

## A particularly dangerous unethical practice

Dr. H. V. Wyatt and colleagues <sup>1,2,3</sup> have highlighted the dangers following unnecessary injections to children. In a survey of children attending the outpatient clinic of a hospital in south India they found that half the children had been given injections by private doctors for illnesses during the preceding month. 'We consider most of these injections to have been unnecessary.'\*. They refer to other studies with similar conclusions. 40% of babies (in their first year) with diarrhoea were given an intramuscular injection.

Apart from the well-known complications such as infection from unsterile needles, abscesses at the site of injection and the transmission of the hepatitis virus, they highlight the incidence of paralytic poliomyelitis following injections. Such 'provocative paralysis' has been known since the late 1940s. Of 262 children with acute paralytic poliomyelitis in and around Pondicherry, 75% were found to have received an injection just before paralysis. The injections given included antihistamines, prostigmine, gentamycin, tetracycline, penicillins, other antibiotics and vitamin B. 'There was little clinical justification either for the drugs or giving the injection.' <sup>3</sup>

The situation is so bad that Wyatt and Mahadevan <sup>3</sup> suggest the maintenance of 'an abscess record book' in every primary health centre to be used as a marker for the spread of other infectious diseases with a much longer incubation (eg. hepatitis).

Dr. Anant Phadke's findings<sup>4</sup> on faulty prescriptions also deserve careful study. Analysis of over 3500 prescriptions in Satara district showed unnecessary drugs in every alternate prescription. One in five prescriptions included a harmful drug. One in four patients was given an unnecessary injection.

### References:

1. Wyatt HV, Mahadevan S: Unnecessary injections and poliomyelitis. Indian Journal of Pediatrics 60,327-329,1993.
2. Aswath D, Latha C, Soudarssanane MB, Wyatt HV: Unnecessary injections given to children under five years. Indian Journal of Pediatrics 60,451-454,1993.
3. Wyatt HV, Mahadevan S: Unnecessary injections in developing countries: the risk and costs. International Journal of Risk & Safety in Medicine 4, 167-176, 1993.
4. Phadke A, Sharada L: Unpublished findings. Details available from Foundation for Research in Community Health, Bombay.

## More on the Maharashtra Medical Council.

The correspondence columns of the *Times of India* carried on 2 April 1994 the following :

"This refers to the letter by two doctors of the Indian Medical Association, Delhi, criticising your edit on the Madras High Court judgement which said that the Consumer Protection Act (CPA) was not applicable to doctors. The doctors contention that the medical councils should sit in judgement on alleged negligence by fellow doctors itself needs to be questioned as the entire machinery is geared to protect the doctors. This I speak from my experience with the Maharashtra Medical Council (MMC) which has been bitter and disgusting.

"In my case the MMC did not even bother to acknowledge my complaint and reminders for nine months till I was compelled to go to the high court and it was then that it agreed to look into the matter.

"But it turned out to be the beginning of an arduous haul. I was not allowed to have the services of an advocate nor the assistance of a specialist. Being a layman I knew little about medicine and the law and therefore it was difficult for me to argue convincingly my case. Moreover, it was quite intimidating to face four doctors bombarding me with questions.

"Hearings of the MMC are held haphazardly. No proper cross-examination takes place and when I requested the panel to ask an important question, which was crucial to the case, they strongly objected to my request..

"The MMC was in no mood to finish the case and I was forced to go to the High Court again for an order asking them to do so. This was on December 4, 1991. To my surprise I received a letter from the MMC dated December 5, 1991 saying the case had been decided six months ago, in June 1991 and that the doctors had been cleared of the charges.

"I later learnt that the order had been passed without a quorum and my statements changed without my knowledge. My experience is a clear pointer to the reasons why doctors argue in favour of medical councils being given the sole power to decide cases of medical negligence and not the consumer courts."

R. G. Raheja

(There has been no response to this letter from the Maharashtra Medical Council to this date - 13 April 1994. We are representing Mr. Raheja's complaint to them and hope the newly constituted council will reopen his case and do justice to his complaint. *Editor*)