Emily Grover UMDNJ-RWJMS Class of 2008 Himalayan Health Exchange May 28 – June 16, 2005

When I was thinking about how to spend the summer after my first year, I thought it would be impossible to find time for everything I wanted to do: travel, get clinical exposure, be adventurous, relax, meet new people, etc. All of those goals were met and exceeded on the medical expedition in Spiti, India, with the Himalayan Health Exchange (HHE).

Travel and Culture: We traveled by train from Delhi northward to Shimla, and then in jeeps we went further north and upward in elevation into the state of Himachal Pradesh which lies on the Indo-Tibetan border. We traveled to different towns and set up 2-3 day medical camps either in existing health clinics or in tents. The people who live in these areas are incredibly resourceful and survive despite long, heavy winters, limited food supply and transportation, and poor sanitation. Our route took us to some regions that were predominately Hindu and others that were Buddhist so we were immersed in both religions. We took a day trip to Kibber, which at almost 15,000 ft elevation, is one of the highest permanent human settlements in the world. We visited the famous Key and Dhankar Buddhist monasteries, where we had salt-butter Tibetan chai with monks and spoke with a lama (monk) who escaped Tibet with the current Dalai Lama. We also had a short time at the end of the trip to explore the culture and unwind in the shopping town of Manali before heading back to Delhi.

Clinical Experience: Our team provided medical care and medications at no cost to over 1100 patients at our medical camps. Most of the patients there do not have access to routine medical care due to the remoteness of the region and the challenging climate and terrain. At one of our sites we did health screenings on children in a monastic school and gave them all vitamins and toothbrushes. At the other sites we saw patients of all ages who mainly had chronic conditions. We saw children with intestinal worms and vitamin deficiencies, women with PID, a man with leprosy (treated), patients with tuberculosis, GERD, cataracts, arthritis, and much more. Patients that required more advanced care were referred to the closest hospital for follow up. As a first-year, I worked on a team with a more advanced provider (attending physician, resident, or fourth-year student). Using our drivers as translators, first-years took histories and did physical exams, tried to make an initial diagnosis and a plan, then presented each patient to the team leader. We had several teaching sessions after clinic days where we discussed topics like altitude physiology and shared interesting cases we saw in clinic. Of course there were no X-ray machines or CT scanners, and very limited blood testing capabilities (if any), so we had to rely mainly on our senses and our stethoscopes as our diagnostic tool set.

Adventure: The adventure began when I stepped on the airplane destined for Delhi, and there was no turning back. For me, there was a lot of self-reflection and personal growth, in part because elements of this trip were physically and mentally challenging, and we had to be flexible and adaptable. I did things I never thought I could do, which was

extremely exciting and rewarding. We did several day treks in the mountains; one was up to a snow bridge where we watched the sun rise over the mountains. One night a group of us hiked up to a cave that monks once used for meditation and we camped there that night. We were among yaks, ibex, wild mountain dogs, an elephant, and a lot of cows. My experience in the Himalayas definitely heightened my sense of adventure!

Relaxation: On our clinic days we worked long hard hours, but also found time and creative ways to relax. We sat with a group of Buddhist monks during several early morning meditation chant sessions, and what an incredible way that was to begin the day. One afternoon we learned to play cricket and enjoyed some friendly competition with the HHE staff. After long clinic days we would sit around a fire stargazing and waiting for the next meteor to whiz across the sky.

People: I met amazing people! The 23 team members were first-year and fourth-year medical students, internal medicine residents, nurses, attending physicians, public health students, and pharmacists. They were from places like England, Canada, Colorado, Indiana, and Maine. The HHE staff of drivers, cooks, and guides was exceptional. The relationships I formed with the people I worked with are so strong, largely because of the intense and unique experiences we shared. And even though I only spent a few minutes with each patient, many of them I will always remember for their humility, graciousness, kindness, and patience, as well as for what they taught me about medicine.

This trip was on the expensive side, but assistance with funding was available through the RWJMS Family and Friends Scholarship. For me, the experience was worth every cent and I am strongly considering going back again as a fourth-year student or resident (elective credit is possible through HHE).

A final story: last year at one of the clinic sites, a heart murmur was picked up on a young monk by an HHE team member. A follow up was arranged for him with a doctor in the surrounding area and he needed heart surgery, which HHE arranged and paid for him to have in Delhi. This boy is now in good health and came to the clinic this year to meet our team and present us with silk scarves to show his gratitude.

This experience was life-changing for me. I learned a lot of medicine and public health, but it also forced me to adapt to being way outside my comfort zone. I highly recommend this trip to people who want hands on clinical experience, who are openminded and adaptable, and who are looking for an adventure they will never forget!