## The International

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On one sunny August day I say goodbye to my partner and parents at the Victoria International Airport, my life packed into two 22-kilogram suitcases. 3 flights, 19 hours and 9,500 kilometres later I land in Dublin – my first time to Europe. Life as an international medical student begins.

Medicine is such a fascinating and multifaceted profession. It is both demanding and rewarding, but the gateway to this allopathic Zen is narrow; many qualified applicants are turned away for every one person accepted into most medical schools.

I was in Australia working on my Masters when I found out that I was accepted into Trinity. I knew that Trinity had an excellent reputation and my newfound spot in Dublin was revered, but I didn't feel the celebration. The daunting €4,000 nonrefundable deposit to Trinity was due one week before I was to find out the results of my post-interview admission decision from the medical school in my hometown.

Staying close to home for medical school would have allowed for much more time with loved ones and much less debt overall. It also would have made life easier as everything would be familiar, from the education system to the grocery store. I knew that the Irish medical schools had a long history of exporting strong matriculates to Canada, but the international student tuition is steep (currently standing at €31,000 per year at Trinity). The fees are, however, comparable to what most medical students pay in the US.

In the end I paid the deposit to Trinity, and I'm glad I did; I was told that my application was one of the near-30,000 rejected by Canadian medical schools in 2009. Rather than spending the indefinite future reapplying in Canada, I found myself standing at Trinity's Front Arch with two heavy suitcases in hand. It was the start of a new adventure and I was fortunate to have Trinity open its doors to me.

I felt like I was in a parallel universe where people drink beer instead of water, drive on the wrong side of the road, and ask questions like, "where is the craic?" Moving into the Cunningham building at Trinity Halls was interesting, what with a communal kitchen, shower, and toilet shared among up to 14 young men and H1N1. I purchased a bicycle for the 5-kilometre commute from the dorms to campus, but before the year's end I had a run-in with a bus that resulted in a broken helmet. suspected scaphoid fracture and €250 visit to A&E – a crude but thankfully benign way of learning about Ireland's healthcare system.

There is a lot to adapt to when one moves across the globe alone, but

it's comforting to know there are others in the same situation. About one third of our 146-member class is composed of non-Irish students, and the majority of us international students come from Canada and Malaysia. One rite of passage that seems to pull us non-EU students together is the annual Garda vetting, where we have to line up outside the immigration office early in the morning (and usually in the rain) to provide paperwork and €150 to the Irish government and subsequently miss a day of classes. Another aspect of life for the internationals is the need for a good Internet connection at home for often-daily video chats on Skype with loved ones across the opposing time zones. Many of us have both endured and enjoyed long-distance relationships thanks to this electronic Cupid.

Studying in Dublin has major benefits. Pizza in Italy or wine in the south of France is just one Ryanair flight away. Dublin itself has a vibrant city centre, and the live music or Saturday food markets are a refreshing change from the parkades and Costcos that symbolize North American excess. One also learns to value sunshine like no other. I haven't found myself feeling homesick, though I desperately miss the affordable and succulent sushi on the west coast of Canada.

There are approximately 650 Ca-

nadians studying medicine abroad (CSAs) in Ireland, and we constitute 'big money' to the Irish education system. Family savings are the topcited main source of funding for CSAs in Ireland, and this is not surprising when roughly one third have a physician as a parent. Still, many of us rely on professional student lines of credit of around \$300,000, for which parents almost always have to cosign. This is on top of Canadian government student loans. The pressure quickly mounts on us to match successfully to a residency after graduation and start paying off the loans; fail to 'make it' and your folks could lose the house.

It sometimes seems like a worrying gamble to be an international medical student in Ireland, especially when there are no post-graduation training spots specifically held for us in any country. Upon graduation, we CSAs are regarded as international medical graduates (IMGs) in Canada. Back home we have to compete for limited residency training opportunities, most of which have mandatory return-of-service contract clauses requiring years of work afterwards in rural underserved areas. We can also apply to train in the United States, where there are roughly one third more residency spots than there are domestic medical school graduates.

To be eligible to apply for residencies in Canada, CSAs have to write the computer-based Medical Council of Canada Evaluating Examination (MCCEE), generally at the start of final year. Also, anyone applying to the US must write the US Medical Licensing Examinations (USMLEs). Strong reference letters from doctors in Canada or the US are imperative, and this puts pressure on us to use our summer clinical elective time productively.

Despite the hurdles, Canadians in Ireland have a good chance of matching successfully to at least one programme somewhere across the North American continent, be it a 2-year family medicine residency in the middle of Manitoba or a 5-year orthopaedic surgery residency in downtown Toronto. One Canadian residency programme director said that, due to how similar the clerkship experiences are in Canada and Ireland, he prefers Irish graduates to those from for-profit international medical schools popping up across the Caribbean, Eastern Europe and the Middle East. Compared to the standard 4-year graduate-entry medical programmes, the extra year of training at Trinity also provides us more time to improve our clinical fitness and finesse. With one or more previous degrees, however, it is a long road.

I enjoy learning at Trinity, as many of our educators are brilliant people who are leaders in their field. Still, the air of prestige and history within the college is accompanied by gusts of haphazardness. For example, the PowerPoint lecture slides (from which we are expected to base our individual studies) from any given lecture may be posted to one of many different websites, it may be e-mailed to us, it may be handed over to a class rep, or it may not be made available electronically at all. Also, the version we do access may not be up to date. Compounding this are last-minute lecture changes and cancellations. But such is life and everything gets done in due time. Us students learn to adapt, relax, and hopefully realise how privileged we are to have such trivial complaints.

Another benefit to studying medicine at Trinity is the variety of people in the class. The biggest difference I see across our cohort is age, given direct entry into medical school right from high school in Ireland. At first I questioned if someone aged 17 was ready to jump headfirst into a lifetime of medicine. But now I see that, regardless of age, we all integrate to share fresh perspectives, rich cultures and even delectable cuisines.

Moving past the snags and expenses, the experience of a medical education at Trinity College is unique and empowering. We have a rich international community that both benefits from and contributes to this novel life founded in Dublin. And what a life it is.

