

CORRESPONDENCE

At the consultant's mercy

Charging exorbitant consultation fees and, in return, not providing satisfactory service has become quite a common practice in private hospitals. The psychological discomfort created by illness compels the patient to undergo each and every test advised by the doctor, even if it is not affordable. In return he expects to know all about his illness. In the event, the patient goes back even more mystified about his illness than before the consultation. Even after he has undergone very expensive tests he is not fully informed about his illness by the consultant.

Relatives accompanying the patient are concerned about his health and know of his doubts and fears. When they intervene and request information from the consultant, they are treated as though they are irrelevant intruders.

We took a relative, Mr. K. A., 62 years old, from Raisen, Madhya Pradesh, suffering from heart disease, to the cardiologist Dr. Satyavan Sharma at the Bombay Hospital on 18 February 1995. Dr. Sharma was paid Rs. 500.00 for the initial checkup. The patient was then advised to undergo a 'stress test', to be followed by a series of blood tests and an angiogram. The angiogram was performed by Dr. Satyavan Sharma.

The findings were not explained to the patient. Instead, he was given a prescription which gave no clues as to how and when the prescribed medicines were to be taken or what precautions the patient was supposed to take. Dr. Sharma refused to speak to me or explain the suggested treatment. 'I am not bound to repeat my instructions to relatives,' he said. When I insisted upon an explanation he asked me to bring the patient along.

This time my wife, Shamim, went with the patient. She sent a note to the doctor saying that the patient had come along but the doctor refused to see them. After half an hour or so, Shamim was able to make her way in with the patient. Dr. Satyavan Sharma was extremely harsh with them and asked them to get out of his room. The patient was extremely scared and refused to see the doctor any more. He preferred to consult his family doctor instead. The sum of Rs. 12,000.00 spent had only served to intensify his mental discomfort.

The patient was persuaded to make a last attempt to see the doctor. This resulted in heaps of insults. Dr. Satyavan Sharma agreed to clarify the patient's doubts only on condition that Shamim did not accompany him. Keeping the patient's condition in mind, Shamim agreed to wait outside the consulting room. With the patient alone in his room, the doctor started abusing Shamim. The doctor appeared to be more concerned with ventilating his anger than with showing concern for the patient's state of mind. The patient emerged from the consulting room filled with anxiety, tension and bitterness about 'Big Doctors'. His parting comment was, 'They may be specialists but they are not human beings.'

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(This letter was sent to Dr. Satyavan Sharma at the Bombay Hospital with a request for his comments and observations. To date, we have no response from him. **Editor**)

Organ transplant and the black market

The following scene is not uncommon outside any public hospital. Professional blood donors hang around blood banks. They are in search of needy persons, usually relatives of patients. These relatives often borrow money to pay the 'mediator' or donor in order to escape donating blood for their own relations. Wrong notions about donating blood are responsible for this state of affairs. Lack of knowledge coupled with the dire need for blood make a man 'buy' blood at any cost.

Organ transplantation has become quite common. Even in India kidney transplant is fairly common. This has led to unscrupulous practices. There are 1000 kidney transplants performed every year in India alone. Organs from related, living, human donors were hitherto used for transplantations as they are more easily accepted and results are good. There is great demand for human organs and supply is short. This has provided a golden opportunity for some people who have set up a trade in supplying organs at a hefty cost.

Removal of organs from the body of a live, unrelated person is banned in the USA. The percentage of success

from such transplants is as low as 30% to 40%. Such operations are therefore being carried out in Third World countries.

Organ sale is a flourishing business here. Traders in human organs establish contacts abroad and fly patients in for surgery. Rich buyers from West Asia, particularly the prosperous Arabs from the Gulf countries, come to buy kidneys in India. They usually do this through agents who hunt poor donors in need of money. The kidney is removed at a cost of a few thousand rupees and sold at a great profit to the Arab. This lucrative business is a blot on humanity. Doctors involved in this well-paying trade have turned a Nelson's eye towards all ethical and legal norms.

Govind Thakur, from Lalol in Gujarat, was a daily wage worker in Bombay. He went to a doctor for treatment of bleeding through his nose. The doctor under the guise of treating him removed one kidney, for which he paid Thakur Rs.21,000. He claims that the kidney was transplanted into an Arab woman's body. He does not have any proof except the discharge certificate issued by the hospital in Bombay.

There is a story about Ranjit Singh, the king of Punjab, who had lost an eye in battle. A healthy man once came to him for alms. Ranjit Singh asked for one eye and offered half of his kingdom as the price. But the beggar turned down the offer. This story exemplifies the importance of healthy organs to an individual. It is all the more sad that in a country that recognises such truths as part of tradition and folklore has now spawned individuals profiteering in the organs of the poor. Shouldn't such doctors be termed licensed killers?

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Doctor-patient relationship - an idealised concept? (1)

The concept enunciated in the essay entitled *Doctor-patient relationship*¹ is good but is based on an idealised assess-