

CORRESPONDENCE

Comment on: "The minister of health, the director of AIIMS and Shah Rukh Khan"

This refers to the write-up "The minister of health, the director of AIIMS and Shah Rukh Khan" (1) appearing in July-September issue of the journal. While freedom to articulate views is a basic tenet of a healthy democracy it does not give the authors a right to make unsubstantiated allegations against a highly respected cardiothoracic surgeon who served the nation all his life. The authors allege, without substantiating, that the then director of The All India Institute of Medical Sciences provided support to those agitating against caste based reservations. Where is the evidence to support this comment? When did the director come out to support the agitators?

The only basis for the authors to conclude that Dr Venugopal was supporting the anti-quota agitation probably stems from his reluctance the use barbaric methods to evict medical students who were protesting in a Gandhian manner. One may or may not agree with the agenda of agitators but nobody can deny the fact the agitation was a peaceful one and any use of force, as done by Mumbai police (2), would not have been justified. It will be much better that the authors use evidence rather than hearsay, and facts rather than fiction, to buttress the statements they choose to make.

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References

1. Thomas G, Srinivasan S. The minister of health, the director of AIIMS and Shah Rukh Khan. *Indian J Med Ethics* 2008;5:106-7
2. Bhatia R. Police beat up medicos. *Daily News and Analysis* 2006 May 14. Available from <http://www.dnaindia.com/report.asp?newsid=1029206>

Authors' reply

Dr Vishal Sharma has raised a single objection to our editorial, that the statement: "Dr Venugopal had incurred the displeasure of Dr Ramadoss because he had supported students who agitated against the reservation of seats for Other Backward Classes in AIIMS" is unsubstantiated. Dr Venugopal's support of the agitation was a finding of the Thorat Committee Report as reported widely in the press. We provided a reference to one such press report (1).

However, this is not the main point of the editorial with regard to Dr Venugopal. The main point is that as Director of AIIMS, he did little to fulfil the aims of this special institute which is funded entirely by tax-payers' money.

Reference

1. Press Trust of India. AIIMS row: Sequence of events. *Ndtv.com* 2008 May 8. [cited 2008 Jun 27 and 2008 Sep 7]. Available from: <http://www.ndtv.com/convergence/ndtv/story.aspx?id=newen20080049259>

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Stem cell quackery

An excellent article (1) by Sunil K Pandya on the use and misuse of stem cell therapy due to lack of legislation.

China and Korea have relaxed laws on this. I was surprised to read on the Internet that more than 50 per cent of patients in China in hospital for stem cell therapy are from the United States or countries in the European Union. In fact, there are agencies in Delhi arranging for stem cell treatment in China for patients willing to go over there. On the positive side, I met three patients who had come back from China after therapy, and who feel much better and they say they would recommend it to other patients too.

All is not lost in India. All that we require is stringent laws governing the use of stem cells. Guidelines cannot replace legislation. We have enough resources for stem cell therapy in India and if properly governed we can do wonders for our patients. If not, quackery will take over in the garb of clinical trials.

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Reference

1. Pandya Sunil K. Stem cell transplantation in India: tall claims, questionable ethics. *Indian J Med Ethics* 2008; 5: 15-7.

Admissions under the Mental Health Act 1987

The Mental Health Act 1987 applies to all psychiatric hospitals run by the state or central government as well as by private and voluntary sectors with facilities for outpatient treatment and registered with the appropriate licensing authority. Admission procedures for patients with psychiatric illnesses in the MHA 1987 come under three categories: voluntary admission, admission under special circumstances, and reception orders issued by magistrates.

In the case of voluntary admissions, a large proportion of patients request their own admission and sign a form stating that they are willing for admission and treatment. This is ethically questionable as many of them suffer from illnesses which can impair their capacity to make an informed choice about seeking treatment. Some may lack insight into their illnesses. There is no mention of capacity assessment in these patients and many of them sign the form not knowing what they are signing, or under the pressure of family and treating professionals. They may then be given depot medication, restrained, given ECT or medication mixed in food and drink.

Patients who come in voluntarily can request discharge at any