

An Introduction to Genito-Urinary Medicine

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The World Journal of Medical Education and Research (WJMER) is the online publication of the Doctors Academy Group of Educational Establishments. Published on a quarterly basis, its aim is to promote academia and research amongst all members of the multi-disciplinary healthcare team including doctors, dentists, scientists, and students of these specialties from all parts of the world. The principal objective of this journal is to encourage the aforementioned from developing countries in particular to publish their work. The journal intends to promote the healthy transfer of knowledge, opinions and expertise between those who have the benefit of cutting edge technology and those who need to innovate within their resource constraints. It is our hope that this will help to develop medical knowledge and to provide optimal clinical care in different settings all over the world. We envisage an incessant stream of information will flow along the channels that WJMER will create and that a surfeit of ideas will be gleaned from this process. We look forward to sharing these experiences with our readers in our subsequent editions. We are honoured to welcome you to WJMER.



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An Introduction to Genito-Urinary Medicine

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Introducing GUM

The principal role of genitourinary medicine relates to prevention, diagnosis and control of sexually transmitted diseases. It is mostly an outpatient-based speciality and a great proportion of the work centres around managing patients with HIV at various stages of the disease. The work also involves some non-infectious genital diseases such as dermatoses. In recent years, the role of GUM physicians has extended to include management of sexual dysfunction, provision of contraception, colposcopy and health promotion.

Some common interventions undertaken by GUM physicians include:

- Sexual screening
- Taking microbiological samples from genitals
- Speculum examination
- Use of antimicrobials to treatment infections
- Lab skills such as microscopy

In the NHS, sexual health is an area of priority with new initiatives being introduced regularly. Despite the bulk of work taking place in outpatient clinics, there are opportunities to get involved in community clinics and with inpatient HIV care.

Life as a GUM physician

GUM is a rewarding speciality and is almost unique in that a great proportion of the patients are otherwise fit and ambulatory young adults. Bacterial infections can be treated effectively and this makes the profession one of the very satisfying careers in medicine. Viral STIs cannot always be treated, but patients can be managed effectively by clear explanation and advice. If you are looking for something challenging there is the option to get involved with HIV medicine. This is one of the fascinating and rapidly expanding areas of genitourinary medicine. HIV has now become a long term chronic illness and patients can be difficult to manage on the grounds of their complex medical conditions in addition to psychosocial issues.

GUM physicians play a key role in STI prevention by directly providing information on risks of disease transmission to patients. During some stage of their

training, they are expected to provide ward-based commitment to HIV patients and to participate in a GUM on-call rota for acute patient management and advice.

GUM physicians have very favourable working hours, mostly 9am to 5pm, with the exception of some after-hours clinics which may finish at around 9pm. The interdisciplinary team that you will be working with involves specialist nurses, health care assistants, social workers, health advisors and laboratory technicians, as well as community specialist youth and HIV services.

As a GUM physician you will usually run two clinics a day with approximately 10 to 20 patients per clinic. The patients that you will be dealing with are very diverse in terms of cultural and social background and sexual orientation. GUM medicine involves a great deal of interaction with youth and young adults since they are the people at highest risk of sexually transmitted infections. The patients can be either self-referred or referred from a general practitioner or any other medical specialist such as urology, general medicine, ophthalmology, paediatrics and emergency units.

Perhaps one of the best things about GUM is that the on-calls can often be done remotely through consultation on the phone. As mentioned previously, the bulk of work is in outpatient clinics with sufficient time provided for completion of administration, and varying degrees of study, research, teaching and management dependant on the individual.

GUM physicians are involved in dealing with diseases which are still stigmatized in today's society. Therefore it is vital to be able to establish rapport quickly with your patients in order to facilitate full disclosure of issues and obtain a complete history.

Some of the personal qualities required for this speciality are:

- Interpersonal skills to deal with highly emotional patients
- Ability to establish rapport quickly and put patients at ease
- Having an interest in others and their relationships

These skills are crucial for the effective and appropriate management of patients.

Research work can involve taking part in international sexual health and HIV related conferences to publish findings. Furthermore, there is the possibility of taking time out after the third year of training for continuing research. Some trainees might opt to undertake the OOPE (Out Of Programme Experience), which can involve 9 months in Zambian HIV prevention projects, time out to complete a diploma in Tropical Medicine and Hygiene, or possibly even completion of an MSc in sexually transmitted infections.

Training

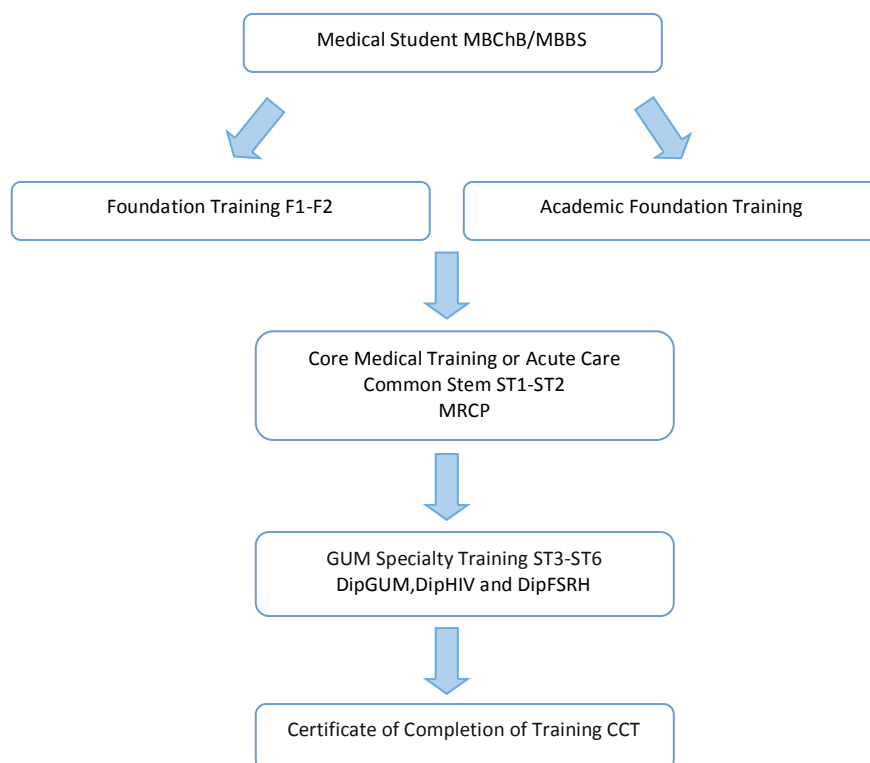
Trainees wishing to pursue a career in GUM must first complete two years of core medical training or ACSS training. In 2011, there were a total of 74 applicants applying for 37 available posts giving approximately 2 applicants per post. During training from ST3 Level, trainees have a number of specific assessments they must pass including GU Medicine, HIV and Faculty of Sexual Reproductive and Health (FSRH) diplomas.

The Future

The field of GUM has been revolutionised since the introduction of combination antiretroviral therapy and its application in HIV treatment. Whilst this has not resulted in the complete treatment and eradication of HIV, it has provided a great basis for early treatment and management.

In an attempt to cure HIV a treatment which involves targeting latent HIV reservoirs is being investigated. This concept is based on the activation of latent HIV infection so that infected immune cells start producing HIV. The HIV kills the infected cells and, when treated with antiretroviral drugs, new cells will not get infected. Consequently, all infected cells are killed off leaving only healthy cells behind.

However, we still do not know how HIV latency works and there is a great knowledge gap in this field. It is thought that it will simply be a matter of time before the knowledge to completely transform the lives of those affected by HIV is acquired. The question is whether you want to be part of it or not?



After the completion of the foundation years 1 and 2, doctors wishing to pursue a career in GUM need to complete 2 years of core training in either a Core Medical Training programme (CMT) or Acute Care Common Stem (ACCS) programme. Following successful completion of

MRCP and work place based assessment during the 2 year core training programme, trainees need a minimum of 48 months of speciality training to certificate of completion of training (CCT).

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