Destination at distance: manufacture of doctors with defects

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It is well said that the “clinician by examination treating diseased or injured save life alleviate pain and minimized the suffering but forensic medicine experts by the proper examination, reporting and deposition of evidence solves social problems, repairs the society to say treats whole society”. Hence it is more important for the medical graduates to have basic knowledge of life saving measures and statutory duties of informing nearest police station, issuing certificate, conducting medico legal post mortem examination if summoned depose the evidence in honorable court of law.

The broad goal of teaching forensic medicine to undergraduate students is to produce doctors who are well informed and capable of making observations and inferring conclusion, by logical deductions, to set enquires on the right track in criminal matters / medico legal cases. This requires knowledge of the law in relation to medical practice and medical negligence and respect for medical ethics [1].

This is the only subject which imparts basic knowledge in medical emergencies, life saving measures, proper documentation and statutory duties of informing nearest police station, issuing certificate conduct medico legal post mortem examination, if summoned depose the evidence in honorable court of law. Which is done by Forensic Medicine and Toxicology during four and half years MBBS course.

Medical council of India has the responsibility of maintaining the standards of medical education in the country, several amendment have been suggested and implemented, based on the need for the existing regulation regarding the medical education [2].

Unfortunately ......

Proceeding by then BOG in the year 2010-11 which is brought out draft name VISION-2015 as a sincere effort by the MCI to improve the quality of medical education in India [3] & with objective of manufacturing doctors more in number, in short possible time by increasing medical seat in the existing colleges and starting new medical colleges, for which only hurdle to start new college was, inadequate number of teaching faculty in the subjects like, Forensic medicine, Dermatology, ENT, Radiology etc., the idea mooted was to reduce the required faculty members 1-2-3 for 100 admission to 1-1-2 which ultimately now it is 1-1-1.

At the same time ethics and legal medicine which is apart of Forensic Medicine has been suggested as an elective subject for Indian Medical Graduates [3]. However, in the whole world various sub specialties of Forensic Medicine are developed functioning independently Eg: Forensic odontology, Forensic Anthropology, Forensic Psychiatry, Forensic Pathology, Medical Toxicology, Forensic nursing etc. Where as in India, policies are being generated to reduce or eliminate the teaching of Forensic Medicine at graduate level [3].

Now a days in our country there is a growing public awareness regarding the ethical conduct of medical practitioners and complain against physicians, appears to be escalating the changing doctor – patient relationship and commercialization of modern medical practice has affected the practice of medicine. Patient suspects negligence as a cause of their
suffering. There is an increasing trend of medical litigation by unsatisfied patients [4]. The recent increase in litigation against doctors is an issue of immediate concern [5]. The reasons for these are social, economic, professional and judicial. Social factors includes increasing media awareness about medical facts and fallacies professional accountability decision making and assessing outcome. Negative publicity in the media about the profession has done further damage moreover, doctor-patient confrontation have been increasing in recent past [4].

However many undergraduates and practicing doctors are not very confident about performing routine medico legal duties. Further the bulk of medico legal work is done by government medical officers who do not have post graduation in Forensic Medicine. Majority of doctors are always afraid of dealing with medico legal cases and appearing in court that is the reason that they shun the medico legal work. Those fearful doctors will never be able to teach Forensic Medicine in the right sense and this can be done best by the forensic medicine experts only [3]. A quality of medico legal work cannot be expected from such pseudo experts [6].

It is thus all the more necessary to train under graduate in more integrated manner so that they can execute quality medico legal work that would be invaluable in dispensation of justice [1]. Along with the poor quality curriculum content, out dated text books and reference material and lack of bedside practical teaching of medico legal cases [6]. There is an urgent need for thorough revision of text book and reference materials in forensic medicine to incorporate these aspects [7]. When we are talking about need based curriculum but we totally forgetting the need of the society as far as Forensic Medicine is concerned [3]. Instead of taking steps to cater the needs of the 21st century by modernizing the different field we are just ignoring the fields like Forensic Medicine which affects the society in a unique way [3].

We need the committed efforts of all doctors in this profession to meet the expectation of society [1]. To double the doctors by 2021 which is a welcoming idea but with this, we may take care on aspect of the one problem, which will lead to another bigger problem [3]. That means union health ministry was planning to manufacture doctors with multiple defects or better say handicap doctors. This move by MCI BOG made whole medical fraternity to respond by agitation, memorandum submission even filling PIL in honorable court as last resort. This agitation made BOG to respond by calling experts to reframe the integrated teaching curriculum in these subjects results was overwhelming response by subject experts who drafted the curriculum, then BOG occupied and approved the curriculum and sent it to Union Health Ministry for Gazette notification in the form of GME 2012.

Since then the draft was with immediate past Union Health Ministry now with new Union Government where in new Union Health Minister has taken over the charge hope GME-2012 will start breathing once again. If at al BOG was successful in implementing VISION-2015 most / none of the student would have opted Forensic Medicine, day would have come untrained doctors to examine / issue certificate without any knowledge of medico legal aspect. Failure to collect proper material evidence expert opinion is essential to prove the guilt unlike western countries, where in medical examination system is prevailing high conviction rates, less number of crimes are encountered to our country.

Ultimately in nut shell clinical medico legal work or medico legal autopsies work development is neither concerned to Home Ministry nor Health Ministry nether department of prosecution. All of them are behaving not a work of their department. Ultimately it is department of prosecution is one of the concerned by presenting fact to honorable court. There are recommendation by Medical Council India (MCI). National Human Right Commission (NHRC) & Beuro of Police Research and Development (BPRD) as to medico legal work and mortuaries for their up gradation, modernization & utilization of Medico Legal experts.

There has been a lot of resentment in the fraternity of forensic medicine over the proposed changes in the VISION-2015 of MCI. A lot of criticism has emanated in the various groups on the net like
forensicwayout@yahoogroups.com [8], forensics@facebook.com [9], quality_of_medical_education@yahoogroups.com [10] and others. Many organization have done press conference against this move and met the minister in their respective states. Hundreds of emails have been sent to IAFM, ICFMT, IST, PAFMAT and others organizations on February 5, 2011 most of the experts of Forensic Medicine wore black badges all over India in protest against this move of MCI [11]. Even medical students and other doctors protested all over India including Mumbai [12].

To conclude- what if charge sheet is made without proper witness, material evidence or opinions? after all the medico legal work whose concern it is ?? . A day will come where in, our dead body may be examined / cut under existing ill equipped mortuary by ill trained or un trained medical practitioners ( a bitter truth).

References

2. D’Souza D. Reduction in the required number of faculty of forensic medicine in medical colleges of India. Webmed Central Forensic Medicine 2010; 1(12): WMC001298.

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