

# China Teachings: British Columbia Rheumatologists in China

By Simon Huang, MD, FRCPC; Ian Tsang, MB, FRCPC; and Barry Koehler, MD, FRCPC

## How it all began

This program began after a chance meeting with Professor Zhongdao Wu, then Dean of Undergraduate Study at Zhongshan School of Medicine, Sun Yat-sen University, Guangzhou. He invited the three of us to teach a two-week elective to medical students at the beginning of their fifth year of an eight-year program. Professor Wu particularly wished that the students would have exposure to “Western-style” teaching.

It was restricted to students who had a working knowledge of English. Attendees averaged 80, out of a total class size of 100. The invitation was renewed for the next six years. For the last two years it has become part of the formal curriculum for the entire class, due to the efforts of Professors Wu and Dean Guoquan Gao.

## What did we do?

We had planned a rheumatology course for medical students who were early in their clinical training, but soon realized that we needed to use this framework to teach a sound approach to history-taking, physical examination and differential diagnosis. Dr. Simon Huang's expertise in teaching methods formed the foundation.

Mornings are devoted to review of the previous day's topics, followed by two to three lectures. Afternoons are spent at various hospitals, with one of the faculty and ten to twelve medical students reviewing a patient. The students collaborate to obtain the history, followed by the faculty member leading them through relevant physical findings, and a subsequent exploration of the possible diagnoses.

Our faculty has been augmented in recent years by Dr. Antonio Avina-Zubieta and Dr. Mercedes Chan. For the past two years students also were offered a workshop on evidence-based medicine, under the guidance of Dr. Charles Goldsmith.

The medical school supplies translators for those of the faculty who did not speak Mandarin (for the afternoon bedside teaching), prepares a printed course syllabus, and arranges teaching rooms for the afternoon clinical sessions – and also room and board.

## What did we achieve?

### • Students

- Students were initially inhibited to be involved in a Socratic learning environment but quickly became



enthusiastic participants.

- They learned our approach to practice: Medicine is organized, consistent detective work, beginning and ending with the patient.
- Zhongshan Medical School has achieved first place in the national competition for clinical skills in recent years, a competition previously dominated by the Beijing medical schools.

### • Fellows

- With the support of the University of British Columbia (UBC) Division of Rheumatology 17 fellows have had the opportunity of teaching learners from a different culture but, perhaps more importantly, to spend time immersed in a different culture.

### • Faculty

- We were reinforced in our belief that, while medical students are always bright and always learn, the learning is enhanced by the right learning environment.
- Lectures were all done in English. This led to the recognition that the students found that those with English as a second language (Tsang, Huang) were easier to follow than someone for whom English is their mother tongue (Koehler), whose speech tends to be larded with ‘strange’ colloquialisms.
- Take into consideration the customs of another country. We learned that a two-hour break at midday is a necessity for medical students in China; it's not just lunch but also nap-time!

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# My Journey to Happiness as a Rheumatologist in Saskatoon

By Regan Arendse, MD, FRCPC

**M**y decision to work as a rheumatologist in Saskatoon, seven years ago, is one of the best I have ever made. The people of Saskatchewan are warm, welcoming and sincere. My colleagues in the Division of Rheumatology and associated departments are supportive, accommodating and helpful. Being happy at work is perhaps one of the greatest blessings to have.

One of the main factors that contributed to my decision to work in Canada was my inability to find a state-supported position as a newly qualified rheumatologist in South Africa. While there is a huge need for rheumatology services in South Africa, there are extremely few state-funded positions available. At the time I had completed my training in rheumatology, all the available positions had been filled with no prospect of a vacancy opening for at least 5 to 10 years. The prospect of committing to a private practice, which posed the challenge of trying to provide services to patients who were compelled to pay hard-earned currency for expensive medications, was not appealing to me. After much discussion with my family, we made the difficult decision to leave Cape Town, one of the most beautiful cities in the world according to a recent CNN article, to explore employment opportunities internationally.

The Netherlands is an amazing place to work; from space-age offices that reminded me of scenes from the Starship Enterprise, to super-efficient colleagues and paramedical staff and the innovative incorporation of musculoskeletal ultrasound examination into routine clinical care. Most interesting was the pragmatic Dutch approach to problems. The university medical center, Erasmus MC in Rotterdam, where I worked, employed in excess of 13,000 people in 2011. To reduce the major strain placed on parking facilities, they decreed that all employees including the CEO would commute to work either by public transit or by bicycle, thus increasing the availability of parking for their patients. I learned many valuable practical lessons at



Dr. Arendse and his team: Rhovely Ross, Dr. Myat Tun-Nyo, Dr. Richard Tse, Dr. Regan Arendse, Dr. Germaine Arendse, Denise Carolus and Grace Castro

Erasmus MC on how to assess and manage complex rheumatology patients who were referred for quaternary care.

While working in the Netherlands, I received a call from a recruitment agency to discuss employment opportunities in Canada. I was notified of rheumatology vacancies in many provinces, extending from St. John's in Newfoundland all the way across to Victoria in British Columbia. Despite having travelled extensively, my wife Germaine and I had never visited Canada before. With my own work opportunities secured, we focused on finding a city that would provide Germaine the opportunity to enroll in a PhD program in immunology. Thus, it came to be that we both accepted positions at the University of Saskatchewan; I in the Division of Rheumatology and Germaine in the Department of Microbiology and Immunology. Upon completion of my required certification examination with the Royal College of Physicians of Canada (and of Germaine's PhD thesis) we decided to work in the same office in collaboration. A very satisfying ending to a long journey across the globe to find happiness in employment.

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