

My experience during my 4th year of medical school on CFHI's Introduction to Traditional Medicine in India rotation was a broad one. Over the course of six weeks I studied ayurveda, reiki, yogic medicine, naturopathy, and homeopathy. In addition to all these I had the opportunity to practice my "western medicine" techniques in both urban and rural clinics.

The trip began in Dehra Dun, a state capital sitting at the feet of the first ridges of the Himalayas. Here I spent mornings participating in diagnostic work alongside a homeopathic physician who follows the school of thought that various poisons can be used in microdoses to treat the conditions that would be brought on by larger doses of those poisons. Once a diagnosis was reached I was taught the various principles of treatment guiding the therapeutic choices made. As it was winter, it was interesting and fun to observe all of the possible remedies (alternative to antibiotics) that can be used to treat upper respiratory tract infections, and oftentimes be able to still provide treatment in the face of the wall "it's probably a virus." Afternoons were spent learning the principles and observing treatments involved in reiki, a system based on vital energies, their flows through the body, and upsets in those natural flows. Finally, evenings were spent at a private emergency medical clinic where I mostly worked up chest pain with no laboratory to provide speedy diagnostic assistance and no cath lab waiting around the corner to ship patients off to. This was the best of care wealthy patients who had money could receive. Just to get an idea of what living in poverty was like in this state capital known for being clean and wealthy, I've enclosed a picture of one area where some of the poorer EMPLOYED people lived. Note the stream of raw sewage flowing through piles of garbage that provided water for washing, bathing, and drinking. Homes were composed of plastic tarp wrapped around sticks. Over New Year's weekend the papers reported that 94 people died of cold in this part of town.

Following Dehra Dun, I went off to Rishikesh, a city where the holy Ganges River descends from the mountains to provide water to a large portion of India's people. Here the water was clean, blue, and full of fish. I had no worries joining the pilgrims for an occasional dip in the water. A thousand kilometers downstream at another holy city named Varanasi I witnessed the city's sewage pouring into the now brown waters alongside piles of human ashes being brushed into the river with the occasional bloated human corpse being gnawed on by vagrant dogs at the river's edge. All of this was of course accompanied by the usual bathing, washing, and drinking. Either way, in Rishikesh I lived in an Ashram and studied with the resident yogis. Each day began with yoga, followed by lectures on yogic theory and naturopathy. Evenings involved meditation sessions followed by the daily worship ceremony at the river's edge. I not only became familiar with posture and breathing techniques, but also principles on diet and the various processes used to cleanse toxins from the body. Enclosed are pictures of the river with neighboring ashrams as well as a theory class in session.

Finally I finished the program by spending a month in the rural village of Than Gaon. Here I worked alongside a physician employed by CFHI trained in both allopathic medicine and ayurveda. Monday, Wednesday, and Friday mornings were spent in the village clinic while Tuesdays and Thursdays were spent setting up clinics at remote

villages spread throughout the mountains. Patients would sometimes walk up to fifteen kilometers with illnesses like appendicitis to attend these clinics, though most patients were the usual winter URTI's. Other common pathologies were anemia (nearly every woman encountered was iron deficient) and trauma. One interesting experience was when performing a routine physical on an 8 year old boy I discovered a 3/6 systolic murmur (one of the bigger reasons why all juvenile sports athletes must pass a physical prior to participating). I passed this information on to the doctor and he didn't even auscultate. I asked why and the reply was "it's not like there's any cardiac surgeons around here to do anything." During spare time I learned some Hindi, Indian cooking, and taught geography at the local kindergarten (maintained by CFHI). Enclosed are pictures of me with some of the children, some of the other students with the staff at the clinic, and a picture of me checking the eyes of a little girl whose mother complained she was eating dirt (diagnostic substitute for a complete blood count).

Overall, my time was extremely enlightening both from medical and social perspectives and I would heartily recommend it for anyone interested in international health.





