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Editorial

Are we Marching away from Safety ?

"Health is wealth" is a proverb which has almost been elevated to the status of a hackneyed expression by all plebeians. We speak of it, advocate it to others, with the gravity of Nestor advise our younger generation of it but prefer to remain callous and aloof of it. This gross aloofness has been shaken from the grass root of late by the looming shadow of pandemic. This almost imperceptible diabolic virus (SARS-COV2-19) has steadily percolated into the very fabric of the society and has wreaked havoc shattering our very source of existence. Now, as a repercussion to this violent jerk to our prejudice we have all become unanimously conscious of "LIFE BEING SUPERIOR TO EVERYTHING ON EARTH" and we cannot meddle with life in a childish whim. As like all of us, the Government of India and State Government has shown concern and has implemented preventive measures to check the pandemic. Their effort is laudable, but certain decisions of Central Council of Indian Medicine under the Dept. of Health & Family Welfare, Government of India, can be questioned from the viewpoint of the larger interest of the citizens of India. Let us discuss in detail.

Recently a notification has been released by Central Council of Indian Medicine (CCIM) "These regulations may be called the Indian Medicine Central Council (Post Graduate Ayurveda Education) Amendment Regulations, 2020." The regulation confers the official right to the PG SCHOLARS of Ayurveda stream of medical education to conduct surgery - "During the period of study, the PG scholar of Shalya and Shalakya shall be practically trained to acquaint with as well as to independently perform the following activities so that after completion of his PG degree, he is able to perform the following procedures independently.... MS (AYURVED) SHALYA TANTRA – (GENERAL SURGERY) and MS (AYURVED) SHALAKYA TANTRA (DISEASES OF EYE, EAR, NOSE, THROAT, HEAD, ORO-DENTISTRY).

Friends, for once let us browse the history of surgery in India. Once at the helm, until 18th century, the dexterity of the Indian Surgeons attracted veneration from the Surgeons of the East India Company. Charaka Samhita, Sushruta Samhita

and other variations of surgical practices have branched into various avenues of surgery, right from pediatrics to toxicology to name a few. It is thus an undeniable fact that shalya tantra and shalakya tantra traces its lineage deep into the history of time. However, evolution, modification, research and advanced application of applied science are the key features of human's capability to adopt to the changing and challenging times. The Occidental School of Surgery has however taken lead as compared to the Oriental School in this aspect. Thousands of dedicated scholars round the world have dedicated and are dedicating their full time effort to make surgery less painful, more safe and are trying to lessen the post-operative time of recovery so that the patient may return back to normal life and perform normal day to day chores as efficiently as he used to do before his illness.

May I be allowed to lay down the rigorous and long way that a surgeon needs to traverse before he is allowed to officially work independently. The saga starts like this-- After completion of 10th grade most students determine if they want to choose a track that will lead them to becoming physicians. Following 12th grade, students take part in an entrance exam to gain acceptance into medical school. After completion of medical school, junior doctors take another competitive exam to gain entry into post graduate degree in Surgery which can be followed by super specialty training if needed². The combination of 5½? years (medical school), 3 years (post -graduation) and 2–3 years (super specialty) adds to an approximate total of 10–12 years of training to practice as a Surgeon.

Now let us zero in on the notification of CENTRAL COUNCIL OF INDIAN MEDICINE. Armed with the degree of MS (AYURVED) henceforth the post graduate ayurved scholars will be officially and legally allowed to operate and delve into various branches of surgery as I have mentioned in my introductory paragraph. It's clear that CCIM wants to extend the scope of practical training of PG Scholar of Shalya and Shalakya. As such there is nothing wrong in this

that any PG Scholar in any stream of education can be trained for skill within the scope of the subject concerned. A reasonable knowledge is required to acquire that skill. The point to be questioned is something else. As we all know that MS stands for Master of Surgery in modern medical education in Indian medical education system. In this vast country it's next to impossible to identify somebody who designates himself as only MS, as to which stream and school of education he belongs to. Befooling the mass and hoodwinking them under the cover of the acronym MS will be a child's play. Again the competence of the mentors of such budding surgeons from the alternative stream is also questionable. The reluctance of few senior mentors in the mainstream surgery to mould their juniors is quite well known and is a subtle evil yet to be ousted³. If this be the situation with the mainstream what can happen to the alternative stream is an open secret.

WHO⁴ asserts that they, in unison with the countries of the world, will strive to establish quality healthcare for all people across the globe irrespective of gender, income and so on. As we know quality and expertise are complementary to each other and thus the decision making authorities must consider and reconsider their decisions umpteen number of times before its execution. One of the clearest lessons the pandemic has taught us is the consequences of neglecting our health systems.

- 1 Central Council of Indian Medicine Notification. The Gazette of India: Extraordinary, Part III – Sec-4. New Delhi, the 19th November 2020.
- 2 Are C — Surgical Training in India Versus Abroad: What More Needs to be Done?. *Indian J Surg Oncol* 2013; **4(4)**: 382. doi:10.1007/s13193-013-0266-3
- 3 Tandon A — Postgraduate surgical training in India. *Indian J Med Ethics* 2010 Oct-Dec; **7(4)**: 264-5. doi: 10.20529/IJME.2010.100. PMID: 22106586.
- 4 World Health Organisation Spotlight — 10 global health issues to track in 2021. <https://www.who.int/news-room/spotlight/10-global-health-issues-to-track-in-2021>. 24 December 2020.