**Letter to Editor**

**Title: Is our health in safe hands? – Getting the ‘right’ medical students**

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Medical profession once considered as a ‘noble profession’ is recently been under scanner for the deterioration in medical services. The decline is generally attributed to commercialization of services, gradually waning human values, and lack of empathy and communication skills. At a time when the discussion is on devising approaches to test the medical students for attributes such as empathy, good communication skills and concern for the less privileged ones, developing nations like India are suffering from the ‘Problem of too many’. On one hand, an apparently skewed doctor-patient ratio in India (0.7 physicians per 1000 people as compared to World’s average of 1.5) has led to overburdening of medical practitioners who practically have very limited time for their patients to empathize with. Students inadvertently follow their teachers and the vicious cycle continues. On the other hand, there has been a mushrooming of medical institutions to overcome this shortage of doctors that has led to commercialization of medical education to a certain extent. High cost of medical education has made it unaffordable to many, and very obviously merit has taken a back seat.

The medical education scandals as witnessed in India recently(1) show the sorry state of affairs that profoundly affect the quality of health care education in India. India witnessed a major scam in the medical education system in 2015, as a result the Supreme Court scrapped the pre medical and dental entrance tests owing to the large-scale cheating which had taken place during these tests. More than 6 lack students had to reappear for the test in order to get into the various medical colleges across the country. Meritorious and deserving candidates with good academic background often lose the chance to get admission in various medical courses to rich and influential students, owing to such scams and commercialization of medical education. Inadvertently, those with poor academic background get into medical colleges by adopting various fraudulent practices such as imposters appearing in the medical entrance exams instead of the real candidates, use of various Bluetooth devices, micro-sim cards etc. to convey the correct responses to candidates during examinations, or even procuring the exam questions beforehand/ ‘paper leak’ for the candidates.

A very important aspect which needs to be addressed here is that the students who enter the medical colleges are often unaware of the core competencies of the profession. A study conducted on medical students of second semester in a tertiary care teaching hospital in Delhi in 2010 (2), revealed that many students did not have a specific career plan and opted for medical career because of the influence of their family members. Nearly half of the students felt that the expectations that they had before joining the course were not fulfilled, around one third of the students were not happy with the curriculum and were willing to change their career to something else. The study emphasized on the need to introduce career related information in school curricula so as to help students make informed decisions while choosing their careers. The issue needs to be addressed by policymakers as well to make the medical profession more appealing to the aspiring students.

Furthermore, lack of infrastructure, healthcare facility and dedicated teaching faculty does not help the medical students either. There have been reports of hiring fake medical faculty and even the patients to get the mandatory approval from the Medical Council of India (MCI) to run medical colleges in India. Medical colleges resorting to these shoddy practices are thus, involved in providing sub-standard medical education and training to their medical students. The regulatory system thus, need to be more stringent to ensure that quality medical education is imparted to those admitted to medical schools.

A profession once meant for the meritorious students is now flooded with mediocre ones. Presuming that the quality of students being admitted to medical schools has deteriorated, it is our duty to ensure that the medical students are permitted to graduate only if they are competent enough to deal with their patients holistically. But the reality is much more complex especially when many of the medical teachers believe in the concept of ‘mercy attempts’. Many others vouch for good results linking it to the ‘reputation’ of the department and the Institution. If the deteriorating trend continues, poking question haunting us would be ‘If our health and life are in safe hands?’ Instituting an exit examination for MBBS students can be a potent step to ensure that the MBBS graduates have adequate knowledge and skills to practice medicine. In this regard, medical teachers have the responsibility to ensure a positive change. ‘We are what we see’, and if things are to change we as medical teachers need to initiate the change for our students to follow.

All in all, we are inadvertently moving far from the concept of ‘Right medical student’, that demands an overhaul of medical education in India, whether it is conducting of medical entrance tests and fair opportunities for the deserving, or the approval of medical colleges by the regulatory bodies. It is often argued that either the right students are not joining the medical profession or they are not nurtured the right way. The onus to set the things right lies vastly with the medical teachers, who need to make sure that only those medical students competent enough to deal with their patients holistically are allowed to graduate.

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