

Practicing scientific and ethical medicine

The scientific programme of the 16th international psychiatric conference also included pre conference symposia on Communication Skills in diagnosis and management of depression. The facilitators included visiting consultant psychiatrists from UK i.e. Prof. Linda Gask and Dr. Waquas Waheed. During the discussion it was rather surprising to know when one of the participants sitting in the front rows remarked that "he actively discourages patients to read the leaflet in the drug pack. Not only that but he does not inform the patients fully about the likely side effects of the medication being prescribed." The reason which he gave was that if the patients are told all this in detail, they will get frightened and might go to some other doctor. At this Dr. Waquas Waheed remarked that "my friend you might get away with this in Pakistan but he cannot in UK where there is strict monitoring and accountability. If you are doing so, you are not practicing ethical scientific medicine".

It is unfortunate that we do not have any regular CME programmes for the healthcare professionals and there is no monitoring, accountability with the result that many of them work just like glorified quacks. It is a sin and a crime to practice medicine keeping the patients in the dark.

The healthcare professionals in Pakistan must remember that Patients do have their rights. They must be involved in final decision making regarding management of the disease they are suffering from. They deserve a patient hearing of their complaints and they should be fully informed of the likely side effects of the drugs they are prescribed. All the drug companies by law are required to insert leaflets in their drug packs which are printed in English as well as Urdu language so that the patient can read them easily. Discouraging the patients to read these detailed information is no service to these patients. It cannot be termed as scientific and ethical medical practice either.

Patient's satisfaction with the consultation is an important aspect. If the treating physician provides all the detailed information to the patient including the likely side effects of the drugs, answers their queries if any, it increases the chances of their compliance with drug therapy. Anti-depressants in particular usually take a few days to weeks to show their effects and one cannot expect miracle effect the next day. This has to be told to the patients before hand so that they do not discontinue drug treatment and keep on taking the drugs as advised by the physician. Not only that, patient also has a right to know any alternate modality of treatment along with likely cost. Just discouraging the patient to read drug leaflet or failing to provide him enough information about likely side effects is a practice which needs to be condemned and done away with. This episode also highlights the importance of continuing medical education of our healthcare professionals so that they can update themselves and remain fully

informed of the latest developments so that they can uphold professional ethics while practicing medicine. Dr. Waqas did the right thing to point out that the questioner was not right in his approach and what he was practicing was not scientific ethical medicine. There may be many more like him who need to change their attitude and practice.

One of the important reasons for quackery flourishing in Pakistan is that the doctors do not spend adequate time with the patients, do not listen to their complaints patiently and keep on dishing out prescriptions. An unsatisfied patient then at times keeps on changing the doctor. It is also high time that we start re-certification of the healthcare professionals to ensure that they are competent and qualified to practice medicine. To begin with it can be voluntary linked with some CME credit hours and then made compulsory after every five years or so. This will go a long way in checking such unethical practices.

(January 1, 2007)

The forgotten concept of side room Ward laboratory

A doctor is supposed to be fully qualified medical personnel who can take care of a patient independently under all situations prevailing in the country. To achieve this objective it is essential that we must have an undergraduate training programme which is comprehensive, objective oriented and incorporates all medical and social disciplines necessary for the patient care. At the time he qualifies, he or she is supposed to have knowledge, skills and attitudes to achieve this objective. He or she must also be interested in continuous professional development to keep themselves abreast of latest developments in medicine. However, the undergraduate training programme that we have these days falls short of much to be desired.

Side room laboratories in the wards have been an age old tradition in well established hospitals in general and teaching hospitals in particular. Here students and house officers used to perform relevant simple laboratory tests as part of their patient write-up and for the purpose of early and efficient management of hospitalized patients. According to Prof. Mahmood Ali Malik an eminent educationist and diabetologist of the country who retired as Professor of Medicine and Principal of King Edward Medical

College Lahore, when he was a medical student in late 50s they used to assist in all routine ward investigations like passing NG tube, catheterization, aspiration of pleural and peritoneal effusion besides performing biopsies. We used to make patient beds along with the nurses. The side room laboratory in East Medical Ward at Mayo Hospital Lahore had facilities for the students to do basic tests like hemoglobin, ESR, urine analysis, stool examination, CSF, sputum for AFB, blood for MP etc. To be sure some of the tests were also sent to the main laboratory to confirm the findings of the side room labs. No body was reluctant to do emergency and night duties as it provided opportunities for learning.

All this now looks like a dream as neither most of the teachers are interested or have time to teach and train nor the students and house officers are interested in learning. Now starting from house officers to postgraduates in the wards to teachers all are ever ready to ask for too many investigations some of which are absolutely not necessary which at times increase the cost of care tremendously. What is more surprising is the fact that most often these investigations are asked from the private labs instead of the hospital labs which are supposed to be offering state of the art investigations. The old medical graduates who settled in General Practice used to set up a small lab in their clinics where facilities for relevant simple chemistry and other tests were possible. Now the private laboratories operating on commercial basis provide printed list of tests which the healthcare professionals just tick, at times too many. This commercialization has also given birth to too many unethical practices. The General Practitioners/

Family Physicians in the old days were much better educated, trained than the present lot that is why the newer generation of healthcare professionals cannot practice with confidence. We need to bring back the concept of these side room ward labs to make up some of these deficiencies.

Prof. Mahmood Ali Malik is busy writing a Manual of Side Room Laboratory and interpretation of laboratory reports. In a recent meeting he informed me that this manual will cover different areas ranging from Haematology through liver function test, urinalysis, CSF analysis sputum and relevant simple biochemistry. It is hoped that this manual will provide skills that a doctor must possess at the time of graduation. It could also prove to be extremely useful and helpful for the medical students, young doctors and general practitioners.

Laboratory investigations Prof. Mahmood Ali Malik opines are an integral part of the process of diagnosis and management of the patient but it should always be carried out after thorough clinical evaluation of the patient and in the light of provisional diagnosis. This is the only way whereby we can reduce the work burden of laboratories and financial burden on the patient. Laboratory investigations, Prof. Mahmood Ali Malik says are carried out with the objective of confirming a clinical diagnosis, to rule out a diagnosis, to monitor therapy, to monitor toxic effects of therapy and to screen for diseases. Laboratory investigations should always be requested by the healthcare professionals in the light of clinical diagnosis and every investigation asked for must be justified. It is important

that one just writes down the name of the test rather than ticking the printed form provided by hospitals and the labs. Other principles which should be kept in mind while asking for investigations are that one must start by ordering basic and economical investigations and then proceed to more elaborate tests. One should order investigations which are sensitive and specific keeping in mind the concept of key investigations for certain diseases. It is important to avoid using the term "Complete or Routine examinations". Instead one must spell out exactly what is required.

Every teaching hospital, he maintains, should have a functioning side room ward lab where basic laboratory tests should be carried by medical students and trainee doctors like ESR blood counts and urine tests. This provides facilities to medical students for the spot diagnosis and quick management besides providing training opportunities to the junior medical staff and medical students. All investigations being performed in the side room labs also require careful quality control because if this is not ensured, serious errors can occur in the results and consequently in patient management. It is also essential that doctors posted in the Wards and technicians are competent in performing these tests. Collection of sample by properly trained person, doctor, a trained nurse and specially trained technician is important. Requirements of various tests should be fully known to doctors, nurses and technicians taking the sample and regular refresher courses should be organized to update them. Amount and time of sample collection should be appropriate and must also be mentioned on the request form. Above all do mention a short history and provisional diagnosis on the request form.

All this is part of ethical scientific medical practice which unfortunately is no more practiced by a vast majority of our healthcare professionals. It is the duty of peers, senior physicians to keep on highlighting basic principles, requirements of ethical medical practice while hospital management should also give it a serious thought.

(January 15, 2007)

Dollarization of Pakistan economy, pharma industry and dangerous signals

After attending the cardiology conference at Islamabad last month, before returning to Karachi I wanted to meet a friend, a senior faculty member in one of the army medical institution to discuss the programme of a conference we intend to organize shortly. As the time was short and my other friend had to catch a flight to Lahore and it was also raining, we decided to meet at Marriot Hotel lobby. When he came we just thought to have a cup of tea at Nadia Coffee shop, hence we ordered two tea, a coffee and a small bottle of mineral water. When the bill came I could not believe it. I asked the waiter and enquired to which he said the bill is OK. A cup of coffee cost Rs.180/- a cup of tea Rs.170/- and the small bottle of mineral water available in the market for Rs.12/- was charged at Rs.120/- plus the usual taxes. Eventually after paying the tip, we ended up paying Rs. 900/- for having tea for three persons, something which I still cannot believe. Before leaving the hotel, I asked at the Reception to which the reply was that this hotel is mostly used by the foreigners and government officials who do not mind paying Rs.180/- for a cup of coffee as it is less than three US dollars.

Ever since the induction of Mr. Shaukat Aziz first as finance minister and then his elevation as Prime Minister he is doing exceptionally well protecting and promoting the interests of the affluent class to which he belongs. As regards the common man, let them go to hell. During this period we have seen monopolies and cartels being strengthened in the field of cement, oil industry, sugar and Banks in Pakistan are reported to be earning highest profit in the world and they do not care passing on some of the benefit to the depositors. Poverty has increased tremendously, prices of every day use including eatables are skyrocketing, people are forced to commit suicide but nothing has moved the rulers. If now we have to pay Rs. 32/- or Rs. 34/- for a liter of milk, we should not worry it is still less than a dollar. Hotel industry is mainly monopolized by a community which is serving the interests of Americans in Pakistan. They have increased hotel room rates from US\$ 60/- per night a few years ago to US\$ 250-300/- per night. The government of United States has also given lot of funding to this community to promote secularism, establish secular schools and other educational institutions and bring about a change in our education curriculum. So no body can touch them. No political government who has to go back to the people would have ever allowed so much inflation. And if we continued to have uniformed democracy with imported chief executives, it should not be surprising to see if these cartels grow from strength to strength. Imagine in a country where the minimum wages are Rs. 4,000/- per month but in the same country the affluent class can afford to spend a night in a Five Star Hotel which costs between Rs.12, 000/- to Rs. 16,000/- This ever widening gap

between the rich and the poor is certainly alarming which will eventually push this country towards a revolution. Students of history know that in such circumstances, one can delay or postpone the day of revolution but then a day comes when fed up, the people stand up and the rulers have to face the music. I often criticize the pharma industry of Pakistan holding their meetings overseas. Recently when one of the senior executives of a multinational told me that they are going to have their sales conference in Bangkok, I asked him why don't you hold the meeting in Pakistan? His reply was an eye opener. He disclosed that holding a sales conference of the company in Dubai or Bangkok is much more economical with much better facilities than holding a meeting in Pakistan because all the big hotels have increased their charges manifold. We are commercial concerns and we will definitely like to save whatever we can. That is why we decided to hold the meeting in Bangkok. And then we hear our Prime Minister that the government wishes to attract tourist to Pakistan. Recently I was in Iran and it was news to me when I learned that the hotel charges for locals are much less as compared to the foreigners. But then Iran has a popular democratically elected leadership who takes care of the interest of people of Iran rather than the business mafias and foreign multinationals which is not the case in Pakistan. Mr. Shaukat Aziz perhaps do not know that people in Pakistan get their salary and remuneration in Pak rupees and not in US dollars. Let Mr. Shaukat Aziz and General Parvez Musharraf make a budget of an average four member family whose earning is rupees four to five thousand per month and they will know the bitter facts. In fact those living in Islamabad do not

know the feelings of people of Pakistan. If we have a democratically elected government, we won't have to spend these billions of rupees on the security of our "*popular leaders*". The money thus saved, can be spent to improve social services.

Earlier at the cardiology conference a very senior cardiac physician from NWFP who enjoys tremendous respect in the medical profession came to me and said "people of Punjab have to take a final decision. First it was the Punjabi bureaucracy and Punjab dominated army which killed Bengalis and the result was creation of Bangladesh. We lost half the country. Now the army is killing Pushtuns and Baloch. Do the people of Punjab wish to get rid of us as well? Army could not have done all this except the support of Punjab and then he reminded me that it is only the Punjab Assembly which has passed a resolution in favour of having a uniformed President. All other provincial assemblies have passed resolutions against a President in uniform ". For a while I was at a loss how to respond and then I told him that I respect his sentiments. I myself stand for pure democracy and so is the case with a vast majority of people of Punjab except a group of opportunist elements and power hungry politicians. Members of the medical profession belong to a very intelligent class and if they get affected to such an extent, it is a dangerous signal for the integrity of Pakistan. Former Chief Justice of Supreme Court of Pakistan S. Sajjad Ali Shah has often in TV interviews alleged that it were the Supreme Court judges who belonged to Punjab who upheld the death sentence of former Prime Minister Mr. Z.A. Bhutto to please President General Ziaul Haque while the judges who

belong to other provinces wrote a dissenting note in the final Judgment. We often hear that the case can be re-opened. There are often debates on the electronic media as to the mistakes we committed in the former East Pakistan but our rulers have not learnt any lesson. Bhutto is considered a martyr by people of Sindh and despite so many years, the country still continues to pay a price in the form of political instability. We never have had a stable political government in the province of Sindh in particular. Killing of Sardar Nawab Mohammad Akbar Bugti has given a martyr to the people of Balochistan. Now Bomb blasts, ripping through of Gas pipeline, destroying electric towers and railways tracks goes on from time to time. There is tremendous resentment among the Baloch. Many patients from Balochistan come to Karachi to seek specialized care since facilities in their own province are lacking. Talking to various consultants in Karachi revealed that now these Baloch patients give a different look. It is not difficult to see blood in their eyes and frustration, hatred is very much visible on their faces. The successive governments have all promised provincial autonomy to the provinces but in reality nothing has been done. Is it not a pity that the Government of NWFP has to knock at the doors of Supreme Court of Pakistan to demand its due share of royalty from power generation from WAPDA? Balochistan is rich in natural resources. Government has earned billions of rupees for the last so many years from Sui Gas alone but it has not helped improve social infrastructure in Balochistan. The people of Balochistan rightly feel that the successive rulers have tried to capitalize on the natural resources of their province without paying them the due royalty.

Supreme Court of Pakistan has itself taken notice and ordered cancellation of all land allotments in Gwadar. A careful look at the list of those who have got land in and around Gwadar allotted will reveal that the Baloch have genuine grievances. Why the Government of Balochistan should not have the control of Gwadar Port? People of Balochistan are as patriotic as people living in any other province of Pakistan. They are brave and demand their rights not charity. People of Balochistan need schools, colleges, hospitals and development of other social infrastructure and not cantonments. Similarly the situation in the tribal areas adjoining Afghanistan is also frightening. History is a witness that brave Afghans have never accepted any occupation. They will continue their resistance and as the death toll among occupying NATO forces rise, they will keep on blaming Pakistan. What is most distressing is the fact that we seem to have lost our national sovereignty. Now even non-entity leaders of India and even of Afghanistan keep on issuing threatening statements against Pakistan to hide their inefficiency to fight the resurgent Taliban. Pakistan is fighting the American War knowing fully well that Americans have a history of betrayels. America can be a friend of Muslim rulers but it cannot be a friend of Muslims. Pakistan's beloved armed forces have lost many personnel in the fight in tribal areas but even then our rulers have failed to satisfy the Americans who keep on ordering "*Do More*". What is going to happen? Pakistan cannot afford another C-Section, hence it is the duty of every patriotic Pakistani to condemn and protest against the ongoing military action in Balochistan. Government cannot win the heart and mind of people of Balochistan by

using Gunship helicopters. If killing of Nawab Bugti a former Governor and Chief Minister of Balochistan was not enough, now another former Chief Minister Sardar Akhtar Mengal, it was alleged by representative of Human Rights Commission of Pakistan, is being kept in an iron cage and he is being tried in Karachi Jail. Cases have also been registered against the grandson of late Nawab Akbar Bugti thus taking this fight to the third generation. Political problems need political solution and the sooner our rulers realize this, better it will be.

(February 1, 2007)

The Tee Cee Session!

The "*Tee Cee sessions*" (I leave it to the imagination of the readers what it stands for) have become an important part of medical conferences, seminar and symposia these days. These are also called as inaugural sessions. In case the organizers of these academic activities and hosts are government servants, public healthcare institutions, for them this is the most important session on which depends the success and failure of these activities.

In case a government functionary or VIP, VVIP is invited to be the chief guest in these sessions, the organizers waste lot of precious time which may be from few days to few weeks or months in finalizing the formalities, protocol arrangements and so on, hence they do not give much importance, time to the scientific programme which usually gets affected. In case these VIPs cannot make it and do not turn up, refuse, decline to be present at the last minute, it sabotages the whole programme.

An important hall mark of these sessions is that in case the chief guest is government functionary, the session usually starts late, there is absolutely no regard for time management, hence the following sessions all get delayed seriously disrupting the whole programme. One of the most important highlight of these sessions is that in case the chief organizer, head of the institution sponsoring,

organizing such activities is just close to retirement or already on extension, they cross all limits in flattery and buttering which at times is also embarrassing for the chief guest. The objective is obvious, to get extension, further extension in service or securing the job. Speaker after speaker from the organizers in this session will start and end their sermons with praising the chief guest how interested he or she is in the subject of health and how the chief guest managed to take out some time out of the busy schedule and their presence shows their commitment and so on. The organizers can seldom make a difference what is meant by welcome address, key note speech and the vote of thanks as it becomes a duty for all these speakers to praise the government of the day in general, rulers and the chief guest in particular. They will start and finish their speech on this same note confirming that they are members of the *"Praise Singers Club"*.

When the chief guest is invited to address the audience, he or she will tell lies and make false promises knowing fully well that these will never be fulfilled. However, the most important thing in these sessions is that the host, organizers as well as the chief guest both knows that they are not serious in whatever they are saying and both try to befool each other using all the available superlatives found in the dictionary. The participants are seldom any wiser after attending these sessions as the speeches made on these occasions most often add nothing to their knowledge. I myself hate to attend these "Tee Cee Sessions" but at times one has to be around as a professional hazard. My experience spread over forty years shows that the quality of all such medical conferences, seminar and symposia which are formally inaugurated by these VIPs it not so good but I

must add exceptions are always there and exceptions do not make a rule.

On the contrary if the organizers of these conferences, office bearers of these professional specialty organizations organizing such activities are from the private sector or the host institution, organization is not from the public sector, they usually invite some eminent research scientist, medical educationist, distinguished member of the medical profession or some respectable senior from their own field of specialization as a chief guest to grace the occasion. The inaugural session starts in time, ends in time and the organizers have enough time to concentrate on scientific programme with the result that it provides a rich informative, educational retreat. It truly fulfills the need of continued professional development, continuing medical education and the participants learn a lot sharing their knowledge and experience with their colleagues. The participants are also saved from botheration and punishment of listening to buttering and flattery of all kind. It is these kinds of medical conferences, seminars, symposia which attract good attendance during the scientific sessions.

Yet there is another misconception. It is not at all necessary that the compeer of these sessions has to be an attractive young female. Most often they mess up everything. One needs competent people to conduct such a programme whether it is male or female is immaterial. More recently at such a function organized at a healthcare facility, the organizers invited a representative from the showbiz to be the host. He looked like an armature joker the way he conducted the programme. He started by praising the chief guest for couple of minutes and then kept on

requesting the audience again and again to clap to show their appreciation for the chief guest. Then after each speaker, he will praise the chief guest for a few minutes making a mini speech and then again request the audience to put their hands together for the chief guest. It went on and on with the result that it spoiled the sanctity of the programme. People from the showbiz can conduct musical programmes or cultural shows. They are ignorant about the sanctity of scientific and medical programmes; hence they must be kept at a safe distance. We see an overall deterioration in our society, hence medical profession is no exception but even then they are capable of finding competent people from amongst the healthcare professionals to conduct such programmes. I wish and pray that most of the organizers of such academic activities show professional maturity, come out of this hypocrisy and start concentrating on academics.

Tail-Piece: A senior healthcare professional who went to perform Hajj last year which was also known as Hajj -e- Akbar 2006, says that the Imam of Kabba in his Hajj Khutba declared that the so called Roshan Khiali being promoted in the Muslim world these days was against Islam. Hence when the Hujjaj went for performing one of the important rituals throwing small stones on the Sattans, they named the bigger Sattan as George Bush, the next one was named as Tony Blair and the third and the smallest Sattan was named as "*Munna Bhahi Roshan Khial*". They named all of them when throwing these stones.

(February 15, 2007)

Public sector medical universities and their faculty

A medical college or medical university is only as good as its faculty, the impressive buildings are immaterial. However, those at the helm of affairs in the country seem to give it the least importance that is why the performance of these medical universities is not so impressive. The universities are supposed to create research and it is only possible if it has talented faculty with good academic credentials. In some cases it is the bureaucracy which creates all sort of hurdles in the selection of faculty on one pretext or the other so as to fail this experiment of establishing medical universities in the public sector since they are not willing to lose control of these institutions.

Last week a senior faculty member from a public sector medical university in Sindh province came to see me with a case report which had seven authors. When it was pointed out to him that all these seven cannot be authors, his reply was they are all my team members. Then he was told that there is a strict criteria of authorship as per guidelines of International Committee of Medical Journal Editors (ICMJE) and World Association of Medical Editors (WAME) which says that authorship credit should be based on:

1. Substantial contribution to conception and design or acquisition of data, or analysis and interpretation of data.
2. Drafting the article or revising it critically for important intellectual content.
3. Final approval of the version to be published.

All others who have helped in the study and preparation of the manuscript can be included in acknowledgment.

There were a number of other deficiencies in the manuscript as well and he was informed that it needs revision and re-writing. Not only that, it is essential that a post operative photograph should be added, he seemed to be quite unhappy. Ever since the Higher Education Commission, Pakistan Medical and Dental Council has laid down certain conditions of published papers for academic credit, selection and further promotion, many faculty members have been forced to write under compulsion, hence most often the quality of such manuscripts is highly disappointing. Even then the authors are keen to get them published as soon as possible. They show lot of impatience even during the peer review process.

During the conversation then he asked do you know there are some problems in the public sector medical universities. My reply was that since he was himself one of the faculty members, he must know much better about the state of affairs. Then I asked him don't you attend meetings of the university faculty, his reply was in affirmative. When I enquired from him whether the faculty members do not actively participate in the deliberations, his reply was "We are called to these meetings. The agenda is there

and the decisions have already been taken. We are asked to show up our hands to approve those decisions, which we do quite faithfully. Then we are offered cake and tea which we all enjoy before the meeting is finally adjourned". Quite surprised at this I asked him why you show up your hands when ordered and why don't you protest or record a dissenting note on such decisions which you and your other colleagues do not agree? He kept quiet for a while and then said "Perhaps you do not know the trend being followed these days. Any body, who reaches to the top through whatever means, believes in the doctrine of unity of command. They draw inspiration from the top. They think they are the wisest person on earth; they do not need any consultation and want the decisions to be obeyed without any questioning. Those who dare to defy this and enter into discussions, have to face the risk of being thrown out. At present, due to various reasons, not many faculty members are willing to take this risk".

This appears to be the factual situation and ground realities in many of the medical institutions. Hence unless we change this culture of "obedience", encourage dialogue and debate on all issues getting input and feed back from the faculty, nothing will change at least in public sector. The situation may be a bit better in private sector medical institutions where there is not so much red tape and often decisions are taken promptly if those in authority are convinced.

(March 1, 2007)

Failure of American Psychiatry and development of Indian private psychiatry

World Psychiatric Association's regional conference held at Lahore recently was a mega event of this specialty which attracted a large number of eminent mental healthcare professionals from all over the world. Also present were the office bearers of specialty organizations from America, Europe, and South East Asia thereby making it the largest ever attended psychiatric conference in the history of Pakistan with over two hundred foreign delegates.

The conference provided a rare opportunity to discuss various mental healthcare related issues with leading experts in this field. Discussions with American delegates revealed that there are over fifty thousand psychiatrists practicing in that country but they have failed to treat a "patient". It is thus being termed as the failure of the American Psychiatry. This patient at present appears to be "resistant to any form of therapeutic treatment modality". Whenever he opens his mouth, millions of Muslims around the world develop hatred against America. This has also alienated him from the American public as well as his current approval rating is said to be extremely low. The mental healthcare professionals all over the world are busy

healing the souls, wounds of anxiety, depression, schizophrenia, bipolar disorders and other mental ailments afflicting the humanity besides working overtime to ensure their rehabilitation back in the community. However, actions of this man are promoting wars in different parts of the world. He is also termed as the greatest international terrorist the world has ever seen in recent years. His actions has killed over six lac people and wounded millions in Iraq alone ever since the American and allied forces occupied that Muslim country on false pretext not to mention the daily killings going on in Afghanistan and many other parts of the world. Without him the World will be at peace as his actions are nullifying all the efforts of the mental healthcare professionals all over the world who are doing a commendable job of looking after the mentally ill.

Since rulers in most of the Muslim countries are afraid of their own people as they rule them against their wishes, they become easy prey to blackmail by the Western powers who then dictate them their own agenda. It has its own repercussions as real socioeconomic development in these countries is retarded, gap between the rich and the poor is widening alarmingly, elimination of poverty and good governance remains a dream. It looks as if their fate will never change and they will continue to suffer.

When I asked one of the eminent American Psychiatrists attending the WPA conference at Lahore for his comments, he pointed out that millions of Americans and people around the world have demonstrated against War as everybody wants peace. Majority of the Americans also want peace and it was very much reflected in the recent

Congress elections. There is every possibility that in the coming US Presidential elections, Republicans will be defeated. But he hastened to add that it also depends on the Democrats because they are quite capable of committing blunders and losing the race to the White House even after having won the elections.

Delegates from India revealed that private psychiatry in India has made tremendous progress. Over two thousand psychiatrists practicing in the private sector are members of the Indian Private Psychiatric Association which is very active not only providing mental healthcare but also academically. India, they stated, has a functional democracy and functional judiciary. Unlike Pakistan where about 40% of the people still live below the poverty line and economic policies of the rulers have almost eliminated the middle class, in India middle class which is always the real strength of any country is increasing. People have money and they can afford to seek private care that is why the private health sector has made phenomenal progress.

(March 15, 2007)

Basant related mortality and a Pakistani US physician's visit to a Roshan Khial family

I am neither a *Roshan Khial* nor fond of enjoying *Basant* festivities but it was just a co-incident that I was in Lahore on February 23rd to cover the international Neurosurgery course organized by Pakistan Society of Neurosurgeons in collaboration with World Federation of Neurosurgical Societies. *Basant* celebrations were in full swing the whole day and it continued till late night.

During the Neurotrauma conference held at Lahore in May 2005, Dr. Babar Butt had made a very interesting presentation on *Basant Gala*. "He pointed out that during the recent Basant Festival in two days, Lahore General Hospital received two hundred two emergencies of which 78% were male. Of these 162 victims were admitted for more than 24 hours, forty patients were kept under observation. One hundred four victims had fell from roof tops while twelve had fire arm injuries. One hundred seventy five were managed conservatively and twenty seven had to be operated upon. One hundred thirty five of these victims had full recovery, twenty had moderate disability, five severe disabilities and eight were in vegetative state. Out of twenty seven patients which were operated, twenty

two were operated in emergency and there were six immediate deaths. He further stated that now fire arm injuries were also increasing during *Basant Festival*. The one who catches the maximum number of kites during the *Basant Festival* is given the *Lutera Award*." ¹ Such presentations should open the eyes of administration but only if they have time to talk to the professionals. Many of these precious lives can be saved. The conference had recommended ban on kite flying.

However, despite Judgment of the Supreme Court of Pakistan under the directions of the now non-functional Chief Justice (sent on forced leave as stated by the government later) Justice Iftikhar Mohammad Chaudhry, the whole day this cruel game was played all over Punjab in general and Lahore in particular. The whole night intense firing was heard and it was difficult to sleep in the hotel room in view of the deafening noise of gunfire. As expected the morning newspaper had headlined news on front page "twenty deaths reported from the province including children". These deaths had taken place either by running after the kite, fall from roof tops during these celebrations or due to stray bullets fired in the air. In addition hundreds were injured many had to be hospitalized. Many families lost their dear ones which included young children and in some cases the only bread earners. However, the rulers must be happy because they had shown the world how *Roshan Khial* they are. I also had a chance meeting with a former Chief Justice of Lahore High Court who opined that "Basant used to be celebrated in the past as well but never before it was patronized at such a high level. As a reaction all such official measures are

promoting extremism and the murder of a provincial minister could be one of such reactions. I do not know why the rulers cannot think rationally. They perhaps lack even common sense and rational thinking” he remarked.

But the next day a physician friend narrated the story of a Pakistani physician settled in United States. This physician left the country twenty years ago and never returned back. What were the reasons he still refuses to divulge. Let me share with you the story of this physician. It is a well known fact that many talented Pakistanis move out to earn recognition from foreigners in order to be respected professionals in their own country. They manage and earn that overseas in the most competitive world where merit is upheld. This physician now occupies a professorial chair in one of the most famous medical universities in United States and to earn that distinction, one has to be much better than your American counterparts. This gentleman was persuaded by another Pakistani physician to visit Pakistan forgetting the bitter memories of the past and contribute something working on their philosophy of “brain circulation and cross fertilization”. So he agreed to visit Pakistan and contribute to the scientific programme. He was among the over two hundred foreign physicians visiting Pakistan those days in connection with the medical conferences. Somehow people came to know about his presence in Pakistan and many availed this opportunity to get consultation. He was invited by a *Roshan Khial* family living in the posh area of Lahore to examine a child who is suffering from mental retardation and autism. Reaching the residence of this *Roshan Khial* family, the physician was bewildered seeing the riches which were reflected

everywhere. During the last twenty years, things have changed a lot but he could not imagine all that. The sprawling palace like mansion of this affluent family had a beautiful bar. The young girls wearing attractive inviting dress were smoking and enjoying along with other family members in the presence of their parents. First they invited this physician to have a drink and when he said Thanks, "I do not drink" they did not believe it. How come you live in United States and you say you do not drink they asked to which he replied that it is not essential that every American citizen drinks. Then he was asked to examine the mentally retarded child. The family insisted that money is not a problem. They can invite him or they can come to United States as frequently as may be necessary for follow up visits. We are desperate to see that the child is cured. After taking history and thorough clinical examination, the physician told them the true clinical picture. It requires long term treatment, meticulous follow up and the chances of full recovery are not so good, he remarked. The family insisted that the physician should do whatever was possible as it was their earnest desire and wish to see the child healthy so that his physical and mental development is not affected. The physician again advised them that in such cases one has to be extremely careful, show patience and avoid taking decisions in haste. The family then asked the physician how much fee they should pay. The physician looked at them and said that he was in the city in connection with a medical conference and had no intention of indulging in consultation practice. The next offer the family made to him was they can even pay him in US dollars and also added that they would have been happy

had he joined them in drinks. The physician again thanked them and advised that they may pay this money to some charity in Pakistan. Throughout this period this physician was thinking of something else which the family members could not realize because this filthy rich affluent class of Pakistan has no moral values and cannot appreciate good intentions of others. In the next step they offered him "if you think we can also arrange a plot of land for you in Defense Housing Society or any other posh area of his choice". Perhaps this was enough and the physician lost his patience. Since he did not want to say all what he intended in front of all the family members, he asked the head of the family to come out as he had something important to discuss with him. At this all other family members, it is reported, left. Then the physician told his host that "it is people like you who are responsible for the present miserable state of affairs in Pakistan where almost 40% of its population is living below the poverty line. Increasing unemployment, he further added, has given rise to frustration, extreme helplessness, and increased prevalence of mental disorders, people are committing suicide, selling their children² since they cannot pay for treatment, have lost all hopes but members of the affluent class like you have all the wealth to enjoy. Why do not you share some of it with other citizens of this country, may be your son will also get cured." The physician was so much annoyed that he wanted to say a lot more but then decided to keep quiet as a mark of respect for his hosts and said goodbye. On return he shared his experience with some of his physician friends and opined that Pakistan will never progress and won't be a stable society unless there

is justice, equal opportunities for progress to all and this dangerous gap between the rich and the poor is eliminated before it is too late. This is possible by ensuring good governance which still remains a dream and if those in the power corridors still do not wake up, no one can stop the bloody revolution which is slowly but gradually inching towards Pakistan.

Tail Piece: I wept and could not sleep for a couple of nights in 1971 when Pakistan army surrendered to Indians and former East Pakistan became an independent state Bangladesh. It was a certainly Black Day in the history of Pakistan. Again on March 9th I could not restraint my tears and could not sleep the whole night. This was the second Black Day in Pakistan's history. How the Chief Justice of Pakistan was treated and humiliated cannot be imagined in any civilized society. May God save this country and show the right path to our rulers. *Ameen.*

(April 1, 2007)

Aspirin therapy for multi billionaire patient

Prof. Mahmood Ali Malik an eminent diabetologist and former Principal of King Edward Medical College and Dr. Maqbool H. Jafary another noted physician from Karachi were the two invited guest speakers at a seminar on Aspirin Update organized by Pakistan Aspirin Foundation at Fatima Memorial Hospital Lahore on March 26th 2007. While Dr. Maqbool H. Jafary discussed the established and emerging indications of Aspirin therapy, Prof. Mahmood Ali Malik spoke about Aspirin therapy in diabetics.

During their presentations both the speakers emphasized the importance of cost effective therapy highlighting the safety and efficacy of economically priced Aspirin the mother of all anti-platelet agents. When one of the participants asked if the patient is affording can they prescribe other expensive brands of antiplatelet agents, Prof. Mahmood Ali Malik remarked that even if the patient is a multi-billionaire, my first choice will be Aspirin. Affluence and affordability is not the question. Other expensive antiplatelet agents should be used only and only if Aspirin is contraindicated. Elaborating his point of view further Prof. Mahmood Ali Malik said that the money or real wealth belongs not to these few people of affluent class

but it is earned by the poor labourers who work either in factories or in the agriculture fields. Healthcare professionals must desist from prescribing expensive drugs just to promote the multinational pharmaceutical companies if economically priced substitutes are available. The National Pharmaceutical companies Prof. Mahmood Ali Malik said have made tremendous progress and many of them are producing quality drugs which are made available at affordable prices. And this also enhances patient's compliance with drug therapy. Some national pharmaceutical companies having set up state of the art manufacturing facilities with good quality control systems, have also marketed now a number of novel molecules at much reduced prices than being charged by the multinationals. Hence, it is the duty of the medical profession to patronize, promote and support these national pharmaceutical companies, Prof. Mahmood Ali Malik added.

It was indeed heartening to hear such words of wisdom coming from an eminent physician of the country particularly when the relationship between the physicians and the Pharma industry are under constant criticism. Unethical medical and marketing practices are being discussed at various forums but it has made little change on the ground realities. Some of the physicians write prescriptions to patronize and promote certain companies hence it is not surprising to see these physicians traveling overseas on Pharma Company sponsored joyrides on one pretext or the other. Since the Federal Health Ministry has so far failed to take any effective measures to check these unethical practices, the companies involved are encouraged to continue this in order to increase their sales. Some of the

healthcare professionals are also alleged to be working for different companies on daily basis, patronizing one company on one day and the other on other days. In return they are looked after by these companies in different ways.

A senior marketing executive of a national pharmaceutical company which is now quite well known for its unethical marketing practices when confronted said that the Federal Health Ministry cannot take any action. I have served for almost two decades in multinational pharmaceutical companies and I know how they used to purchase raw material from India or other cheap sources, then used to ship it to Dubai or some other port in the area and then reimport in Pakistan. And all this was in the knowledge of the officials of the Federal Health Ministry. It went on for years and years. Now when the interest of these MNCs is being affected, they have also started making noise about ethical marketing practices.

Under these circumstances, it looks difficult whether the authorities can enforce any code of ethical marketing. Appealing to the conscience of all those involved in such unethical practices may yield some positive results. Conscious physicians and opinion leaders in the medical profession should serve as role models and keep up their humble efforts to guide the healthcare professionals on rational prescribing keeping up the professional ethics.

(April 15, 2007)

Medical conferences, Judicial crisis and its side effects

Ever since, the ill advised action taken against Chief Justice of Pakistan Mr. Justice Iftikhar Mohammad Chaudhry and mishandling the situation, the country is facing serious judicial crisis. With the every passing day, the situation is becoming more and more complicated and it has all round effects.

Pakistan Medical Journalists Association has been working hard for the last couple of months to organize the first ever National Conference on Medical Editing held at Rawalpindi from April 23-25th 2007. The organizing committee had invited seven distinguished faculty members from Iran, UAE, and Saudi Arabia besides WHO EMRO region in addition to many distinguished editors of various medical journals from Pakistan. Over one hundred participants had registered for this conference. On the morning of April 24th, I received a call on my cell phone from the conference participants who were coming from Peshawar stating that the authorities have closed the Attock bridge and the main road has been blocked for all sort of traffic to ensure that no one from NWFP can enter Punjab. The reason, the Supreme Court of Pakistan as well as the Supreme Judicial Council was to hear the petition of Chief Justice

of Pakistan that day. The participants pointed out that they have pleaded with the law enforcing agencies that they were not going to the Supreme Court of Pakistan but wish to attend the Conference on Medical Editing but they were not prepared to listen anything. Despite repeated requests, they told us that they have strict instructions not to allow any body from NWFP to cross the Attock bridge. The participants were very much upset, disgusted and frustrated at the attitude of the authorities since they were being prevented to attend an academic activity for which they have been waiting for quite a few months. Some of them even expressed lot of ill feelings for the federal government in general and Government of Punjab in particular. We have failed to persuade the authorities to allow us to proceed to Rawalpindi, hence now we are going back, they remarked.

What a pity. Despite tall claims by the authorities, its actions following filing a reference against the Chief Justice of Pakistan are creating further ill feelings against the government. One fails to understand why the law enforcing agencies cannot distinguish between those who wished to go to the Supreme Court of Pakistan to show solidarity with the Chief Justice of Pakistan and those who had some other engagements. The solidarity and integrity of Pakistan is now at stake. After removal of Governor of Balochistan, relieving Prime Minister Jamali, killing of Sardar Mohammad Akbar Bugti, army action and now action against Chief Justice Iftikhar Mohammad Chaudhry who also hails from Balochistan has forced the people of Balochistan to think as if they have no say in Pakistan. It is extremely unfortunate to hear ill feelings against armed forces and federal

government in general and people of Punjab in particular among people of Balochistan which seem to have crossed all limits. You talk to any healthcare professional from Balochistan; he is bitter and no more willing to listen. Action in tribal areas adjoining NWFP which resulted in killing of many innocent civilians including women and children has also created lot of ill will in NWFP as well. Hanging of former Prime Minister Z.A.Bhutto over three decades ago has not been forgotten and people of Sindh hold the people of Punjab responsible for that. It is also a pity that Chief Minister Punjab's often repeated statements to elect General Musharraf as President in uniform time and again and passage of a resolution by the Punjab Assembly in favour of uniformed President has not gone well among the people of other provinces who hold Punjab responsible for the present state of affairs.

The country is faced with crisis after crisis. The law and order situation is not at all satisfactory. Frequent power failure is a serious headache for industrialists and business houses as it has affected productivity. There is increase in crime rate and suicide bombings resulting in loss of precious lives. Security and satisfactory law and order situation is a must for economic development which is no where in sight. Judicial crisis has now started showing its effects every where. God forbid, if something happens to the country, we will lose everything. People of Pakistan have not yet forgotten the 1971 crisis which resulted in the separation of former East Pakistan now an independent country Bangladesh. It was expected that our rulers, bureaucracy and politicians will all learn some lesson from our past mistakes but it appears this is not the case. Problems can

be resolved through dialogue and not with force which is always counter productive. Let the people of Punjab wake up and see the writings on the wall. They along with people of all other provinces should struggle for a democratic, liberal, moderate Pakistan which ensures economic, social justice and protects human rights of every Pakistani. Members of the medical profession belong to an intelligent section of the society and when one hears doctors from both these provinces, Balochistan and NWFP showing ill feelings amounting to hate to the actions being taken by the authorities, it is frightening. Let us hope and pray that the forces of enlightened moderation will try to win over the hearts and mind of the people rather than using force which has never proved to be a permanent solution.

(May 1, 2007)

Professional ethics, PM&DC and the Supreme Court Judgment

When the case of private medical and dental colleges vs. Pakistan Medical and Dental Council went to the Supreme Court of Pakistan, an influential politician who has also tasted the fruits of power for quite some time approached the eminent lawyer Barrister MAS not to accept the case of PM&DC. At this the Barrister is reported to have told him politely that once he has accepted this case, it is against professional ethics, hence he will contest this case. Many leading lights of the legal profession were pleading the case of private medical institutions. The PM&DC attorney worked hard, put up strong arguments and eventually won this case. This resulted in a landmark judgment by the Supreme Court of Pakistan. It not only defined the role and responsibilities of the PM&DC but also clearly laid down different parameters and the process of recognition of these institutions after proper inspection. The Council was also given a deadline to inspect all the private medical and dental institutions whose cases were pending and then decide about their membership and those who fail to get recognition should be closed. Now after the recent CPSP elections which are being termed as a soft revolution in the medical history of Pakistan, the situation has changed a lot. Not only that it has also affected the

functioning of various professional bodies, institutions including the PM&DC.

After the recent meeting of the PM&DC which also witnessed loud protests on denotification of certain important members and institutions, boycott by two provinces i.e. NWFP and Balochistan, the private medical institutions got what they wanted without going through the routine inspection as suggested by the Supreme Court in its judgment. Soon after that the same politician, it is learnt, again rang up the lawyer who pleaded the case of Pakistan Medical and Dental Council and said "You did not listen to us and went ahead to plead the case on behalf of PM&DC and also won in the court but look now eventually we have got everything we wanted". The noted Barrister, it is learnt is quite upset at these developments. If the issues had to be resolved like that what was the need of going to the Supreme Court of Pakistan and contesting the case?

(May 15, 2007)

ہم تو دشمن کو بھی پاکیزہ سزا دیتے ہیں
ہاتھ اٹھاتے نہیں نظروں سے گرا دیتے ہیں

Compliments from a senior faculty member!

Last month while attending a meeting, I received some rare compliments from a senior faculty member. He had this much to say about me. *"You are a very bad person. You keep on maligning the members of the medical profession. I have now come to know you fully"*. While thanking him for the compliments, I pointed out that he had every right to have views about others. The reason for his outburst was that while participating in the discussion I had pointed out that merit must be upheld while making any appointments, selections and promotions in the medical institutions. This is quite unpalatable to many for reasons which are well known.

The problem with the media is that it shows the mirror to everyone. In my professional career I have always tried my best to uphold professional ethics but if one tries to be honest to the profession, it is not at all possible to please every one. I have been very critical of intellectual corrup-

tion which is rampant in our medical institutions and never hesitated to point out unethical medical practices by the medical profession and unethical marketing practices by the Pharmaceutical trade and industry. While doing so I, my family and my children in particular had to pay a heavy price and I do not wish to go into details of that on this occasion.

While there is no shortage of sycophants and praise singers in our society, medical profession being no exception, a vast majority of them do wish to know the truth and behind the scene games played by different actors. To do that one has to do some investigative reporting and re-search and be prepared to face the music as well. It requires a great courage to disagree and say NO. While it is not easy to write truth, it is much more difficult to listen truth. I personally feel that one of the main and most important reasons for the deteriorating standard of undergraduate, postgraduate medical education, teaching, training and patient care in our country is that most often we do not uphold merit while making selections and promotions. All the successive governments have kept on patronizing, promoting those who had some connections in the power corridors or who could afford to maneuver jobs in medical colleges, healthcare facilities. In today's Pakistan whom do you know has become much more important than what do you know. When people get selected to head various institutions based on connections rather than "Merit" they simply cannot expect and get best out of the faculty members. Since they feel insecure, they are all the time looking for opportunities for public relationing and photo opportunities inviting politicians and

others who matter, sing praises for them because that is what ensures their job security. Hence they get very little time to concentrate on academics and inspire others working in the institution. They are surrounded by mediocres and promote those who do not pose them any threat.

My contention is that anyone who is appointed as Principal of a medical college, Vice chancellor of a medical University, head of any other healthcare facility, teaching and training institution must maintain some dignity and decorum of the office they hold rather than degrading these positions by waiting for hours to receive local body representatives and other officials. Instead of becoming bootlickers of the establishment for petty personal gains and benefits for their family members, they must stand up and be counted and work devotedly to strengthen the institution. Interest of the institution and the members of the medical profession at large should be close to their heart which must be protected and safeguarded. This will bring them lot of respect in return.

Let me give you a few examples. Once PA of Chief Secretary Punjab rang up Principal King Edward Medical College Prof. Ijaz Ahsan to convey the message. The son-in-law of the Chief Secretary, a doctor in United States who was on a visit, it was told, will be making a presentation in the symposium tomorrow. The Chief Secretary will come to hear this presentation along with his family members. The Principal was asked to arrange proper protocol for the Chief Secretary and also reserve five seats in the auditorium in the front row. Prof. Ijaz Ahsan could not tolerate all this. He rang up the Provincial Health Secre-

tary, told him the whole story and said that he was going on leave tomorrow and asked him to arrange whatever protocol he wished for the Chief Secretary. He went on leave and did not come to the college that day. Again when the Health Secretary and the Provincial government wanted to accommodate a medical student who got migrated from another province against the rules, he resisted for quite some time and when he realized that the authorities were bent upon accommodating that student come what may, bypassing all rules and regulations, he resigned from the post of Principal King Edward Medical College and went home rather than becoming a party to such illegal decisions. To take such a stand, you need a spine and everybody cannot be expected to be Prof. Ijaz Ahsan.

In another incident Vice Chancellor of a medical university who was very close to the former *CPSP Junta* while speaking at a medical conference criticized me and my publication by name. The reason was the same why we keep on exposing such characters. I was not present in the meeting as I was attending another meeting and by the time I reached, he had left. After the recent CPSP elections when the whole ruling group was routed, as expected people do not take much time to change. The same Vice Chancellor when we met in another meeting thanked me and commended our efforts to expose the wrong doings of the CPSP. I told him that we will continue this *Jihad* against some other members of this *Medical Mafia* group as well. We were just performing our duty to keep the members of the medical profession informed how the PM&DC elections were maneuvered, what deals were made and later on that is exactly what happened which we had reported

earlier. This is naturally quite disturbing for some and if we do not report all these, we will be failing in our duty to keep members of the medical profession in general and our readers in particular informed of latest happenings in the health sector. Inefficiency and incompetence of health officials has often been reported. If all this is a sin and crime, we will keep on committing that again and again and we also offer ourselves for any accountability. We respect members of the medical profession and the same is the case with those in the pharmaceutical trade and industry. If at times what we report is not to their liking, we cannot help them. However, keeping up professional ethics, they are most welcome to send us their own viewpoint and be rest assured that it will get published.

Tail Piece: In general the only people who love Editors are their wives, husbands, children and parents - *Marcovitch Harvey Associate Editor BMJ (2007).*

(June 1, 2007)

May God Almighty save HEC Chairman from his “friends”?

Late Lt. Gen. Fazle Haq a companion of late Gen. Ziaul Haq and Governor of NWFP was a wonderful chief guest. Whenever he was invited to grace the occasion by the medical conference organizers, he often used to tell interesting stories, anecdote to amuse the audience. Once he was invited to inaugurate a conference at Ayub Medical College Abbottabad where speaker after speaker from the organizers praised him which has now become a routine in Pakistan. While the organizers were doing this duty, Gen. Fazle Haq was smiling sitting on the dais. When he came to address the audience, he narrated the following story.

“Once General Ayub Khan was driving from Islamabad to Haripur Hazara. I and Capitan Gohar Ayub were sitting in the back seat. Gen. Ayub said that when he took over power, in the initial days, whenever someone used to praise me, I did not like it and would get angry but now over the years the situation has changed a lot. Now if no one praises me, I get annoyed. And then Gen. Fazle Haq added that now he too has been in power for quite a few years” which sent the jam-packed conference hall laughing. In Pakistan there is no dearth of praise singers but only a few dare to tell the truth to those in power irrespective of its consequences. This also reminds me the prayer of Clement Attlee

British Prime Minister (1945-1951) who is reported to have said "*O Lord Save me from my friends, I know who my enemies are*".

Prof. Atta Ur Rahman Federal Minister and Chairman of Higher Education Commission is a distinguished scientist. Ministers come and go and people often forget about them. Prof. Atta Ur Rehman a world renowned scientist enjoys tremendous respect among the scientist and members of the medical profession not because of his Ministerial position but because of being a scientist of world repute. Picking him and entrusting him the Ministry of information technology first and then now appointing him Chairman of Higher Education Commission is perhaps one of the good things done by General Pervez Musharraf and he did not disappoint him and the Nation. He has made a difference in the field of information technology and now in the field of higher education. As Chairman of the Higher Education Commission he has accomplished a lot and succeeding in shaking and waking up the faculty members of various institutions of higher education including medical universities. He has introduced a research culture, impressed upon universities that they are supposed to create and generate research and knowledge, helped attract talented faculty members from overseas to reverse the brain drain, introduced tenure tracks system, given respect to research scientists with the result that many young people are now thinking of adopting this as a career. He is always very receptive to help sponsor hosting of conferences in Pakistan besides sponsoring scientists, faculty member's visits overseas to attend such academic activities. He has increased the budgetary allocation of various universities which are undertaking lot of developmental work. He has

been successful to convince the rulers that financial allocations for higher educational institutions needs to be increased manifold with the result that he carries a heavy purse. Hence, various institutions are always eager to get as much funding from HEC as possible. All this is not a mean achievement but he must be careful of his "*friends*" who belong to this traditional class of praise singers.

Recently Higher Education Commission sponsored few speakers from overseas to a conference on medical education organized by one of the medical institutions. Prof. Atta Ur Rahman was invited to be the chief guest at the inaugural session. The organizers as usual in their speeches praised Prof. Atta Ur Rahman and the head of the institution went further to request the audience to stand up and give a standing ovation to Prof. Atta Ur Rahman for his contributions which many among the audience felt quite embarrassing. A few were heard saying that the organizers wish to ensure future sponsorships of their programmes as well. Such gestures on the part of audience are always spontaneous and one does not have to request for this. Prof. Atta Ur Rahman must be careful of all such "*friends*".

Once the inauguration was over, the meeting was successful from the organizers point of view. What happened the next day was quite embarrassing for the invited guest speakers as well. The attendance was quite thin in the session and when it came to small group discussions, the facilitators were absent. There were no markers for the speakers to write on the board and no body knew where all those who were responsible for making arrangements have disappeared. Eventually things needed were arranged but lot of useful time was wasted. Many people who had

registered did not turn up and it was a so so activity. The invited guest faculty was not happy at all with the interest shown by the local faculty members in this academic activity for reasons now known. The next day in the concluding session I asked the invited guest faculty members how they would rate this conference and workshop on a rating scale of 1-10, ten being the excellent, they said "we will find it difficult to give it four marks out of ten". Hence, Higher Education Commission while sponsoring or extending financial grant to any such academic activity must ensure that the money is well spent. Carefully assess the final outcome and have some system of monitoring such activities sponsored and funded by them. In addition to avoiding perpetual praise singers who tend to pose as 'friends' and the monitoring system as suggested above, we wish to offer few more suggestions, even though unsolicited but certainly sincere:

1. Prof. Atta Ur Rehman is a scientist and most of the people close to him are either scientists or from different disciplines of basic sciences. He must try to understand that clinical medicine has its own dynamics. It is not at all difficult for most intelligent people in basic sciences to do PhD in three four years while working on some project but as regards clinicians, their duties includes not only teaching and training but also patient care and then research. Hence, many of the competent and intelligent clinicians earn Fellowships of various respected institutions of higher education like Royal Colleges of UK, hence for them PhD is not considered so essential though now even the trend in developed countries is that all teachers are encouraged to have a PhD qualification. Since we do not have many people with PhD

qualification in clinical medicine, hence it is extremely difficult to get qualified supervisors with PhD degree in clinical medicine if some one does wish to have a PhD qualification in Pakistan though the situation is quite different as regards basic sciences. We have a few people with PhD qualifications on the faculty of various undergraduate and postgraduate medical institutions. As such for clinicians, some other yardstick needs to be worked out to assess their competence which could be in the form of books they have authored, scientific papers they have published in quality peer reviewed journals at home and abroad. Basic sciences people close to HEC Chairman know all this but perhaps they lack the courage to tell him so as to make appropriate changes. Because of Prof. Atta Ur Rahman's too much emphasis on PhD qualification for faculty members, Vice Chancellor of a medical university, it is learnt, is making lot of investments to get an honorary PhD from overseas.

2. HEC has also started the process of evaluating the quality of biomedical journals which is another commendable step since PM&DC has failed to do it. However the bureaucratic set up at HEC needs to be shaken. To elicit a response or a feedback from the functionaries at HEC is a major problem. Either there is no response at all to the communications or there is tendency for non-commitment and delaying tactics.

Prof. Atta Ur Rahman will earn a lot of gratitude if he can find time to pay personal attention to these two issues as a priority.

(June 15, 2007)