Medical Elective Report

Dominic Symon
Madagascar 2017

“For me, it was an incredible, unforgettable experience that changed my outlook on health care provision”

Louise Collingwood, UK
I chose the Blue Ventures elective placement as I’ve always had a strong interest in wildlife conservation alongside my interest in medicine, so it was the perfect opportunity to combine both. Additionally, I’m interested in expedition medicine so the remote location has given me an idea of what this role demands.

As our medical project in Andavadoaka, we became involved in the work of Safidy under the supervision of Njaka Raveloson – the community health co-ordinator. We assisted Njaka in his school teaching sessions on health and development with 11-12 year olds. At the end of the teaching sessions, the students then had the opportunity to ask us as medical students any questions they had about the body. Although my French (and Malagasy!) skills were very limited, we were able to have productive question and answer sessions with Njaka acting as translator. It was encouraging to see how engaged and eager to learn the students were.

Njaka taught us a lot about the Safidy Population-Health-Environment approach with the success of the community family planning clinics, and how crucial this approach was in maintaining their conservation efforts. We visited both the clinic and the independently run Italian hospital during our time on site. What struck me was the limited space and resources that were available. We were told the Italian hospital was regarded as one of the reputed hospitals in Madagascar, yet it was not much bigger than a standard UK General Practice.
We had the opportunity to attend meetings by members of the Velondriake Association on healthcare protocols. The main topic of discussion while we were there was the protocol for managing a sick child. A triage form had been created to assist in getting a child to the most appropriate care for their needs. Within the meeting, it was ensured the protocol was standardised across the Velondriake members so they all knew how to act. They agreed on the following steps: (1) Fill out a triage form (2) Consultation (3) Referral to hospital if needed (4) Medication. In an area where there are no primary care facilities, we could see how the triage form and protocol would help children get the correct treatment in a timely manner.

The time we spent on site was unforgettable. The opportunity to learn to dive and carry out marine surveys alongside the medical work was unique as an elective placement. As a budding anaesthetist and aspiring expedition medic, I found learning about dive physiology and the medical problems that can occur very interesting. Although there was no expedition medic on site, I gained more of an insight into what this would entail in such a remote location. I aim to continue diving and complete the Rescue Diver PADI course. Eventually I’m hoping to join expeditions in the not so distant future.

The Madagascar periwinkle: the source of vinca alkaloid chemotherapy drugs. I made it my mission to find this plant after conducting research using these drugs during an intercalated year in pharmacology. It turned out I didn't have to look far as it was growing like a weed all over the BV base camp in Andavadoaka!