

Editorial

TO PRACTISE OR NOT TO PRACTISE: IS THAT THE QUESTION ?

Much has been written and much talked about ever since interest in this subject was rekindled by directives from the Health Ministries. The subject matter has been opened and closed so many times that one wonders what the real motives were this time. Is it a feeler to gauge the popular sentiment before putting into action long term new policies? Is it a routine beaurocratic exercise to remind people that they (the beaurocrats) exist and can wield power? Is it a tactic to coerce the profession into some sort of a compromise? Or, does it really reflect a popular sentiment of outrage that the society is gathering against elements in the medical profession? These and many other spoken and unspoken thoughts have bothered many whether or not directly affected by such directives.

The question that is really being asked is what should the structure of health care delivery be in this country? What would be the role of health care providers in the public and private sector and how is one to reconcile the dilemma of attracting the best of medical skills for low paid government teaching and health care delivery jobs. What are the answers to these basic problems? Are there any answers? Do we really want any answers?

A rich country like United States can pay the teaching physicians almost as much as what others can make in private medical practice. How can a poor country with limited resources and many wants and a desire to have a free society and economy achieve its objectives without compromising on ethics? The answers, then, are not available with the medical profession or with the Health Ministries but lie in a much deeper appreciation of the conflicts that exist in developing countries. Until these conflicts are resolved no viable answers will be forthcoming and all efforts shall be an eyewash or attempts at finding scape-goats.

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—EDITOR

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