

Name: Kirsten Ebbert (kirsten.ebbert@shaw.ca)
Location: [Paarl Hospital](#), [Paarl, South Africa](#)
Dates/Duration: 3 months in PGY-3 year (September - December 2009)

Paarl is a town of about 200,000 people, an hour northeast of Cape Town. Paarl Hospital is a secondary level hospital, with adult and pediatric patients. The pediatric department includes 68 inpatient beds with a medical ward, gastroenteritis ward, and level 2 nursery. There is also a pediatric outpatient department which runs general pediatric and various subspecialty clinics. I had opportunity to work in all of these areas, with the greatest need being for the inpatients. I was also able to attend the pediatric HIV clinic (at Paarl East/T.C. Newman), and an outreach clinic in Malmesbury. Various outreach clinic opportunities are available, but should be discussed with the pediatricians early in the elective to organize.

There was clinical exposure to various general pediatric problems, particularly infectious disease. Admissions for gastroenteritis, pneumonia, and bronchiolitis were common. TB and HIV were also very common. Additional presentations included sepsis, hepatitis, impetiginous eczema, seizures, poisonings, congenital heart disease, hemophilia, kwashiorkor, marasmus, etc. In the nursery, there were frequent opportunities to attend deliveries (just you). Prematurity (and its complications), babies born before arrival, undiagnosed twins, meconium aspiration, sepsis, hyperbilirubinemia (and even kernicterus) were seen among other problems in the nursery. Procedures included many IVs, venous and arterial bloodwork, Mantoux's, and intubations. Less common procedures included IOs, and thoracentesis.

Call typically included one "day call" and one "night call" per week, as well as call every other weekend. On call, you are the only pediatric physician in house (no other resident or medical student). There is a pediatrician available for help from home. While on call, you cover all of the inpatients (medical/gastro wards and nursery), deliveries, ER ("Casualty") admissions, and outside calls. You also do any blood work/gases, and often need to be a porter to get things done in a timely manner. They can do CPAP, and short term ventilation prior to transfer to a tertiary centre (Tygerberg or Red Cross).

At the time of my elective, there were three pediatricians (Eckart von Delft, Rowan Dunkley, and Reneva Petersen). There was one pediatric registrar, two interns, one community health officer (one year after a two year internship), and a few part time physicians to help in the nursery and outpatient department (done training, but not subspecialized). There were frequently medical students, both South African and foreign. The team was very welcoming, and wonderful to work with (and would love to have more residents come).

I lived with a family in Paarl, about a 10 minute walk from the hospital. This was great for learning more about South African culture, and getting to know people. Paarl is the "centre of Afrikaans," so many people spoke Afrikaans, often with English as well. There

was sometimes a language barrier for me with those who spoke only Afrikaans or Xhosa. I did not rent a car, but would recommend doing so in order to visit the many beautiful nearby places on weekends (make sure you can drive standard on the wrong side of the road!). Paarl is in the heart of the winelands, and not far from Cape Town or the ocean.

I thought this was a wonderful elective, which I am glad I did. I would recommend it for senior residents (third year is probably best). My contacts for arranging the elective were David Speert (ID at BCCH) and Eckart von Delft (Head of Pediatrics at Paarl Hospital). I would be happy to discuss more details of the elective and how to arrange it with anyone who is interested.