

## Disease–choose lifespan: Annual plan–a health problem and medical education

D.N. Sinha

Formerly Professor & Head of Anatomy, Govt. Medical College Haldwani, Uttarakhand

Email: drdnsinha@hotmail.com

### Abstract

Recent trend of encroachment of Medical Education by the corporate sector and to make this system more service provider, will be costly affair in the process of delivering of Medical services to the community at large. No doubt some changes in pattern of Medical Education may take place as per the demand of Corporate.

In view of this, the medical education will become more costly & technological dependent. This will certainly cause erosion in the fundamental subjects of the medical sciences. Age old conventional pattern of the medical education may be lost in due course Fragmental approach in Medical education will be detrimental for the future development of this science. To retain its identity as more humanitarian for the purpose of service to ailing will be future challenge for the Medical Educationist.

**Keywords:** Medical, Education, Corporate Patient, Treatment

### Introduction

When I saw this above citation in the news paper in relation to the advertisement, I decided to write my personal observations seeing this business model related to the vital problems of the life. This clearly indicates the intension of corporate world not to eliminate the disease, but to keep it alive for the alternate source of economic reform and gain in this health sectors.

Recent observation of the supreme court for massive deterioration of the qualities of the Medical & health services, the court appointed a committee to recommend for its remedial measures & further to improve the existing situations. We are fully aware, that nothing could be improved, even by any means. Human being will remain close to the disease through out the in symbiosis of give & take for keeping the continuity of the life. I do not expect much from the committee's recommendation. However, one should be optimistic for future betterment.

When annual budget is prepared, a good amount of consultation is done with big business people who are themselves running at the pleasure of the Government. However, the poor who is affected will never be consulted. We know what happens after that, poor remains poor & rich goes at the higher level. It is phenomenal observation, however similar situation is likely to be met by the recommendation of this committee. Politicians play important role in framing the policies in health sectors. Moreover Corporate equally involves in this affair.

Something will be implimented & the rest will remain the same & finally it will roll back to the original position. Which we have observed since independence. Primary education is also facing the problem. Majorities of the institution are runned by private people. Govt role is like regulator compromising the qualities & need of the people for tomorrow. Unemployment is going to be a burning

problem in due course of the time due to the defective unorganised system of education has caused more social & economic problems. Its impact will more towards the health of the nation. Medical and health management will continue to be a big concerned. We have divided people into two visible compartments. The rich and the poor, how could they equally participate in national growth, once the apathy and disappointment is associated with poor sections. The nation cannot prosper even with presence of any plan to do in existing circumstances. Corporate hospitals are every where but who will be treated, only those who have bank balance & insurance to pay huge amount for the treatments. The other section will have to remain running at the blessings of the Almighty. This has imposed again several questions, which is needed to be answered and will remain visible through out in our efforts in future too.

Here I am more concerned with medical & health but it may not remain a separate issue at large. When I go back to the history of ancient medicine, some pertinent components of the facts could be observed in relation of the medical education. Medical Profession could not be profitable, since it is associated with the suffering of the people. It should not be subjected to the business affairs. It is biological science, associated with the survival of the individual. In this system more human angle like sympathy honesty, devotion & knowledge, do play important substantial role in eliminating the disease & provide relief to the sick. In this way best possible care & cure could be delibered to the people at large.

If people want to be profitable medical system, you have to think about its privatisation leading towards corporate sectors. It will be dealing with the ailing patient against praying of Hippocratic oath. It will be also against concept of updating & continuing Medical Education which require regularly because we have not yet fully learned the disease process and its mechanism

& finally management of patient care & cure. Our Research & development programme depend upon imported knowledge of the outside world. As long we will be based upon the imported technology & expertise the treatment will be very costly & the popular government will withdraw its hand for financial support & thus it is bound to go in the hands of corporate sectors, where entire medical & health delivery will be marketed in various packaging forms. Body illness cannot be subjected in the form of packaging for the purpose of treatments. Body is one representing various organ & system in one identity. No separation of its problem is possible because there is one brain & one heart. We have not been advanced as yet awaiting several hypothesis of the working condition of the body even after the advent of technology. If you look to the MIMS, CIMS, its half of the weight carries the adverse side effects etc. this indicated nothing safe has been yet documented for the purpose of the treatment. Doctors are frequently vulnerable to litigation in view of the existing knowledge. Genetic dominance & environmental conditions changes the picture of the disease manifestation. As yet we have not been able to isolate a single cause for the various problems. We do not hesitate to describe often as a multifactorial problems & when we do not reach, we often take help of the genetic factors to escape from the explanation in medical sciences. In India every big hospital claims that these conduct research work, but in reality, we are far behind & hide our self in the eyes of the people who are to be given life from this corporate medical world. Life cannot be protected in packaging of the corporate world. It requires sympathy, honesty, devotion in delivering the medical care with full coverage of the humanity. Life originated from the struggle of various creatures, who have passed through various mutations, finally to say evolved. How one can enjoy the health plan in a situation when uncertainty is still awaited in the form of correct hypothesis for the understanding of the disease conditions, its care & cure.

### Appraisal

In view of the change in the pattern of health delivery system as modified by the corporatisation, the medical education needs further redressal otherwise the basic concept of the health care as advocated by Hippocrates oath will be lost forever. Therefore, the conventional teaching must be strengthened without losing the process of traditional way of the learning of medical education.

The intake and admission process must be fare so called transparent. Only eligible students should be allowed to pursue the course of medical education. Students who are psychologically well & have a social background should be screened for this course. In other words, they should have an idea of social system of life and are to be disciplined. The duration is very short and

therefore they have to learn much from this big medical course, although learning is continuous process.<sup>(2)</sup>

The learning must be very close to the patient so as to acquire more knowledge of patient behaviour during the hospitalization/ at the out-door treatment. These are more needed to be understood to maintain the peaceful atmosphere of the hospital, where tolerance & generosity demands much more and also demand modesty & sympathy. Otherwise frequent litigation & hospital violence could be seen and often becomes the news headings. People engaged in the legal system has also considered this as service provider as the other services are taxed & so it could be more a matter of consumer forum litigation. Therefore, the technical knowledge of medical professional & skill must be well read before the practice of art of medicine.

Emphasis should be given to basic and foundation subjects to make a good & firm platform to erect a good super structure for the development of medical science.<sup>(1)</sup>

A team of the good teachers who have devotion for the service & teaching having more practical approach should be made available for the creation of talented medical graduates. Practical training to deal the critical cases at the remote places, and which could be easily be manageable with low cost strategy by these medical personals, especially where facilities are not upto the mark. It is observed that only those medical graduates, who have devotional attitude, could do better in these circumstances.

The post graduate admission test should be done just after the final professional MBBS Examinations, so that the period of Internship should not be waste & must be utilized for better practical training. Which often been utilized for the preparation of P.G. entrance examination. This gives a great burden to the departments where they are posted & do not keen at all for any work except P.G. preparation. This practice is coming since long need immediate attention to improve the process.

There should not be difference between clinical & non clinical subjects. All are equal in participation for the service of the patient & humanity. All the subjects should be given equal status and opportunity to grow & develop for the uplift of the services at their own level.

If any change is going to be made in curriculum and syllabus, the actual teachers must be invited for the task & the changes which are going to be done, must be written in black & white with specific reasons, so that in future, it could be easily reviewed while further planning in curriculum. While making committees for planning in medical education, only teachers those who have rendered teaching day & night in imparting education, should be invited. There will be no use of inviting nearby teachers to complete the task. If this practice will be applied, than atleast real reform will be in your hand. Otherwise it will be entirely an ornamental exercise without any positive outcome.

Since we are committed for the ailing & being a pious Medical profession service, the patient should not be considered as cyber material, otherwise the efforts will be subjected to computer domain & search systems. These equipment's should be used to assist the process of working for the patient care. We should not be entirely technologically dependent.

Human being is living structure, it has got its own aging process, dependent upon the genetic makeup & other in symbiosis with microbes. It needs continuous investigation. Microbes suffer from the complexity due to evolution, human structure dominates. The environmental factors frequently changes, brings changes in chromosomes & some time mutation may takes place. While designing the medical education, a wide range of such problems needs to be discussed and implemented accordingly.

I would like to share my experience, about what is going on these days. During an inspection an assessor of MCI came to Anatomy department and asked me to show the computer lab as desired by MCI. It was amazing that he did not give much importance to Cadavers & dissection hall. This is utter surprise that how people have forgotten the Cadaveric Anatomy & its importance. Computer lab has now been considered more vital. Do you think, is it possible to advance a subject in view of the criteria of inspection methodology for the knowledge of Anatomy?

Drug toxicity is immense. It kills the microbes, but also give harm to the body tissues. This needs attention while educating for the treatment for the illness. Research activities should be enhanced to deal with the incompatibility in these areas. Otherwise drugs will become best possible killer to the patient. It is being indiscriminately used without knowledge, thus will destroy the learning & practice of medical sciences in true spirit of applicability of the treatment.

Our efforts should be to find out the newer ideas without losing the perception of the good mind & humanity. Both are the ultimate wisdom of scientific quest. Disease has got no cast, religion & often does not differentiate poor & rich, however, attracts sympathy & kindness for its cure. Majority of our problem is at genetic level & only 20% are amicable, to our effort and are environmental in nature which requires to be modified for the benefit of the patient. Genetic manipulation would be more academic in nature.

Medical education should be vital, close to the patient and only for the patient who could be treated by the sympathetic hand & humanity, besides use of modern technology. Ancient history of medicine is still important to study while planning the medical education. We can get extensive information for better path in this direction. However, Improvement is a continuous process.

## Conclusion

Any step which will be in favour of uplifting status & glory of Medical Education within the ethical spirit will be welcomed.

However, the basic conventional pattern of teaching needs further strengthen. After obtaining the appropriate training in medical subjects, the graduate & post graduate & even specialist, how they interact with the corporate sectors is not our concern, but they have to insure that the ethical characteristics of this profession may not be disorganised.

Otherwise poor will be deprived of services. Comprehensiveness is more needed in the subject understanding for the progress of the medical education in future. Irrespective how they utilize the technology. Again, the treatment should be affordable to the masses.

## Reference

1. Sinha D.N. (2016) Present outlook of Anatomy in Medical Education IJCAP, Vol. 3, Issue 3, 250-252.
2. Sinha D.N. (1986) Anatomy in its recent perspective. IJME, 25(2)1-3.