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**Faculty of Medicine Siriraj Hospital,
Mahidol University**

Siriraj Resident/Fellow Exchange Program

**To Lund University, Sweden
From 10/01/2018 to 10/26/2018**



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Overseas Clinical Elective Rotation Final Report

1. Introduction

My name is Harisd Phannarus who currently is a trainee in geriatric fellowship program at Faculty of Medicine Siriraj hospital, Mahidol university. I am interested in geriatric medicine because our country is becoming an aged society in the future. Besides Sweden, I have already observed in Taiwan (Taipei Veterans General hospital) and Singapore (Khoo Teck Puat hospital).

2. University Review

Helsingborg lasarett is a 300-bed hospital in Helsingborg which has 150,000 people in this town. Helsingborg, Region Skane, West coast, is a the fourth large town in Sweden.

Vrinnevi hospital is in Norrkoping, Region Osterogotland, east coast. It has 300-bed cover 145,000 population in this town.

Both hospitals have a geriatric ward which have a hospital management system for comprehensive geriatric assessment, moreover, Vrinnevi hospital has hip fracture ward for elderly which have just begun in Siriraj hospital.

The reason I choose those hospitals is

2.1 There are a lot of research regarding to comprehensive geriatric assessment (CGA) which was a main concept to provide good quality care for the elderly. Not only the research regarding to CGA but also the research on medication treatment in dementia that developed by the professor in this hospital. She conduct the research of the effect of long-term acetylcholinesterase inhibitors treatment in dementia.

2.2 They are in Scandinavian area which have high number of older population in the world. They have a high quality of healthcare system which usefully support the elderly in the country.

2.3 There is a well-known registry program about behavioral and psychological symptoms of dementia (BPSD) including dementia and national registry program for healthcare personnel assessment

3. Expectation and Objective

I have already visited to Asian country to observe their healthcare system and geriatric ward including Taiwan and Singapore. It will be a new knowledge and inspiration in this exchange program. I wish to collect a knowledge and management in developed country then apply it to our geriatric training program and proper management in the elderly in our country.

4. Knowledge/Experience gained

My supervisors are Anne Wissendorff Ek Dahl, M.D., PhD who supervised me in Helsingborg lasarett and Ann Westoo who supervised me in another hospital.

Geriatric care:

-Comprehensive geriatric assessment is a good way to assess older persons. It is containing of physical/mental/social/functional assessment. There are many studies to confirm the benefit in clinical outcomes including survival and quality of life.

-The doctors working in the hospital are a good listener. Everyone including the nurses and other paramedic personnel well communicated and respected to each other.

-I were in a team round in both hospitals. It included doctors, nurses, assisted nurses, physiotherapists and social workers. They do the team round everyday on weekdays in the afternoon because they would like to improve a patient's health.

Healthcare system and social support system:

They have a good social supporting system and invest a lot of money in the healthcare segment to improve its quality. They have a conference about patients' status and supportive care which is necessary to them when they were discharged and sent a team including nurse, OT, PT, social worker to help patient not only physical status such as rehabilitation, assisted devices, environmental adjustment but also mental status such as psychological evaluation.

There are some difference between Siriraj hospital and both of hospitals in Sweden. First of all, they have a good community between doctors, nurses and other healthcare personnel. Everyone can constructively comment to each other for improve quality of life of their patients.

And they are small organization so they are flexibly able to develop the innovation.

5. Benefits

I have much inspiration from the period time that followed the supervisors to see patients, communicate and learn the concept of elderly care.

Moreover, there are many benefit from this exchange program, including for the personnel, the hospital management and the national policy.

Healthcare personnel benefit:

-It has highlighted that how important topic of comprehensive geriatric assessment (CGA) is. Currently, CGA is not commonly used in general care. It should emphasize for the benefit to the elderly patients. If CGA was applied, the patient would have better quality of life, doctor would have less of workload.

-The appropriate management of delirium should begin with non-pharmacological treatment such as environmental modification, identification and treatment for the precipitating causes before pharmacological management.

Hospital benefit:

-It showed that how important to have geriatric ward in the hospital. Geriatric ward improves the elderly care not only patient but also their family and relatives because of holistic care.

National benefit:

I realized that social support system is an important way to improve quality of life, health status and decrease length of stay in the hospital. It can decrease dependency status of patient.

6. Life in abroad

It is good opportunity to practice myself regarding to life modification to the new environment, English language skill and learning to live alone in abroad. It is important to go to study abroad in the nearly future.

Especially, there are a lot of new friends. So I have a new connection to the developed country.

7. Future plan

After program finish, I will use all information to adapt to my clinical practice. I will use the Swedish knowledge to combine with Thai's practice concept to do a benefit to my elderly patients. If I have an opportunity, I will get for information to develop a new research question.

Moreover, I will give some good information about Swedish healthcare system to our national policy in the future, if it is possible.

8. Recommendations

-I really recommend to extend the contract period of Memorandum of Understanding between Siriraj hospital and Helsingborg hospital because it will give an opportunity to later medical students, residents and fellows to learn the good healthcare system from the developed country and lifestyle modification experience beside in student class.

-If possible, I suggest to invite some guest lecturers from Sweden to lecture in the conference. Because, it is not possible to send every interested medical student to Sweden via this MOU.

-Finally, I suggest for increase amount of scholar from our faculty. It will make a good connection and improve international relationship to the famous universities globally.