

Elective in The Trauma Unit, Chris Hani Baragwanath Academic Hospital, Soweto

In December 2013 I left the UK bound for Johannesburg for my medical elective in the Trauma Unit of Chris Hani Baragwanath Academic Hospital, Soweto. Affectionately known as Bara, this vast hospital is the only one in Soweto, serving the entirety of its 5 million inhabitants. With a world-wide reputation matched only by that of the area in which it nestles Bara is the polar opposite of the hospitals in which I have been so far; as such I was excited but extremely nervous about working in the Trauma Unit.

The trauma unit alone has 184 inpatient beds, 4-round the clock trauma theatres, a triage area with space for over 50 trolleys, 10 resuscitation bays and 10 dedicated ICU beds. This all sounds very impressive and gives the illusion of a well-resourced, adequately funded unit. However it is important to bear in mind that Baragwanath rarely operates under 100% capacity, more often 150%, and is underfunded to the degree that the doctors need to provide resources such as paper, printers and sometimes gloves.

When pay-day rolls around for 5 million Sowetans or the famed Pirates play The Kaiser Chiefs in front of 90,000 strong crowd the World's most infamous township gives it's only hospital a run for its' money; often causing the unit to close for 2-hour periods in order to begin to clear the backlog. The level of violence in Johannesburg is like nothing I had ever seen before, not saying much for a middle-class 24-year old from West London, but when you consider that not a day went by at Bara without more than twenty stabbings or shootings this statement would ring true for most.

What is the source of the endless stream of accidents and emergencies at Bara? Well, quite simply it is The Sauce. A lethal mixture of township-brewed hooch, unemployment, overcrowding in a vicious cycle of poverty. Whether shot for a wage packet, hit by a drunk-driver, involved in a bar brawl, crushed by a collapsing wall or caught in a shack fire, it is fairly certain that at least one of the above is to blame.

My days began at 6:30am with ward-rounds followed by ward jobs, assisting in theatres and manning the surgical 'pit'. Students were expected to do two 30-hour on-call shifts a week in addition to normal days. Apart from infinitely improving my clinical skills, teaching me procedures seldom needed in UK hospitals and honing my decision making prowess, this enabled the trauma team to truly bond. Everyone who works in the trauma unit is extremely helpful and friendly, no matter how busy the day is everyone is pleased to see you and all the registrars and consultants take the time to teach you, whether it's for an hour during a ward round or for the two minute walk to the CT scanner at 3am. Every moment was used as a teaching opportunity and every teacher was happy to do it.

The demographic of patients seen at Bara often only complicated the task in hand, with 80% HIV positive, 60% with TB and drug resistance on the rise; treating patients was always a balancing act of treatment, adverse-effect and seemingly unsurmountable infection. Confounded by ever-changing available medication, some thirty different language profiles and more often than expected losing patients in the 10km of corridors and shack-like wards, sometimes for days at a time.

I learnt a huge amount at Baragwanath, not least volumes about trauma medicine and working in a resource-scarce environment. However more importantly I gained infinite teamwork skills and now understand that no matter how difficult the working environment and how busy each day, a good, cohesive team, at every level from porter to consultant can transform a potentially disastrous scenario into one that is difficult, stressful and unbelievably exhausting but ultimately extremely satisfying, most importantly successful and even enjoyable.

This was not an easy elective to go on, I did not have weekends or evenings to explore and I found the level of violence in a community that lacks autonomy extremely challenging; however it is definitely one of the best experiences of my life, which cannot begin to be expressed in a page. I met an immensely capable and welcoming team who gave me a unique opportunity to work with staff and patients who are some of the most friendly, vivacious and appreciative people I have come across. I am extremely grateful to the Jewish Medical Association UK for helping me to go to South Africa and I would recommend Baragwanath as an elective for anyone in search of a brilliantly satisfying yet challenging experience.

Leah Rosenbaum
UCL