

Medical Clerkship in University of Padjadjaran

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Introduction

I have three reasons why I was applying to this program. The first reason is I want to know the difference of medicine between Indonesia and Japan. I think there are many things that is normal for me but very special for someone and vice versa. I should know such things in order to communicate with various people as a doctor in the future. The second is to increase my knowledge about medicine. Learning in the different environment will stimulate me, and I would be able to study very well. The third is to experience Indonesian culture. I want to know how people live and think in Indonesia and eat Indonesian food. I am interested in to know what I don't know.

I went to Bandung, Indonesia. This city is famous for Asian-African Conference. In April, it rained a few hours almost every day, but cool and very comfortable to stay. People speak Sundanese language and Bahasa Indonesia.

Medical Clerkship

I rotated family medicine in the first 2 weeks, and infectious disease the next 2 weeks. In the department of family medicine, I went to Puskesmas Talaga Bodas. Puskesmas are government-mandated community health clinics. People with health problem first come to Puskesmas and they are referred to the hospital. In Talaga Bodas, there is a program called PROLANIS to manage the chronic disease patients. It has 250 patients and they can take blood test and medication for free because of the insurance "BPJS."



In Puskesmas, they don't give only medical treatment but education about disease or prevention. On every Friday, they do aerobics and I also joined it with the patients and the other medical students. It last 30 minutes and it was very good exercise. And after that, we talked to the patients about complication

of the chronic disease and nutrition etc. I feel that the doctors, the medical students and the patients are so close and talk much each other.

About education, I went to the junior high school, Usaha kesehatan sekolar. The health system has 3 roles. These are medicine, cleaning, and education. First, about medicine, when students enter the school, they have screening test, and check their physical and mental function. If they have problems, their parents take them to Puskesmas or see the doctor. The physical and mental check is done every 6 months and their health are observed. It is important that we find the problems in the early stages for the good prognosis.

About cleaning and education, toilet especially should be cleaned. Students in one class clean toilet every day. And I saw that students cleaned their classroom. The School is the place for not only studying but teaching the necessity of cleaning and health care. It leads students to think it is natural to clean rooms and toilets by themselves. I think that learning the method of cleaning improves hygiene and prevent infections.

Providing healthy food is also important. And I heard that there is “no rice day” because to eat too much rice is not good for health. However, when I went to the cafeteria, there is little vegetable. It was strange for me.

I looked around the school and played traditional music with the students and looked pictures which was drawn by them. In the other room, they had a religious class. They have good times, study hard and looked like very happy. I think it is because they are healthy and health care system is very important.

I also went to Posyandu. Puskesmas Talaga Bodas has 32 Posyandu and this is the public health facility for woman and child under 5 years old. It opens once in a month. They recorded the children's height and weight. I heard that there are still many poor child.



In the next 2 weeks, I rotated the department of infectious disease at Dr. Hasan Sadikin Hospital. I observed HIV outpatient with a resident. There is about 320 HIV patient for the follow up in a week. I was surprised at the many HIV patients. I also joined the discussion about the patients. There is a program called HATI (HIV early Testing and Treatment Indonesia). The HIV patient check their CD4 every 6 month, Viral loads once a year and get counseling every 2 years. They take Anti Retro Virus medicine. Sometimes

the doctor minds the number of the wife of the HIV positive patient. I felt it's a difference of the culture. I also joined the round in the hospital. There are the patient of the dengue fever, UTI, community acquired pneumonia and Leptospirosis etc.



Daily Life

I tried many kinds of Indonesian foods like Nasi Goreng, Mie Goreng, Sate, Baso, Martabak, Bala-bala. Almost all Indonesian foods are cheap and very delicious for me, however it was sometimes very spicy and not clean. It was very important to say “Tidak pedas (Not spicy).”

I can move by taxi, angkot or ojek. Angkot is like a bus and it runs its route. We can ride and get off everywhere and pay depends on the distance. But the route is very complicated and there is no map, so it's very hard to ride the correct angkot. I must ask to the driver in Indonesia. Ojek is a bike. We can ride the behind of the driver. I can't speak Indonesian language, but I could communicate with people, because they tried to understand me. And it was very fun for me.

Weekend

I went to Tankuban Perahu, Kawah Putie, Museum Konperensi Asia-Afrika, Bali, Jogjakarta, Borobudur, Prambanan etc. It takes 2 hours by plane to Bali from Bandung, and 1 hour to Jogjakarta by plane. I enjoyed very much these trip. I saw many things what I hadn't never seen.



Conclusion

Indonesian people were so kind to me, and I think they are more kind than Japanese people, and I felt I can be more kind. Thank to them, I learned a lot and also enjoyed Indonesia. This experience was very useful for me. I appreciate to everyone who supported me.