

We don't need corporate sponsorship for education

I draw your attention to a notice in the publication *Asian Cardiovascular and Thoracic Annals* (1998; VI (4): 26A-27A), announcing the details of a new 'educational programme' in cardiovascular surgery to improve capability in India and China for open heart surgery, cardiovascular anaesthesia, perfusion and critical care nursing. Interestingly this programme is initiated by M/s Baxter Health Care Asia Pvt Ltd, a multinational corporation based in the USA.

The programme does not involve any university, in India or abroad. Nor does this programme mention affiliation to

national educational bodies like the Medical Council of India (MCI) or the National Board of Examinations (NBE). Some private institutions - corporate or non-government organisations - may be participating in this so-called training programme. I wonder on whose demand the training programme was initiated and whether any national interests were considered before such programme was started. Today this is being done for cardiology and cardiac surgery. Tomorrow this could spread to other specialties as well.

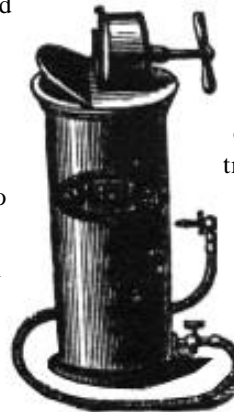
Most of us in the medical profession in India are students of Indian medical schools, though some of us have also had some training

abroad, in well-established and renowned medical educational institutes. There are many teaching institutions in India which impart first-rate training in cardiac surgery and other branches of medicine to young doctors. It is with the help of our own medical and surgical fraternity that we have been able to develop so far. Our aim certainly should be to strengthen our own teaching and training programmes. For this we do not have to take the support of any multinational corporate industrial/business organisation, which usually has its own interest in taking up such programmes. This can land us in difficulties, for the nation as a whole and in particular the 70 per cent of our population in the villages.

One cannot deny that there is much scope for improvement at all levels - the university, MCI, NBE, teaching and training institutions. However, this does not mean that somebody from abroad -- and that too an industrial organisation -- has to come here to take up such programmes without the permission of the government of India and the organisations which control the teaching and training of medical professionals. It is high time that the MCI, NBE and medical schools came together and had a thorough discussion of our problems so that we can improve ourselves without interference from outside. At the most we can take help of some teaching and training institutions abroad. There is no reason why this should not be possible provided we have the will, sincerity and honesty. After all, we have demonstrated this in many fields.

My earnest appeal is that we should nip the problem in the bud.

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Put yourself in the patient's shoes

I was very pleased to read the article by Sarita Agrawal (1). I am glad that articulate patients like her are finally making their voice heard.

Sometimes doctors forget that the centre of the medical universe should be the patient - and not the doctor. Such articles, which describe the patient's viewpoint, can help doctors to become more empathetic and caring. After all, putting yourself in the patient's shoes can only improve your perspective for the better. Patients in the West are becoming increasingly vocal, and are letting their doctors know what they want, and since they can speak with their wallets, their voices carry a lot of clout. This is all for the best. The ultimate aim of the doctor is to help the patient.

Industries all over the world are becoming more consumer-responsive: the customer is king. While the medical profession is the ultimate service industry, unfortunately in India, doctors have lagged behind in putting the patient's interests first. It is all too common to see doctors being rude or arrogant; and many routinely make patients and their relatives wait endlessly. Such rudeness would be unpardonable in any other sector, so why do Indian patients allow doctors to get away with it? The *raison d'être* for a doctor is his patients, and if patients refuse to put up with bad behaviour, the entire medical profession will, one hopes, improve.

Unfortunately, medical students have few role models they can emulate. The tragedy is that we need to be told to pull up our socks by our patients. I do hope doctors will improve. Remember the Golden Rule: Do unto others as you would have them do unto you.

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Reference:

1. Agarwal Sarita: From the other side. *Issues in Medical Ethics* 1999; VII (3): 94-95.

