Dr Thandi Milton shares her experience as the first European AIDS Clinical Society (EACS) Exchange programme fellow at BSMS.

Thandi is the first of what we hope will be an ongoing stream of researchers coming to do an HIV-related clinical exchange at BSMS and Brighton and Sussex University Hospitals NHS Trust via the EACS Short Clinical Exchange Programme. Below you can read an interview with Thandi conducted by Esther Garibay from the Global Health and Infection department at BSMS.

Esther: Tell us a bit about yourself, your medical background and what brought you to Brighton?
Thandi: I'm a medical doctor and researcher from Botswana in Southern Africa. I have a background in epidemiology, implantation science and tropical medicine. Before coming to Brighton, I'd spent 18 months working as a research doctor working on a cryptococcal meningitis trial with an organisation that does a lot of HIV research in Botswana. Cryptococcal meningitis is one of those opportunistic infections or common infections that you find mainly in HIV positive populations. In case people don't know, Botswana is one of the countries with the highest rate of HIV in the world, despite having such a small population of approximately 2.4 million people. We have quite a high HIV rate so this is really important work. Essentially, I would examine patients and screen them for cryptococcal meningitis and involve them in this trial and this is when this opportunity came up. Here in Brighton I am working with Dr Jaime Vera at the Lawson Unit, again doing HIV research working specifically with data from the Orange Clinic he helped to set up. The Orange Clinic is a memory clinic for HIV positive people in Brighton who are having cognitive difficulties or difficulties with their memory.

Esther: What specifically attracted you to Brighton and the team?
Thandi: It's a bit of a long story, but essentially when I was applying for the EACS Exchange, Brighton was one of the options and I remembered Brighton was by the sea. I love the sea, Botswana is a landlocked country and I don't get to see the sea much, so that was one of the drawing factors. But more than that, Brighton has one of the largest cohorts of HIV positive populations in the UK and a lot of good studies and work have come from here. The interesting thing about the HIV cohort of the population in Brighton is it’s very different to the patients we have in Botswana and sub-Saharan Africa in that here in the UK/Brighton there is a large population of men who have sex with men (MSM), and those are the majority of HIV positive patients. This is different to what we have in Botswana where it’s mainly heterosexual women or heterosexual men and women, so that was interesting to note. Additionally, the work Jaime is doing is unique, it is not an area of research that is widely explored, and I found this a pull factor for me.

Esther: What aspect of the work Jaime does interests you?
Thandi: He's doing a lot of work on neurophysiological effects of HIV and neurocognitive difficulties in people with HIV. In Botswana, no-one has really done this work and I was looking forward to learning how to conduct this type of research and even if it would be applicable in our setting. There are very few people who do work with ageing populations, he does a lot of work the ageing population and now with people living longer with HIV its important to understand this.

Esther: Do you think from the time you have been here that this is something that you can apply in Botswana?
Thandi: Absolutely, it is very important and I look forward to taking a few ideas from the work that Jaime is doing or possibly collaborating in the future to do similar studies back home. Even though the work has been done here, the numbers are very small. We have about 100 patients in the data that we are working with now and I could easily find thousands in Botswana so it would definitely be relevant.

Esther: There are a lot of patients in the UK that are living longer, is this the case in Botswana?
Thandi: Yes, we are seeing more of that now. A lot of people are on antiretrovirals at the moment as treatment for their HIV and those who are complying and taking care of themselves are definitely living much longer. We are starting to see people into their 60s and 70s.
Esther: What have been your experience since arriving in Brighton?

Thandi: Brighton is a great city that I have fallen in love with, although I didn’t expect to. Everyone kept saying to me you are coming in the winter and you are going to be miserable but I actually absolutely love it. I arrived just before Christmas and all the lights were up and it was really beautiful but more than that everyone has been really welcoming. As for the hospital and BSMS, I think everyone has been very welcoming, supportive and curious to know what I am here to do and willing to assist in any way that they can. I think everyone is very dedicated to the work that they do and hardworking and this has impressed me. The doctors I have interacted with are really hardworking, passionate about what they do and about their patients. When we do ward rounds and unit meetings I can just see that they make a lot of effort to ensure that their patients are well taken care of.

The main thing for me that has stood out is Jaime’s Orange Clinic, I have never seen anything like it. It is a multi-disciplinary clinic, which means it involves people from different specialities: we have a neuropsychologist, we have Jaime, who is an infectious diseases doctor, we have a psychiatrist, who comes all the way from a different hospital, and we have a nurse, so it’s a group of different professionals who spend a couple of hours every month having a multi-disciplinary approach to patients and that is really unique. It just shows again the care that people provide for their patients, that four different specialists can sit and deliberate over one patient or consult with one patient. Brighton is a very inclusive city and I enjoyed seeing how liberal and colourful it is, it really allows a lot of self-expression, which is very different to Botswana and other parts of Africa which are more conservative and traditional.

Esther: What exactly is your role when you are here, are you observing, doing research or consulting?

Thandi: In terms of the clinical work, I am just observing. So at the HIV clinics at the hospital, I just sit in and observe, I don’t really handle the patients or have any hands-on work. However, when it comes to the research, I am definitely doing the work, handling the data and using the system to extract the data. I am very hands-on with the research.

Esther: If I understand correctly this data that you use is more of a statistical type of analysis than a lab-based?

Thandi: Yes, it's not lab-based, it's statistical. We are collecting various types of information about these patients who attend the Orange Clinic. Jaime, the neurophysiologist and I will then look at the data, analyse it and evaluate interventions.

Esther: What do you expect to get out of the programme?

Thandi: The main thing I’d like to get out of the programme is a new set of skills. Jaime is a renowned researcher and I would hope to gain some of those research techniques that are unique from him. I would also like to leave here with ideas and motivations for work that I can carry out on my own at home. I am at the stage where I am looking forward to doing my own independent research studies. I have an interest in both neurology and HIV so I am looking forward to having some ideas that I can take back home and implement into my setting and I’m also looking at making some collaborations or professional networks that I will be able to leverage on in the future.