Elective Report

Anjum Aarifa Khanom University of Liverpool

Neurosurgical Elective: Seoul National University Hospital, Seoul, South Korea

I undertook a four-week elective at Seoul National University Hospital, Seoul, South Korea, within the department of neurosurgery. I wished to travel to East Asia to explore how the culture there differs from Europe. I was able to attend this elective through a generous bursary from the Society of British Neurological Surgeons.

My primary objectives for this elective were to:

- 1. Experience as much cranial theatre as possible
- 2. Experience a cranial neurosurgical operation when the patient was awake, as I was not able to see this during my placement at The Walton Centre
- 3. Gain an appreciation for how their country may run operating theatres slightly differently from ours

I feel confident that I was able to achieve all 3 of my objectives — the first 2 objectives were rather straightforward as I attended all my supervisor's neuro-oncology operations, of which 1 of them was an awake surgery. This amounted to 2-3 operations per week, of various oncological resections and some lesion biopsies. I was not able to witness as much cranial theatre within the UK, however, my supervisor kindly went through entire cases with me before beginning the operation, then discussed the anatomy during the operation before finally concluding the case and answering my questions at the end. Having this level of support throughout the whole elective really enhanced my ability to understand the operations as well as translating textbook and imaging anatomy into real life. I learnt a lot regarding anatomy, neurosurgical planning and indications for different techniques.

This was particularly true for my second objective of witnessing awake-surgery. I learnt a lot regarding the indications for awake-surgery, and upon hearing how narrow the criteria were, I felt fortunate that I was able to witness a case. Awake-neurosurgery is now only undertaken for patients who have a low-grade tumour implicating their language centres. Motor areas can be tested and visualised in upper and lower limb movements even when the patient is asleep through neurostimulation. However, to ensure that important parts of the brain involved in producing language are not being resected, the patient must be awake and are often asked to complete simple tasks, such as counting backwards from 10. Patients will not be offered these sorts of surgery if they are at an extreme of an age range, or have any history of anxiety or panic attacks.

My third objective was somewhat more abstract; however, I believe I have gained an appreciation of how medicine and surgery in general can differ in practice in South Korea, versus in the United Kingdom. At first, I was shocked by how similar everything appeared to be – the surgical theatres looked the exact same. All of their equipment pieces were even from the same surgical companies as ours, the overall flow of the operations ran the same and the strict sterile surgical environment was maintained in the exact same way. It was really interesting to see how the globalisation of medicine and healthcare means that surgeons are able to step into different theatres and find many commonalities.

Finally, in my free time I was able to enjoy travelling around Seoul with several recommendations from theatre staff and my professor. On my final Thursday, I attended a lunch with my supervisor and his research lab, as the date fell on a National Holiday of-sorts.

I really enjoyed my time in South Korea, and as neurosurgery is a small community, I look forward to meeting the surgical team again at future conferences.

Finally, I would like to sincerely thank the SBNS for their generous bursary awarded to me, which enabled me to undertake this elective.