



# Volunteer doctor's experience of the free cardiology echocardiogram clinic in Mannar, November 2017

Dr Gemma Parry-Williams MBChB, MRCP, CertMED, Cardiology  
Registrar, St Georges University and hospital, London

Vannakam / Greetings

An island of exotic aromas, long sandy beaches, towering coconuts trees, busy bustling city streets, grandiose holy sanctuaries and beautiful souls. Where humans and nature appear to seamlessly live in harmony.

Having spent only 10 days in Sri Lanka in 2014 I was able to appreciate so many of the wonderful things about this country but what touched me most and has remained with me since is the beauty of its people. They say 'the eyes are the window to the soul' and never have I found this to be more true than in this country. Going out for a daily run along the sea front of one of the Southern fishing towns, Tangalle, I would be bombarded with sunny smiles and greetings from the locals, an instant boost. One particular man in his 40's called out to me one day and I stopped to chat to him. As chance would have it he had recently had a heart attack and was having on-going angina symptoms. I was shocked to find how limited his treatment was and the distance he needed to travel to receive care. I also met an elderly man walking up the road towards our hotel. He had clearly had a stroke and told me how he had lost his family in the Tsunami. He was clearly struggling all alone with his disability. I felt an immense desire to use my medical skills to give something back.

---

*3 years on up pops an advert via the British junior cardiac society looking for doctors to go out to Sri Lanka and work on a project performing ultra sound scans of the heart (echocardiograms) in a remote area of the country called Mannar, in then Northern Province. They have very limited access to cardiology services and are comprised of a generally deprived population who would have difficulty raising the funds and compromising their income to make the arduous journey to the nearest cardiac centre in Jaffna. Naturally I jumped at the chance.*

---

Over the next few months various papers were exchanged, proving I was adequately qualified for the job and to allow me to be registered to practice in Sri Lanka. It was all becoming very real and exciting. Next thing I knew it was Saturday afternoon and I was landed in Colombo

and ready to meet 'the team', Mayooraan a Sri Lankan born cardiology registrar who was the trip organiser and charity fundraiser and supporter and Richard a fellow senior cardiology registrar who has volunteered for the trip as I had.

8am on Sunday we left the beautiful colonial seaside hotel in which we rested for the night and headed for Mannar. Whilst taking in Mayooraan's vast knowledge of Sri Lanka, its people and health system, hearing the fascinating story of his childhood in Jaffna and Mannar, we were taken on a whistle stop Mayooraan-guided tour of Anuradhapura, an ancient city en route to our destination. A temple walled by elephant statues, the tree that was said to give Bhudda his wisdom, Sri Lankans bathing in a nearby lake and cheeky monkeys feasting on the visitors left overs from lunch were just a few of the sights we were treated to. Such a great experience especially with a top tour guide to provide explanations to my endless questions! I must not forget to mention the lunch and all the food in general...all I can say is I ate like a queen all week and it's definitely up there with the best food I have ever eaten.

We arrived at our hotel (Agape) in Mannar not long before nightfall. We were greeted by our delightful host who took care of all our needs including feeding us easily the best food we ate in Sri Lanka. Her warm heart soon made us feel very much at home. We dropped our bags and headed into the town, passing by the hospital to get a first taste of what was in store for us the next day. Although the hospital was obviously not as developed as countries like the UK, there seemed to be a pretty good set-up overall.

*I woke on Monday morning at 6am surprisingly bright eyed and bushy tailed. Excited about what lay ahead. On arriving at the hospital we walked along a covered outdoor corridor. In order to enter the area we would be working in we had to walk up a corridor lined with around 15 of our first patients for that day. Some began to stand to address us, which I found rather embarrassing and I felt a strong desire to explain to them it was definitely not necessary! We entered a lightly air-conditioned room where nurses in immaculate beaming white colonial style uniforms welcomed us like royalty. After a whistle-stop tour of the top of the range echo machine, off to work we went. There were 2 beds laid either side of the echo machine and Richard and I would take it in turns to scan whilst the other recorded the findings. Meanwhile Mayooraan used his fluency in the local mother-tongue, Tamil to provide consultations to each patient, something which really allowed us to provide a rounded and comprehensive service to the people of Mannar. Each patient would arrive with their exercise book that provided a very concise medical history, results of any important tests and measures such as blood pressures, weight etc. All very helpful and notably something that could make life easier in the UK! Many of the echoes were relatively straight forward, particularly as the Mannar people were incredibly compliant and uncomplaining. We had a luxury of 1-2 nurses per patient to help get them undressed, position them, get the ECG leads on and most importantly explain to them what was going! The patients seemed able to relax physically and unwaveringly remained in the optimal position for scanning, despite their heart rates sometimes telling me they were incredibly nervous. They never complained about the pressure from the probe and in*

*noticed what a stark cultural contrast there was between the people of Sri Lanka and the UK in relations to their interaction with health care.*

Although Richard and I couldn't speak the local language, we learnt a few simple phrases that we made our best efforts to pronounce correctly, like 'hello', 'how are you?' and a reassuring 'very good'. This evoked responses in our patients that were anything from utter shock and confusion to fits of giggles and a heart-felt appreciation (indicated by their commonly used and very humbling, side-to-side head nod!) Before starting I was worried that being unable to converse with the patients would detract from the experience for all involved, however I did not feel this was the case. We were lucky to have Mayooran and Vince, the nurse in charge or 'master' as the nurses called him, on hand to translate if things got in a confused tangle, but otherwise the people of Mannar were so open and gentle that there was a strong sense of non-verbal connection.

Of the almost 200 cases we scanned the case spread was broad but each individual had been highlighted as having an indication for an echocardiogram by a doctor. We screened youngsters with hypertension and diabetes, ladies with rheumatic heart disease, pregnant women with chest pain, children with congenital heart disease and cardiomyopathies to name a but a few. Without the clinic these people would have had to travel nearly 200km and join a very long queue to see the nearest cardiologist in Jaffna. For many of the Mannar folk this would require a huge cost both in terms of transport to the hospital but also loss of work and income for the time they were away. We were able to satisfy the needs of the majority of people, optimising their management or reassuring them and avoiding them having to travel to Jaffna. This also off-loaded a little of the massive demand put on the small number of cardiologists that are holding together the Northern province of Sri Lanka.

Some of the days were long but I never felt tired. We were constantly fed and watered with sweet and spicy treats and Sri Lankan style coffee but I think it was more the attitude of gratitude from the patients and my inner sense of honour at being fortunate to be able to help that kept my energy levels high.

Mid-week we had a very special day. We went in at 07:30 to try and get through some of the scans because at 9am we were to take part in a ceremony. We received thanks for our efforts and met the local health ministers as well as the minister for health for the Northern Province. As we sat with the minister in front of an audience of the hospital teams I felt embarrassed to be placed in such a position of importance. We were asked to light a ceremonial candle and received kind gifts and words which was very humbling. It was also a good opportunity for Mayooran to share his feelings about the direction in which cardiology services should be headed in the province, amongst other healthcare related issues with the minister. We then got back to scanning and at 2PM I stopped and gave a talk in the hospital journal club meeting on the interpretation of the ECG in athletes...my current area of research interest. It was amazing to find that all consultants, including a T&O surgeon were interested in what I had to say! I learned from one particularly concerned GP that this subject has become particularly high profile since the death of a young boy from Mannar during sport, that was found to be due to hypertrophic cardiomyopathy. It appeared that this resulted in further cases being highlighted in the media or spread by word of mouth and has resulted in a fear culture amongst parents surrounding sporting participation, particularly in the Mannar area. This is of great concern given the overwhelming importance of exercise to well-being. This particular GP told me of how she had been asked to examine hundreds of school children in one day to declare them fit to participate in an annual race using only a stethoscope. The difficulty lies

in the fact that the diseases causing such fatalities are very rare and the chance of being able to pick up even an indicator of such a problem by auscultation alone is close to zero. As a consequence of this a meeting was arranged between myself and this GP in order to discuss the merits of screening young people, how to do it effectively, to come with ideas of how best to approach this issue given the limited resources available and how I could be of help. I have provided them with the questionnaire that we use for screening here in the UK and we are still developing ideas about how best to approach the issue.

---

*Following my presentation, we hopped into a van and headed to Jaffna where we had a whistle stop tour that included meeting some Hindu high-priests, visiting the cardiologist who was supervising us at his evening clinic (consisting of easily 30 patients!) and attending a dinner at a plush hotel that was being held for a foreign charitable organisation who were working with the Sri Lankan government to improve services such as palliative care in the province. It was nice to be able to see how others were approaching similar health care situations and take inspiration for how I could similarly put my knowledge and skills to use in the future. What a day!*

---

And so the week came to an end. After a small ceremony to appreciate the nurses, with a heavy but full heart we packed our bags and headed back to Colombo. Arriving just after midnight I awoke early the next day and braved the streets of Negombo on a slightly rickety and ill-fitting bike that the hotel kindly lent me and headed off for one last experience of the beautiful people of Sri Lanka. I visited the fisher men and women at the bustling fish market. I chatted with the locals as they sold and filleted fish of all shapes and sizes, I was invited to go out fishing, helped push a few boats back in the water as they headed for their next catch and was even treated to a beautiful serenade of Sri Lankan song by a delightful older gentleman who was selling mobile phone covers. I felt obliged to return the favour to with my extremely modest version of the first few lines of their national anthem and succeeded at least in providing some amusement to him and those around! But most of all relished the beauty of these people who seem so grateful, happy and non-expectant with the little they have...a mind-set that is sadly so easily lost amongst our plentiful yet fearful society of today.

---

The whole experience was incredible and has changed a small part of me for life. I feel massively indebted to Mayooran and Sarves, the founder of the charity Assist RR, for affording me this opportunity and I am hugely compelled to continue to put my skills to use in this fashion and await the next opportunity with excited anticipation.

---