CAREER PATHWAYS

Senior House Officer in Sexual Health

Background
In 2003, I was one of the first GP registrars to do a 6-month placement in sexual health at the Garden Clinic in Slough, UK. It was an innovative post, which sounded challenging, appealing and interesting. The following is an account of the time I spent in sexual health.

The Garden Clinic, Slough
Slough, along the M4 corridor, west of London, UK, is a very diverse area. It has high pockets of deprivation and a large mix of ethnic diversity including many Africans, Caribbeans, Asians and an increasing Eastern European population. This creates many complexities, in particular language and cultural issues. The Garden Clinic offers a holistic approach to sexual health, encompassing genitourinary medicine (GUM), family planning (FP) and a separate consultant-led HIV service. The service works well, offering patients a choice of appointments, from walk-in clinics every day, to booked appointments. There is a speakeasy (young persons) clinic aimed at under-16s, the garden clinic has satellite clinics in Bracknell and Maidenhead. Specialist clinics are also run every month, such as a genital dermatology clinic run in conjunction with the dermatology department and a psychosexual clinic for men with erectile dysfunction problems. The service also provides a counsellor who covers a range of topics such as gender issues and problems with sexual relationships.

What did I do?
When I first started, I was well supported and had a good induction. I had two mentors: Dr Desmond (GUM) and Dr Callander (FP). I spent 2 weeks sitting in the various clinics to learn what to do, specifically how to take a sexual/FP history and examine patients and take swabs (if needed). I initially started with GUM and then spent time in FP. I also spent time with the health advisors and learnt about contact tracing and a little time with Dr Dawson (HIV consultant). After 6 months, I had a good range of knowledge of GUM and FP, and I had completed my DFFP and my intrauterine device (IUD) training. In FP I had gained experience in all methods of contraception from the pill to fitting diaphragms. I also conducted an audit, looking at rates of gonorrhoea and the amount of resistance to the first-line oral antibiotic, ciprofloxacin. I helped Dr Desmond compile and update the GUM guidelines and also put together an induction pack for future SHO trainees. I did a presentation at one of the weekly education meetings (in fact, now a ‘barrier methods’, which was well received. I also completed an audit on emergency contraception (EC), looking at who was using oral EC versus the emergency IUD, the reasons behind these decisions and also if the IUD was being kept as long-term contraception.

This knowledge and new skills have been really useful to take into general practice. I am currently working towards completing my training for the Letter of Competence in Instructing Doctors (LoC FINDoc). The mentoring and teaching that I received at the Garden Clinic was excellent and I had regular feedback of my progress.

Why did I do this?
Initially, I wanted to do something different that would still be relevant to general practice. I have really enjoyed the time in sexual health and now hope to become a GP with Special Interest (GPSI) in sexual health. I gained a huge amount of knowledge of GUM and FP and can now offer patients a complete choice of contraception. I have also gained many practical skills, such as bimanual examinations, taking a range of swabs for sexually transmitted infections, IUD fittings and also cap/diaphragm fitting. I have gained experience in dealing with difficult and sensitive subjects and I don’t find talking about sexual health embarrassing any more, and now I find it much easier to put patients at ease and establish a rapport. I have gained experience in dealing with young people, who are very challenging, and can relate to them well. Additional skills I have obtained are communication skills, confidence, listening skills, understanding patients’ ideas, concerns and expectations and being able to talk about complex issues, dealing with young people (especially with regard to Fraser guidelines and competency) and confidentiality issues. I also know about contact tracing and how to carry this out.

What did I enjoy about it?
I initially enjoyed GUM as it was fairly straightforward, but as time went by I began to enjoy the complexities of some of the FP consultations. The style of consultations differed from GUM, where you just concentrated on the sexual history leading up to an examination and swabs, with the consultation being more ‘doctor centred’. The FP consultation was more ‘patient centred’, with the patient being given information and choices and then deciding on what they wanted. I enjoyed the way that the staff, including the receptionists, nurses and administration staff, all worked together as a team. The consultants were approachable to discuss problems, something that was extremely useful for a doctor in training as you never felt alone or unsafe.

Future opportunities
I feel that this job has given me lots of opportunities. Sexual health is currently a hot topic, with the Government’s National Sexual Health Strategy and the increasing demand for sexual health services caused by an increasing incidence of chlamydia amongst the under-25s. Currently sexual health services are overstretched, and this will take a considerable amount of time to address. As for myself, I am currently working as a civilian doctor at RAF Benson and hope to take the invaluable skills I have learnt with me. I am, however, continuing to do evening GUM and FP clinics. My aspiration at some point in the future would be to become a GPSI in sexual health and there may be a good opportunity to do this in the military, as GUM and FP are an important part of the workload. I may be joining up! Finally, I would recommend a 6-month post in sexual health to all GP registrars as it is relevant to general practice, you gain a lot of useful knowledge and skills (both practical and being able to deal with difficult situations), and it is very rewarding and useful.

If you hadn’t become a doctor what would you have done?
I would have gone to film school and hopefully become a film director. My name is down with Pinewood Studios if they ever need a doctor!

FURTHER INFORMATION
Faculty of Family Planning and Reproductive Health Care:
http://www.ffprhc.org.uk (information on obtaining the Letter of Competence in Instructing Doctors)
Royal College of General Practitioners:
http://www.rcgp.org.uk
Windsor VTS Scheme:
http://oxford-pgmde.co.uk/gp/vts/windsor.html