

Emma Moody
R25

Clinical Work at CerviCusco

This summer I spent six weeks in Cusco, Peru working at a women's health clinic. Working with CerviCusco, the other medical students and I were able to participate in and provide the majority of the patient's care. We worked in a wide variety of settings, and worked with a number of different people to provide care to women around Cusco, Peru. Overall, this was an amazing experience and I loved being able to help provide care to a population in which preventative care was nearly non-existent, yet extremely important and life-saving.

One of my favorite aspects of the experience was working in a variety of settings. The CerviCusco clinic was open on Monday, Wednesday, and Friday from 12pm-6pm, and on Tuesday, Thursday, and Saturday from 8am-2pm. This was quite convenient as we lived in communal housing two floors above the clinic. Patients filtered in and out, and generally we did not have too much work to do in the clinic. The majority of our work was out on campaigns, in which we drove to villages anywhere from 1-8 hours outside of Cusco and set up a clinic to offer free Pap smears. We went to several villages and were able to see a lot of the country just in traveling on these campaigns. All of the campaigns started at 8am and we would leave the clinic early in the morning according to how far away they were. Occasionally we drove and spent the night in a village so we could wake up and get to work the next day. We set up clinics in Ministry of Health buildings, other community buildings, and tents in the town markets. The Ministry of Health worked with the villages to advertise our campaigns to the women before we arrived. In the morning, as we pulled up to our designated clinic spot, there would be anywhere from 5-300 women waiting to get a Pap

smear. This was initially a little overwhelming, but ultimately extremely rewarding as these women were able to take preventative action against cervical cancer, the number one cause of cancer death in women in Peru.

Our responsibilities in the clinic and out on campaigns were to set up the clinic area, administer the research survey, perform the Pap smear and breast exam, and to record our findings. Setting up the clinic varied depending on where we were. If we were working in our clinic (CerviCusco), everything was ready to go and all that we needed to do was prep for each exam. This included having the gloves, speculum, cytobrush, sample bottle, and lube ready to go. When we were out on campaigns, we had to improvise a little more in setting up our workspace. Sometimes we would use folding card tables as exam tables. We also hung sheets of plastic for added privacy and had to be creative with our workspace. Most places also did not have electricity so we utilized our backpacking headlamps in order to perform the exam in a well-lit environment. There were a number of other students on the campaigns and we usually had around two students per exam space. Other students were out in the hall (or street) doing surveys, and we switched between doing surveys and exams. As we generally had two students per exam space, one would do the Pap smear, the other would assist, and we would rotate. When a woman came into the exam room, we introduced ourselves and briefly explained what the Pap smear was and why it was important. Most of the women had never received or heard of a Pap smear before so this was necessary to not only inform women, but also to make them feel more comfortable about such a personal and sensitive exam. If there was ever a problem, or an abnormal-looking cervix, we could go get the physician or nurse working with us to look at them, and the patients were generally referred back to CerviCusco for a full exam and treatment from

Dr. Ferris or another visiting OB/GYN. At the end of each exam, we reminded the patients to return to their local Ministry of Health building to receive their results in about a month. I generally felt very comfortable conversing in Spanish, but encountered difficulty when some women only spoke Quechua. I learned a few key phrases, which helped, but this was still a challenge.

For the last week of our time in Peru, the founder of CerviCusco, Dr. Ferris, as well as a nurse practitioner, and a gynecological-oncologist joined us at the clinic. While they were there, the clinic was bustling with patients who were seen for colposcopy (closer examination of the cervix with a magnified view) or for LEEP (loop electrosurgical excision procedure). As medical students working with the physicians, we assisted on these procedures by preparing the room, drawing up local anesthetic, finding the cervix with the speculum, and applying acetic acid onto the cervix for better visualization of abnormal cytology. This was a great learning experience and it was a nice change of pace from doing solely Pap smears.

Some negative aspects about this experience included learning to function with a different concept of time, language barriers with patients, GI illness, and lack of gynecological knowledge. At first it was difficult to get used to “Peruvian time’. For example, one morning, the clinic nurses told us to be ready to leave for a campaign at 6:30am. We woke up at 6:00 and we ready to go by 6:30, but the bus didn’t show up until 8:30. Not used to this relaxed interpretation of time, this was quite frustrating. I became more accustomed to this over the 6 weeks and once I just accepted that this was how most things run in Peru, it did not bother me as much. The clinic was also run on this relaxed schedule, and I learned that if you wanted to go on a campaign or do work, you needed to

tell the clinic staff directly and be proactive about working. Language barriers served as both a negative and a positive aspect. I was generally pretty comfortable with my Spanish, but in rural areas where the women spoke only Quechua, it was very difficult to communicate. This was also a positive experience though, as it forced me to learn a little Quechua and it allowed me to experience being in the minority group of those who did not speak the local language. GI illness was definitely a negative aspect of traveling to Peru. I'm not sure this could have been avoided; sometimes this is part of traveling. Finally, the last negative aspect that I would like to touch on is lack of clinical knowledge about gynecology. While it was not really necessary to have extensive background knowledge on gynecology to perform a Pap smear, I would have liked to have gone through our Reproductive/Endocrine block to gain a background understanding of different gynecological issues and treatments prior to my experience this summer.

Overall, however, my experience was very positive. I loved being able to provide care for those who would not otherwise been able to receive it. This program allowed me to perform clinical exams for these patients and it was a very involved and hand-on experience. I was also able to practice and improve on my Spanish and use it in a professional clinical setting. I also was able to travel to tiny rural villages that definitely would not be a typical tourist destination. This allowed me to see how many individuals in rural Peru live. I loved seeing the traditional skirts and hats that the women wore, seeing llamas being herded by farm girls, and trying local foods and drinks at the plaza markets. Learning and practicing clinical skills was a huge part of what made this summer so beneficial. I performed numerous Pap smears and breast exams, but I was also able to gain more experience in interacting with patients and talking about very personal issues with

patients. In addition, it was wonderful to work with other students and physicians and to work with Americans and Peruvians. I loved living in Cusco for 6 weeks and also being able to take time off in between campaigns to travel around Peru.

Some unique experiences that I had while in Peru included playing a meaningful role in patient care and walking in a Peruvian parade. One day on a campaign in Ollantaytambo, I was getting ready to do a Pap smear on a woman and I noticed a huge mass obstructing her cervix. This seemed obvious to me, even with limited clinical experience, but it was an interesting experience to be the first line in this woman's care. I saw the mass, told her that I would get the physician to come look at it, and we referred her back to our clinic, where she would have it removed. Although I personally could not treat her, I felt fortunate to be a part of this woman's care. She came not knowing that she had a mass on her cervix, and left being able to have it treated because I was part of her team of healthcare providers. This moment stuck out in my mind as part of the greater work that we were doing: preventing cervical cancer in Peru. Another experience that I will never forget is marching with the CerviCusco clinic staff in the 18-hour long parade for the Inti-Raymi (winter solstice) festival. The parade began at around 9:00am but we did not start until about 11:00pm. We, the medical students, were also the only non-Peruvian people marching in the parade and hardly blended in with the locals. We were also dressed in giant ponchos, scarves, and chullos (Peruvian knit hats), and handed out feminine pads. We could not have looked more ridiculous, but we had a ton of fun dancing, throwing pads to the crowd, and handing out information about our clinic.

Overall, I had an amazing experience this summer. I was able to accomplish my goals of learning and practicing clinical skills by doing hundreds of Pap smears. I also was

able to practice my Spanish and learn some key phrases in Quechua along the way.

Participating in this research project was a new experience and I was able to administer

surveys, which were written to analyze barriers to women's health care in Peru. Finally, I

gained a better understanding of Andean culture and women's health. This was a

wonderful opportunity to learn, practice clinical skills, perform survey research, and work

with new people. At times, the clinic was a little slow, but I learned that you need to take

initiative for the work that you want to do. Ultimately, Cusco was a fantastic place to travel

and has a culture with strong Andean roots. This experience allowed me to gain research,

clinical, and cultural knowledge that I will use as a medical student and a future physician.



