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Can National Medical Commission do what MCI failed to?

By Dr Gopal Dabade

Anyone who approaches a doctor for medical treatment needs assurance that he is in safe hands and will get the appropriate guidance so that he can recover from his illness. To be able to give ordinary people that kind of confidence, there is a need to ensure that quality medical training is imparted at medical colleges and, in addition, doctors need to practice their profession ethically and also be updated continuously. It is to accomplish these objectives that there is a need for a regulatory authority and hence came into existence the Medical Council of India (MCI) in 1933. The same was reconstituted in 1956 under the Medical Council Act.

So far so good, but then, subsequently, over several years as the private medical colleges rapidly overtook the number of government colleges, creeping corruption in the MCI has led to a gradual weakening of the regulatory authority. Here is an example of the what the growth of private medical colleges in the country has meant: according to a 2014 report by the National

Institute of Public Finance and Policy, the capitation fees paid to private colleges totalled Rs 6000 crore, and it ranked the private medical education sector as the second biggest generator of black money in the country.

In 2014, the MCI had 398 medical colleges on its list, with a total annual intake of 52,105 seats. Of these 398 institutes, 215 were private colleges. Though by numbers it is over 54%, in terms of political clout and the power that these private institutions wield, they punch way above their weight. A 2010 global report by the Foundation for Advancement of International Medical Education found that India has the highest number of medical colleges in the world.

This 'economic boom' of the owners of the private medical colleges has contributed to their immense power and clout and, in turn, corrupted the regulatory system that they must have functioned under. Often, these private medical institutions are owned by politicians or religious heads. Many government-appointed bodies that are supposed to regulate private healthcare providers have politicians or religious heads, who own private medical



colleges, sitting on the decision-making committee itself.

The government has decided to wind up the MCI because of the corruption involved and bring in its place a new National Medical Commission (NMC) through a Bill. The Indian Medical Association (IMA), a national organisation of doctors with a total membership of more than two lakhs) has objected to this move with a nationwide strike because the NMC Bill, amongst many other things, allows non-allopathic doctors to prescribe allopathic medicines.

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The IMA observed a national 12-hour strike on January 2, which compelled the government to send the NMC Bill to a parliamentary standing committee, where it is currently seeking clearance.

But the basic question is, how can the NMC do a job that the MCI failed at? How can we be sure that the NMC won't follow in the corrupt footsteps of the MCI? This is the crux of the problem. Can the NMC regulate private medical colleges and bring ethical values amongst the medical fraternity or will it get manipulated by their clout and money? Unfortunately, the NMC Bill hardly touches this important and core issue.

To regulate private medical colleges, there has to be a systematic and scientifically designed, decentralised mechanism but the NMC Bill says an emphatic 'no' to this. Instead, it centralises the regulatory authority and gives huge power to the central government as it appoints a committee of 77 people. The job description and responsibilities of this committee is varied and so vast that it is almost perfectly designed to fail. This appears to be the biggest failure of the NMC Bill despite the

fact that the guiding body for this was the NITI Aayog. By giving huge powers to the central government, the NMC Bill hijacks the state's powers on the subject and thus federalism.

It creates an additional problem as the NMC Bill permits 60% of the seats to be open for private medical college managements with full and unconditional freedom to charge any quantum of fees. This, if implemented, will allow only the rich to pursue a medical education. The excuse for giving away the government prerogative to regulate medical education fee is that it requires an investment of Rs 400 crore to set up a medical college, and private managements should be able to charge enough to recover this money. This is highly illogical and will only increase corruption and shoot up profit-seeking.

One commendable and brave move that the government did undertake before the NMC is the National Eligibility Entrance Test (NEET) which is a national entrance examination to various medical courses. This needs to be further strengthened by uniform and quality medical education throughout the country.

Doctors of Cuba

Doctors in Cuba have been part of a revolution over the years that has made the Communist country's healthcare system among the best in the world, according to the World Health Organisation (WHO). The infant mortality rate in Cuba is lower than it is in the United States and is among the lowest in the world. Cuba has trained doctors from over 123 countries.

According to WHO, during natural calamities around the world, "Cuban doctors are always the first to arrive and last to leave". Steve Brouwer, in his book titled 'Revolutionary Doctors', describes how Cuban doctors, who were selected from poor families and given free medical education, including free food and shelter by their government, have contributed to the health of the Cuban people at large.

Indian doctors abroad, too, are known for their dedication and they form the backbone of several healthcare services, including in Britain. Indian doctors in India are looking for a better working environment. Can the NMC Bill ensure that? *(The writer is president, Drug Action Forum, Karnataka)*