

Exchange program in University of Padjadjaran

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Introduction

I went to Bandung, Indonesia for my medical clerkship from 14th September to 8th October.

Indonesia is a multiethnic country and each ethnic group has its own culture and language. Bandung is the capital of West Java and most people here are Sundanese. They speak Sundanese language and some of them can't speak Indonesian.

About Padjadjaran University and Dr. Hasan Sadikin Hospital

My clerkship was mainly at Dr. Hasan Sadikin General Hospital (RSHS: Rumah Sakit Dr. Hasan Sadikin). It is the biggest hospital in West Java, with 996 beds, 20 medical specialties and 125 sub specialties. Since the established of medical Faculty of Padjadjaran University in 1957, it has been assigned as teaching hospital for the student of Medical Faculty.

The male-to-female ratio of medical students is 2:3 and the students come from many different national origins. To cite our group as an example, we have 11 students (3 males

and 8 females) and 6 of them are Muslim Indonesian, 2 of them are Chinese Indonesian, 1 of them is Indian Malaysian, and 1 of them is Chinese Malaysian.

They respect their own culture each other and learn medicine together.

Hall way of Dr. Hasan Sadikin Hospital



Clinical clerkship

1st week (at RSHS)

---I rotated internal medicine with medical students.

7:00- Rounding only with students
(We choose several hospitalized patients and take histories and physical examinations.)
9:00- Rounding with doctor
(The doctor checks the physical examinations we took and explains about the diseases)
11:00- Lunch time
13:00- Lecture

RSHS is a University hospital so there are a lot of critical patients. In Indonesia people doesn't have medical check-up (even people of higher socioeconomic status people like doctors) so patients come to the hospital with advanced illness.

Students check the medical record of hospitalized patients in the morning and take history and physical examination. Students in Indonesia are very good at taking physical examination because they practice it from head to feet every day regardless of the patients' chief complains. Doctors tell students over again and again that "if you go to rural area, there are no equipments so you have to diagnose patients with limited information."



At outpatient department with Indonesian medical students

2nd week (at the secondary hospital)

---I went to secondary hospital in Ujung berung with students.

8:00- Rounding the patients in charge (2-3 patients for 1 student)
(Taking vital signs and talking with patients)
10:00- Rounding all the internal patients with doctor
12:30- Lunch time
13:30- Continuing rest of the rounding
14:00- Lecture

In Ujung berung, I could experience some common tropical diseases like dengue fever or typhoid. These diseases are common in Indonesia so they don't go to tertiary hospital. I also experienced night shift on Monday. Students in Indonesia have to do night shift

once a week and I accompanied them. During the night shift, many food-poisoning patients rushed to our hospital. There was a big party on Saturday and the potato was spoiled. The victims of that case came continuously until Wednesday so even the hall way was awash with hospitalized patients. I learned coconut is effective against dehydration because it contains a lot of electrolytes.



At emergency department



Food-poisoning patients hospitalized in the hall way

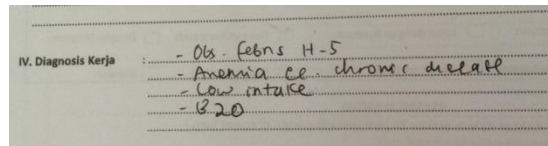
3rd week (at RSHS)

---I rotated infectious disease with a resident.

I observed HIV outpatient department called “Teratai”. There are many HIV patients in Indonesia and the number of



them is increasing every year. Teratai is used by 50-70 patients a day. In Indonesia HIV patients can get HIV treatment for free (only in public hospital or clinic, not in private one), but many patients dropout



B20 is used even in the medical record

because of the financial burden of transportation. Moreover stigma to HIV patients is also a big problem. Indonesian government enlightens accurate knowledge about HIV, but people still have prejudice. So we refer to HIV as B20 in order not other patients to know the patient has HIV.

And I'm also surprised at the management of TB patients. There is a TB ward in RSHS, but the door and the window are opened. And the patients who finish one month treatment are moved to general ward even though the sputum test is positive. The reason why the management is so rude is the high prevalence rate of TB. Doctors say

that there are many TB patients on the street and all people have a history of exposure to TB so it doesn't become a big problem.



Posters to spread accurate information about HIV

4th week (at klinik Padjadjaran)

---I studied about family medicine by observing outpatient department and emergency department.

Klinik Padjadjaran is half private and half public primary hospital. It has 8 beds and there are 4 departments (general internal medicine, emergency department, obstetrics and gynecology, dentistry). I learned about primary health care and public health there.



Pregnancy

In those days, giving birth at home is rare and most of pregnant women have maternal handbook which is supplied by government.

Vaccination

In Indonesia 5 vaccinations (BCG, HBV, DPT, measles, polio) are supplied by government if the children get them at puskesmas (public primary hospital). If they want to get more vaccinations, they go to private hospital. There are pediatric specialists there, but they can't get them for free.

Health insurance

Indonesian government is building universal health care system "BPJS (Badan Penyelenggara Jaminan Sosial)". Only 60% of people are covered now, but government plan to cover whole nation by 2019. People covered with BPJS can receive medical service for free. However there are many limitations. For example, doctors at primary hospital can prescribe medication only Rp.20.000 (¥179) a day.



At the reception of Klinik Padjadjaran

Daily Life

There are more than 4 cafeterias and many snack stands. I tried many kinds of Indonesian foods and snacks there. After school, my friends took us to cinema or had a party at home. At the party, Indonesian students cooked Indonesian traditional food and we cooked Japanese traditional food. However I had great difficulty looking for Japanese food without sake. I learned most Japanese seasonings contain sake and how difficult for Muslim to visit and live in Japan. At any rate, I enjoyed spending with other medical students.



Lunch time at the cafeteria



Home party

Weekends

Saung Angklung Udjo

Angklung is a traditional Sundanese musical instrument. It's made of bamboo and swung to produce sound. We enjoyed performance and also playing together.



Tangkuban perahu

Tangkuban perahu is one of the biggest volcanoes in Java Island. The latest eruption was on March 2015 and the smell of sulfur is filled all around there. The view of caldera was very beautiful.

Taman Safari

Indonesia is a tropical country and there are some national parks. However it's too far from Bandung to go. People can see many Indonesian original animals like Sumatra tiger or Komodo dragon at Taman Safari. I enjoyed a lot seeing and touching them.



Komodo dragon



Museum of the Asian-African Conference

Bandung is famous for the place where Asian-African Conference took place in 1955. The conference was an important step toward the Non-Aligned Movement during Cold War after World War II. We can see pictures and documents at that time.

Conclusion

During this exchange program, I learned that the world biggest infectious diseases (AIDS, malaria, tuberculosis) is certainly true. There were many these patients because of their lack of the knowledge and poor hygiene. And I also learned the importance of public health. In Japan almost all people get medical check-up and we take it for granted. However in Indonesia even people in high socioeconomic status don't get it so patients come to the hospital with advanced diseases.

This one-month program has passed by like a flush, but it was an amazing experience for me. I want to say thank you to all the doctors and students cared about me in Indonesia.