



British Association of Dermatologists
Medical Student Elective Dermatology Research Project Grant Report
Singapore General Hospital

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July 2014

The reason I chose to do an elective in dermatology was two fold, I felt I had little clinical exposure to the specialty in the UK and I wished to observe first hand the reality of following a career in dermatology. I wanted to carry out this placement in Singapore because I had never been before, but had heard of their excellent healthcare system. In addition, when contacting the department in Singapore they proposed I completed a research project in cutaneous drug reactions which was a good opportunity to focus my placement.

Undertaking a medical elective in the dermatology department at Singapore General Hospital (SGH) was a fascinating experience. During the placement I learnt a great deal about Dermatology in a general medical setting within the hospital. Being part of Dr Pang's team meant I saw a vast array of cases from life threatening toxic epidermal necrosis (TEN) to nodular scabies infestations. I also saw patients who presented with drug reaction with eosinophilia and systemic syndrome (DRESS), pemphigus and cutaneous systemic lupus erythematosus (SLE). These dermatological cases gave me unique clinical exposure to new diseases that I might not have seen in the UK. Not only did I observe the cases, but I was able to follow the patients' progress and this gave some context to the pathological process and treatment of the conditions.

In addition to the learning opportunity I also was able to observe the differences between the healthcare settings in the UK as compared to those in Singapore. Singapore General Hospital is an enormous ultra-modern sprawling hospital. There are nine doctors in the dermatology department in total ranging from medical officers to senior consultants who are responsible for all referrals as well as dermatology inpatients and outpatients. They receive referrals from other departments that have a dermatological query about a patient, in the form of a 'blue letter' system. These physical blue letters are received by the junior medical officers who do a full clerking and examination, decide on a diagnosis and management plan and this is then discussed with their senior and a consultant who will come ask the patient any further questions. Observing how this process operated taught me how thorough, but time-consuming specialist healthcare in SGH can be. The long hours and hard work done by juniors and seniors alike was necessary for successfully running such a small busy specialist department.

The healthcare in SGH is very patient-centred and consultant led. The junior doctors are expected to be pro-active clinically, however this is coupled with very close consultant support and supervision. This created an opportunity for teaching on a daily basis for both the junior members of the team and students which greatly benefited me. The healthcare in Singapore is partially private with poorer Singaporeans given full subsidies from a scheme called Medisave and richer or foreign patients having to pay vast amounts for the necessary investigations and treatment. A typical ward round might include seeing an array of patients from larger crowded 'C' grade wards to the one-patient-per-room in the private carpeted wards.

During my time in Singapore I undertook a clinical case note review of all the adverse cutaneous drug reactions that had been referred to the dermatology inpatient department within 2013. There were 182 referrals with a range of drugs responsible for the cutaneous reactions. Most manifestations were referred from general medicine and the infectious diseases department. This research was requested by the department and will be useful in comparing it to previous years and learning if the number and manifestations of cutaneous drug reactions has changed. Carrying out the audit taught me the referral system as well as the terminology used and insightful tips in how best to communicate undiagnosed and sometimes baffling dermatological cases. Having completed the data collection I am now in the process of analyzing and writing up the results.

The BAD elective grant allowed me to carry out the research project and hugely assisted in the expenses of commuting and living in Singapore. Without it I would have not been able to travel to Singapore and carry out the placement in dermatology. I am very grateful for the award and appreciate the experience of dermatology in Singapore that has deepened my interest in the specialty.

Thank you.