

Save a Child's Heart (SACH), Wolfson Hospital, Holon, Israel

During my internship, most mornings I would arrive at the hospital at about 8am for the paediatric ICU ward round. This involved the ICU consultant, a couple of residents/interns, nurses and two Chinese doctors who were being trained in Israel by SACH. The Israelis would obviously speak among themselves in Hebrew, and although I do speak basic Hebrew, I could not keep up with their fast, medically-based conversations. The Chinese doctors certainly could not either. So the ward rounds would be conducted—often with a polite reminder from me—in English.

Some mornings and afternoons I would go to the operating theatre, where I saw cardiac surgery being performed on children with congenital problems such as Tetralogy of Fallot or septal defects (i.e. problems with the architecture of the heart and its great vessels). At other times I would attend the paediatric cardiology clinic where children were seen for pre-operative assessment and for follow-up. I saw lots of echocardiography (cardiac ultrasound) being performed there. Dr Abrahams, a friendly Ethiopian doctor being subspecialty trained in paediatric cardiology as part of SACH, was based mostly in the paediatric cardiology clinic and, like the other doctors, was always happy to teach me when time allowed. The clinic was a fun place to be. Many of the children in the waiting room would be running around, chasing each other, dancing, posing for photographs, or generally being boisterous, which was great considering many of them could not do this before their operations; their heart simply had not been strong enough. That goes to show just how much of a difference SACH is making to their lives, both in terms of quality and longevity.

I saw lots of patients but the one that stuck in my mind the most was a Kurdish child (about 10 years old) on the paediatric high dependency unit, and his mother. Unfortunately, his congenital heart condition and surgery had been more complicated than normal and he was very unwell. His mother was sat by his bedside all day long (possibly all night long). Neither the child nor his mother spoke a word of Hebrew, English or Arabic, and none of the staff spoke Kurdish. All communications were done by gesticulation. I cannot imagine how frustrating this must have been for them. They cannot possibly have fully understood what was going on in terms of the child's progress. The boy was very pale, often tearful, and his mother often had a tired and forlorn expression on her face. A couple of times a day I went to say hello (I would just smile and wave), and sometimes would get a smile out of them. His mother would often get out of her chair to stand when I arrived. She would do this for every doctor, nurse or volunteer, seemingly out of respect. Every time I tried to intimate that this was unnecessary but she still did it. Anyway, on a positive note, towards the end of my internship the boy was looking much better. He was more 'smiley', and the colour had returned to him. His mother was also visibly happier...and so was I.

On another note, it was amusing to see how the quintessentially casual, laid back Israeli attitude was just as prominent in the hospital as outside of it. This held true even in the hi-tech and intense environment of the ICU where the medical care has to be—and of course is—razor sharp. Personally, I like the fact that the ICU consultant wore jeans and a t-shirt, and how I was allowed to wear casual clothes. In that particular respect, it could not be further removed from the hospitals in the UK, where every aspect of clothing is subject to 'hospital policy', down to the jewellery, watches and ties that are worn (or more accurately are not worn). I thought the cleanliness and attention to medical hygiene was excellent in the Wolfson Hospital, and there appeared to be no rampant nosocomial infection epidemic, even though the doctors were allowed to wear watches. All in all, I thought the relaxed environment had a very positive impact on the staff, the patients and their families. There were lots of smiles all round.

As part of the internship, I spent one day in the SACH House, where I joined in with the children playing games and generally being downright silly, along with some Canadian girls and another English medical student, who were volunteering there. Again, it was amazing to see the mothers of the children from such vastly different countries and cultures all socialising in the kitchen whilst they were making dinner.

All in all I had a great time during my SACH internship. It was fun, inspiring and educational, and you really have to see it for yourself to understand what a special atmosphere there is throughout the SACH infrastructure. As a medical student with an avid interest in cardiovascular health and disease, it was a fantastic experience, and as a Jew I feel very proud of what's being done in Israel for this huge multicultural spectrum of children. I would like to thank everybody at SACH for allowing me such a wonderful opportunity, and the Jewish Medical Association (UK) for their generous scholarship. I intend to visit again next time I am in Israel, and I would encourage you to do the same.

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