportunity I had to meet other students. I was fortunate to meet an Erasmus student from Spain who was also a medical student and on placement at the same hospital as me. He had been in Paris since September and was able to provide invaluable advice from his own experience. His advice definitely helped me organise myself and saved me both time and money. I found that Erasmus students were the easiest to engage with and most willing to help, whilst French students already had their own friendship circles and tended to keep to themselves. Despite staying in a very large residence, I found that I rarely saw other students and this would often only be in passing through the main front door or on the stairs. There were events put on by the university residence every month or so but in my experience, the general atmosphere was not as sociable as I had hoped. Apart from this, I was satisfied with my

accommodation choice.

TRANSPORT

I chose to buy a monthly pass (navigo mois) which covers all modes of public transport in Paris - bus, metro, train. There is an annual pass available for students but unfortunately this cannot be subsidised to a monthly pass therefore the monthly navigo pass worked out to be the best option. I found this to be the best value for money as it allowed me to make as many trips as I wanted within the city for a sum approximately 67 Euros/month. Trips to the airport or into the Parisian suburbs are not included and separate tickets need to be purchased for these.

The metro is well-linked and reliable, and this is the mode of transport I used most often along with the RER. However, the RER trains were often susceptible to delays and could become extremely crowded in the busy morning rush hour.

LIVING COSTS

I had anticipated that living costs would be high. However, as other students have commented in the past, the costs of living in Paris did still come as somewhat of a surprise.

I received an Erasmus grant in the region of 1000 Euros for the duration of the placement, which was paid in 2 sums, with most of the money being given at the beginning of the placement. We did not receive the 2nd sum until our placement had ended! In addition, French medical students (externes) are paid for their placements. The amount they receive depends on their level within medical school. Therefore, as a 5th year, I received a monthly sum of 220 Euros, which also helped with covering costs. To receive this money, this required opening a French bank account, taking the RIB provided to the medical personnel office and more administrative work but it was worth it! The hospital also helped me cover the costs of travel and further reduced the cost of the monthly navigo pass I had purchased.

My main costs were accommodation and transport. Once these had been covered and I had determined my budgeting, I had the opportunity to treat myself to some new purchases on a few shopping trips and to enjoy my stay in Paris and eat out without worrying too much about how much money I was spending. It is possible to lead a good lifestyle if you are sensible with your money and do not splash out too much as I learned!

THE CITY

One of the main reasons I chose to undertake my year 5 placement in Paris was because I knew that I would never have a shortage of things to do and see over the 4 months that I would be spending there. Paris is a large city and spending my placement there allowed me to explore the true city in depth as well as visiting all the tourist attractions. My daily commute to and from hospital meant that I got to know the area around surrounding my hospital and the Paris Descartes Medical Faculty very well (14th and 5th arrondissements). I would often walk past Jardin de Luxembourg and Jardins des Explorateurs after finishing at the hospital as well as along the busy

Boulevard Saint-Michel which leads to the river Seine and Notre Dame.

Some of the things I enjoyed doing in Paris included:

- Walking along the river Seine at the weekend
- Visiting the Eiffel Tower at night. In my opinion this is best seen and climbed at night - the view of the city with all the lights is beautiful and the Eiffel tower itself looks spectacular with the lights turned on
- Visiting the Louvre/Pompidou/Orsay/Orangerie museum - all museums in Paris are free on the first Sunday of every month for everyone and free for students under the age 25 all year round (providing you bring ID with your date of birth - I used my Paris student ID). The museums can be very busy on weekends especially on the first Sunday of the month so it is best to visit during the week if possible
- Visiting Arc de Triomphe and Champs élysées
- Visiting Sacre-coeur provided amazing views of the city as it is located at the highest point of Paris and the surrounding Montmartre area consists of small streets with lots of cute little local shops. I was lucky to have this within easy walking distance of my accommodation.
- Visiting Notre Dame and Shakespeare bookshop located beside
- Visiting Galerie Lafayette - all the major designer brands under one roof
- Visiting Disneyland Paris
- Watching ballet at the Palais Garnier - students are able to obtain reduced rate last minute tickets on the morning of the show
- Visiting Chateau de Versailles with the Echanges Internationaux A Paris (EIAP) group. This is a student group that regularly organises a range of visits and activities for Erasmus students. The trip allowed me to meet other Erasmus students and broaden my circle of friends for future events and activities in Paris.

HOSPITAL PLACEMENT

I spent my 16-week placement shared between 2 specialities: anaesthetics and emergency medicine.

For my anaesthetic placement, my time was divided between the general/ abdominal surgery unit at l'hôpital Cochin and the obstetrics and gynaecology department at the maternity hospital - 'l'hôpital Port-Royal'. This placement involved spending time in theatre, the delivery suite, attending preoperative assessments, and shadowing and assisting the on-call 'internes'.

I was fortunate to meet some very enthusiastic 'internes' who were keen for me to be actively involved in all procedures and consultations that they undertook. This meant that I had the opportunity to learn and practice how to take a good anaesthetic history, administer epidural and spinal anaesthesia and in theatre, I was given significant responsibility for the process of anaesthetising the patient. There were only a few French medical students on placement at the same time as me and they only attended

twice a week. This meant that, at times, I was the only student in the department and had the opportunity to experience and see much more than I would have if there had been lots of other student.

For my emergency medicine placement, there were a significant number of final year French medical students present for the first half of my placement, which meant that the workload could be fairly light once shared. The rota consisted of Saturday afternoon shifts and full weekdays clerking patients arriving in the A&E department and also full weekdays in the observational unit and resuscitation area.

In the morning on weekdays there was a 'staff' handover which students on shift were expected to attend and there was once weekly departmental teaching for all the 'externes' and 'internes'.

When clerking in patients, I was expected to take and note the history, examine the patient, present the case to a senior doctor and discuss and arrange further investigations before deciding whether the patient would be admitted/transferred/discharged.

This placement gave me an opportunity to tie together all that I have learned over the past 5 years at medical school. I found it challenging combining my French language skills with my clinical medical and diagnostic skills. I especially found it challenging, typing up my clerking onto the computer as I had had little chance to practice my written French since arriving in France and was prone to misspelling! However, despite the challenges faced at the beginning of this placement, I thoroughly enjoyed my experience in the emergency department and felt a real sense of achievement as time progressed and I became more proficient.

DIFFERENCES BETWEEN FRENCH AND UNITED KINGDOM HEALTHCARE SYSTEM, MEDICAL CULTURE AND MEDICAL TRAINING

Despite the close geographical proximity of France to the United Kingdom, the medical training process and medical culture, in particular is quite different.

The French healthcare system is partly state funded and partly funded privately by the patient through their medical insurance. However, some people are entitled to 100% reimbursement dependant on their social circumstances. As the healthcare system is not solely state-run, this means that there is more disposable income and cost is not a factor which is considered so much when determining which investigations and treatments patients are entitled to. This has both its advantages and disadvantages.

Medical School in France lasts 6 years in total. The first 2 years are solely theoretical with the following 4 years involving hospital placements - 'stage' and lessons - 'cours'.

Entry into medical school is not a competitive process as it is in the United Kingdom and all students wishing to enrol in Medical school in France can do so. However, passing the first year of Medicine is tough and this is the differentiating factor as only a small percentage of medical students succeed.

At the end of the 6th year there is a national exam 'le concours' which is

used to rank medical students and hence determine which speciality they may enter. There is no concept of Foundation training in France, with speciality training commencing immediately following the end of medical school. Unlike in the United Kingdom, there is not a visible progressive ladder for doctors between leaving medical school and becoming a consultant illustrated by a change in title. Doctors remain at 'interne' level until they are a fully qualified consultant.

French Medical students are examined solely through written papers and practical skills, clinical examination skills and communication skills are not formally assessed or taught. I was given the opportunity to assist as an examiner/instructor at an OSCE style simulation session with simulated patients for 4th year students. This was being run for the second time since the facility opened in 2013 and is a very new addition to the French medical training programme which is still in the trial stages before it becomes an established part of the teaching programme.

In addition to this, French medical students do not learn or practice undertaking clinical skills such as venepuncture and cannulation. These tasks are usually performed by the nurses and I was surprised to learn on my anaesthetic placement that some of the 'internes' were still fairly novice level when it came to inserting a cannula.

French Medical students are paid for their placements in hospital, with the amount increasing as they progress throughout medical school from 3rd year to 6th year.

Despite the differences in training, the overall length of training required to become a General Practitioner is almost the same in France as it is in the United Kingdom.

However, the length of training required to qualify as a Specialist Consultant in the hospital is significantly longer in the United Kingdom when compared with France.

In terms of during placements, students have a more defined role and are a more integral part of the medical team. However, the benefits of this are sometimes counteracted by the fact that students often spend time doing quite menial administrative tasks on the ward which are not greatly beneficial to medical education and learning as a student.

During my placement on anaesthetics I had the opportunity to cannulate, ventilate and intubate patients under supervision. I was also encouraged to operate the anaesthetic machine and undertake the whole transition from preoxygenation to laryngoscopy and intubation of the patient, as well as securing the airway and stabilising the patient before the operation begins. This is more responsibility than I have been given on most of my anaesthetics placements in the United Kingdom, and I think that as a result of this more hands-on approach that is encouraged, French medical students sometimes have the opportunity to learn more and add to their experiences more easily. However, when these situations are considered from the perspective of being a patient, I feel that their comfort and safety is

sometimes compromised. Although my experiences as a medical student have been positive, I have been surprised and sometimes shocked by how patients have been managed and treated at times. For example, when waking the patient from general anaesthetic, the healthcare staff would often be seen gently slapping the patient and singing in their ear - something you would never witness in the United Kingdom! Further to this, the concept of patient confidentiality and patient dignity is also much less respected in France, in my opinion and patients are often seen undergoing intimate procedures in full view of everyone. For these reasons, I would not want to be a patient in France.

Having said this, there are cultural differences in practice in France, which I think the United Kingdom should adopt. For example, almost all women on the delivery suite are given epidural anaesthesia - overall evidence suggest that this benefits both the patient as they are in less pain and the medical team as they are less likely to be bothered by continuous requests for further analgesia.

WHAT I GAINED FROM MY PLACEMENT

During my SSC placement in Montpellier in 3rd I had been quite reticent and hesitant to practice my language skills but upon arriving in Paris I knew I had to make the most of my experience and this opportunity to enhance my language skills. I communicated in French at all times and although by no means perfect, my language skills allowed me to make myself understood. I found understanding others relatively easier, although there were times when the speed of speech was altogether too overwhelming, especially at the beginning of my placement when I had not had any contact with the French language for the past 6 months. This was the skill in which I first noticed an improvement: within about a month of beginning my placement, I noticed that I was able to understand the general gist of conversations and gauge an accurate understanding of the content without too much concentration. I had found that during my placement in Montpellier, even the act of listening and understanding conversations was incredibly tiring and draining, and my progress since then was evident even in my first week of my placement.

I found articulating what I wanted to say required more effort and this could be quite frustrating at times, as although I was able to convey the general message of what I wanted to get across, I was not always able to do this in an eloquent manner in the same way I would be able to express myself in English. However, this is to be expected and is a skill which improves slowly but steadily. Towards the end of my placement, my ability to multi-task in French had improved greatly and I was able to type up and edit patient notes, whilst listening to them answer further questions.

My placement has not greatly impacted on my existing ideas and future plans. I found the opportunity to gain further experience in the field of anaesthesia to be extremely beneficial. Spending 2 months in this speciality, gave me a fantastic opportunity to further develop my clinical skills and theoretical knowledge. I attended weekly lessons which covered topics

relating to anaesthesia such as mechanical ventilation, managing postpartum haemorrhage. Anaesthesia is not a speciality which is not covered very much in the Manchester undergraduate curriculum. For this reason, it was both interesting and useful to attend these lessons as these covered topics which I had not previously received any formal teaching on.