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THE PROBLEM OF ELIMINATION OF QUACKERY FROM MEDICAL PROFESSION

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The problem of quackery in Medicine is practically co-existent with the history of so-called scientific medicine. It has been perpetually present throughout the history of scientific medicine and has caused much agitation and ado in various countries or localities, at various times. In our country it has become an important issue in recent years—after attainment of independence—especially since last year, after publication in news papers about the contemplation on the part of the Central Government and the Punjab Government of making laws prohibiting unauthorised practice. Various forms of laws banning quack practice, there already exist in various countries or states and it is likely such laws will be enacted in our country too. Nevertheless quack practice does exist all over the world till date and will probably exist for some future. What may be the reason for such a funny situation?

1. Science of Medicine is as yet full of uncertainties and inadequacies. Hence there have arisen so many schools. None of the schools can claim any exclusive omnipotency in the vast field of diseases.

2. Patients failing to get relief from any of the established methods often get relief from measures or methods which are outside the scope of science in the present stage. And no law can prevent such patients from going to these so-called quacks for relief, cure, or even saving life,

3. The method of categorization of quackery as against scientific medicine: Usually that system of Medicine which is recognised and supported by the authority that happen to be in power in any state at any time, is labelled as scientific and genuine, and the rest as fake and quackery. There can be no blunder more formidable than this. Every system of Medicine existing today has more or less truth in it. And no statutory enactment can crush or suppress any truth for good. What it can utmost do is to hinder the progress and development of the truth for some time.

Now, the dictionary meaning of the word "quack" is "a boastful pretender to skill, which the pretender does not possess—especially medical skill". So in its restricted sense quackery does exist in every system of Medicine, and in its general sense it is present in every social profession such as religion, politics, law, education and what not.

But for the sake of sheer justice, people can legitimately expect to be provided with a means to distinguish a real professional from a fake professional especially in so vital a profession on which health and life depend viz., Medicine.

In this aspect of the problem, the authorities of different states exhaust all their energy and means in educating and categorizing the different grades in only one system of Medicine viz., the Allopathic medicine, more or less ignoring, nay often outlawing the other systems. Consequently people wanting to be treated by any of the latter, fall in great confusion in ascertaining the level or grade of merit of a particular practitioner of their chosen system, and so they hesitate to come to the latter unless and until forced by financial depletion, or hopeless failure of the official Medicine which, of course, is a too frequent eventuality. Thus, these other systems of Medicine suffer from a spirit of condescension from all quarters, in spite of their real intrinsic merit.

Authorities of some countries, as gesture of democratic justice often condescend to give some recognition to the other systems—but that so far as permitted by the official—Allopathic School. But the fact remains—as many of the methods

of the other schools, are considered as unscientific, even quackery by the Allopathic School, so also some methods of the latter are considered unscientific, irrational and quackery by the other schools, and especially by Homœopathy—the newest and most advanced of Medical Schools. So to do real and honest justice to any particular system, the task of its categorization or for the matter of that any sort of control or care cannot be entrusted to members of any other school but to tried and leading members of the same school.

Apart from this problem of categorization of different grades of professionals in any system of Medicine there is another and far more vital problem viz., the *supply of sufficient number of such categorized medical men* to the vast population of a big country like ours with a overwhelming majority of rural folk, completely pauperized by 200 years of foreign exploitation.

In this matter also practically all the money of health and medical budget in our country is usurped by the official school, catering medical aid to a very small percentage of people, and that again at prohibitive cost, far beyond the reach of 95% of people; whereas a petty trifle is allotted (and that even often not spent) to all the others the so-called indigenous systems, catering medical aid to a large part of the rest of population. But even then, the total number in the latter of those who can be categorized as real professionals are far too few for the vast population of our country. Hence, a very large proportion of population is still remaining, and will remain for pretty long future at the mercy of fake professionals or often even at the hands of non-professionals—faith-curers, etc., some times not even that, but relegated to sheer lot or God.

In such a situation any attempt at elimination of quackery by simple enactment of some laws, and trying to enforce them through bureaucracy is to say the least, simply ridiculous if not mischievous at the instigation of certain vested interests.

If the authorities really and sincerely want to eliminate quackery from medical profession, they will—in our opinion—have to take the following steps:—

- (1) Establish and maintain separate Central Directorates

and Boards or Faculties with full and equal statutory and executive powers and rights for the three main systems of Medicine—Allopathic, Homœopathic and Ayurvedic (with allied Unani). The Health Ministries may co-ordinate the functions and activities of these separate bodies.

A Central Health Directorate is in existence but exclusively manned by Allopaths who cannot be expected to be in a position to realise the problems of, nor to do justice to the other systems, even if they are reasonably sincere.

Most of the States have already established Faculties or Boards for each of the three main systems. But all these bodies other than the Allopathic ones have got very little statutory powers or rights, and no financial support from their respective Governments. This situation makes them almost sterile bodies, gasping for mere existence.

(2) Registration under respective Faculties of all professionals including those with a minimum average standard of education or proficiency. This also has been accomplished in many States, or are being done in the rest of the States. But in this matter, the following measures are still needed:—

(a) In the States like West Bengal having the oldest of Homœopathic Faculties there still exist many *bona fide* practitioners giving efficient medical service to the people but remaining non-registered due to various reasons. A fresh chance should be given to them, so that they can get registered.

(a) Many people, registered on the basis of "3 years certificate", or the like, have later ceased to practise and have taken to other vocations; or given up true homœopathic practice and adopted other methods. Names of these people should—after proper enquiry—be dropped from the Register of Homœopathic Faculty.

(c) Attempt should be made for improving the standard of proficiency of registered practitioners without institutional training, upto an average minimum. This can be arranged in co-operation with the existing Homœopathic teaching institutions, and Homœopathic Associations.

(d) Only after the Register is completed, corrected, and improved in this way further registration of non-institutionally-

trained professionals should be permanently barred. Registration should then be open only to diploma holders of the affiliated institutions.

All these apply more or less to Ayurvedic Faculties also.

(3) Registered practitioners of any system of Medicine should have equal rights and privileges depending of course on their standard of education, proficiency and experience in their respective systems.

(4) Equal educational facilities must be provided for each of the 3 main systems, in stead of usurping practically cent per cent for only the Allopathic system, the most costly and most unsuitable for our poor country. Different grades of educational institutions for these different systems of Medicine may be established in co-operation with the people at no prohibitive cost, all over the country, especially in the rural areas. Thousands and lakhs of graded practitioners will come out of these institutions meeting the demands of people.

And if people get standardised practitioners of their choice system and category (viz., ordinary registered, diploma holder, graduate, post graduate of any of the different systems), they will find no necessity of running after quacks, and quackery will die a natural death.