Medical exams: plugging the 'leaks'

"umbai's JJ Hospital and Grant Medical College, two of the oldest and most prestigious medical institutions in the country, were in the news recently, but for the wrong reasons — the 'leakage' of exam papers for the final year medical exam. Apparently a few hours before the commencement of a theory examination, the paper was found with a student in a photocopy shop on the hospital campus. Somebody blew the whistle and the student confessed to have obtained the paper from a peon, who in turn led the police to none other than a professor of forensic medicine — who also was the chief invigilator for the examination. This gentleman had once officiated as the assistant dean of the hospital. Soon, more names started tumbling out from what seemed to be an organised ring of doctors, ex-students living in the hostels, and intermediaries like peons who would deliver the paper to students for a

It may have been a bit shocking to the common person to read about all this in their daily newspapers. But to those in the know about contemporary medical examinations — including may of our readers — it must not have come as a big surprise. What may have been a little different this time was that there seemed to be an effort to track the culprits and book them. It remains to be seen how far this will go, for often in the past such investigations have withered away and many of the accused have been successfully rehabilitated in the profession. As for the medical community including academic bodies they maintained their customary silence.

Those of us who have had something to do with medical examinations either as candidates, examiners or close observers have known for years that subtle or obvious subversion of the process is not a new phenomenon. The JJ case is probably an extreme example, but subtler forms of corruption in which certain candidates are favoured due to their medical, political or monetary connections, are very well known. It would not be an exaggeration to say that almost every examiner for a medical examination receives the 'numbers' of candidates from his professional colleagues. What that examiner chooses to do with these numbers may vary but there have been umpteen examples of children of either doctors or politicians benefiting from favouritism in medical exams. In fact in the early '80s, a chief minister of Maharashtra had to resign after he was found to have influenced an examiner to tamper with the marks obtained by his daughter in a postgraduate medical examination in Mumbai University.

There is a rather cynical (or practical?) view on this phenomenon, which states that all this is just a reflection of the deteriorating values in society. Also that this happens more often in medical exams (and is reported more often in the press), as the stakes involved are high and that they're

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often are high profile students involved. This is to an extent true. But such subversion of the examination process in medical education and the fact that over the years it has been 'tolerated' by the profession to the point of complicity has had a far-reaching impact on the development of a medical student. The impression that deceit and corruption are 'routine' and the profession's rather tacit acceptance of these tendencies shape the ethical mindset of a young medical student. In the transition from a student to a practitioner these impressions remain with the result that the acceptance of unethical medical practices is in a sense 'easier'. Compromises with unethical acts in medical examinations and medical education it seems are acceptable to the profession. Then as it must be when it comes to the practice of medicine. Let's say the young doctor quickly realises that there is no peer pressure to be honest and

The development of a medical professional's ethical stance is surely an outcome of many factors. But those struggling to promote ethics in the practice of medicine could do well to sometimes turn their attention to what is happening in our medical colleges where the minds of our future doctors are being shaped. With the overall retreat of 'idealism' and 'ideology' from campuses and with the increased acceptance of money as a determinant of success in the profession this is now a complex task. For one it could involve projecting alternative models of 'success' to our younger colleagues. Surely not an easy job in the era of dominance of style over substance.

As for the paper leak scam and other such incidents exemplary punishment for the culprits is still necessary. Rather than waiting for state agencies like the police to complete their investigation (if it happens at all) medical organizations could initiate steps to isolate those under a cloud and reiterate clearly and loudly their opposition to such acts.

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