

PRESIDENTIAL ADDRESS

M A Wali

Respected chairman, honoured guests, distinguished invitees, delegates of the conference, ladies and gentlemen.

We have assembled here in this beautiful campus of Hotel Taj at Bombay. I take the liberty on behalf of all of us in expressing and extending my deep sense of gratitude to the organizing committee and the team of devoted workers for holding the seventeenth Annual Conference of our Indian Association of Dermatologists, Venereologists and Leprologists.

I am conscious of the honour bestowed upon me and the responsibilities thereof. As a member of the Association I have keenly observed the activities of the celebrated and illustrious predecessors in this office during the past 16 years. They have advanced the discipline of dermatology, venereology and leprology as pioneers. I firmly believe that our combined and concerted efforts will make further progress in solving various problems of our country. I am sure that our august association shall continue to play an important and vital role in the eradication of the diseases, I would, therefore, try to highlight the various problems of the day that confront us and present my views in solving these problems, particularly social dermatology such as leucoderma, leprosy and sexually transmitted diseases.

It is unfortunate that in spite of the achievements of the medical science in the field of this speciality and despite the tremendous work-load at the district and primary health centres, very few peripheral district hospitals in the country have a specialist of our

discipline. Our endeavour should be to impress upon the government, the need of the hour so that rural population is well-served. I call upon all the honourable members to take up the cause in right earnest and do their best to achieve this goal.

Because of constraint and compulsion on time, it had been traditional to teach and train the under-graduate medical students with emphasis on three main disciplines — medicine, surgery and obstetrics, Medical educationists realize that in our country where nearly 80% of the population lives and dies in the villages, some radical and structural changes have to be made in the traditional style of training that is being imparted in institutions which are equipped with knowledge and skill but ill-suited for a village situation. In order to improve the old system, community medicine was introduced as an integral part of the MBBS curriculum for the undergraduates. This system has at least provided opportunity to our students to appreciate the rural problems and the common diseases affecting them including many skin infections and other dermatoses.

National health policy vis-a-vis our discipline

You are aware that in the 20-point programme of our government, National Health programme comprising this speciality has been included, particularly leprosy. But unfortunately, in the teaching institutions we find that this discipline is not being manned according to the specifications of the Medical Council of India. Our association should make endeavours to impress upon the MCI to place this discipline in a proper position in a

tropical country like ours, where the dermatological cases constitute nearly 15% to 20% of all the cases. Moreover MCI may be requested for a separate entity in the professional examination in order to make the medical graduates interested in attaining proper knowledge and proficiency in this discipline.

Our national responsibility and commitment to the health and welfare of the people, pose before us the challenge of medical aids, training and research. Now I shall briefly touch upon these matters for your thoughtful consideration. Health services in the country are rendered at three levels: (i) Primary health centres, (ii) District hospitals, and (iii) Teaching institutions and hospitals, located in the cities and large towns.

In the medical curriculum, dermatology is not given its rightful importance. It is not a minor subject dealing with ointments and lotions produced by drug houses. Skin disease is not always a local condition, it has wider and deeper significance. As such, skin is a window through which we can peep and discover many internal maladies. Internal diseases can be diagnosed or suspected by merely looking at the skin.

I would like to emphasize that more opportunities should be provided to the young medical graduates who would like to go for post-graduate studies and research in our discipline, by increasing the number of seats both in Diploma and MD courses. This can be done only when the system of training and education is moulded and tailored in such a way that every discipline, including ours is kept at par with other broad disciplines so that when a student comes out as a medical graduate, he can enter the field with knowledge of all the disciplines alike.

It is a matter of deep regret that the ignorant masses are being exploited by charltons particularly in this speciality. No steps have been taken so far by statutory body such as MCI or by competent authorities. This has resulted in the proliferation of quacks at the cost of the uneducated masses who have no other way but

to fall a prey to the nefarious designs. Even in large cities, people go to the quacks for the treatment of venereal and other sex-related diseases. Have we taken any note of these? Is it not an offence to deceive the public?

Problems as we face it

Ladies and gentlemen, let us turn our eyes to the problems of leprosy and venereology. Leprosy has been known and recorded throughout the history, yet the entity remains an enigma. The disease presents an unparalleled challenge to the bacteriologist, the pathologist, the epidemiologist, the pharmacologist, the sociologist, and specially to the other practitioners of medicine. In the present era when the interest of biological researches extend not only to the intracellular systems but down to the molecular and atomic levels, with virology holding the field as a centre of interest it must be reminded that *M. leprae* still evades the most modern research methods and presents important yet unsolved problems.

Venereal diseases are still quite common communicable diseases in India specially among certain occupational groups in the industrial belts. Although accurate statistics are lacking, a modest estimate indicates that 5-8 per cent of our people may be suffering from venereal diseases. In the absence of effective control measures in India, the incidence is on the increase. Diagnosis of venereal diseases is mostly investigative. Venereal disease patients need expert treatment and management of their psycho-social implications.

Institutional research

I feel that useful research can only be undertaken in institutions specially meant for the purpose. I suggest that the Union Government in collaboration with the state governments should start some institutions providing higher education and research in the discipline of ours for a bright future for the young medical students of the country and for

the ultimate welfare of the people at large, at different suitable places of our country.

Knowing as we do, the perfunctory and inadequate skill that a general practitioner picks up from medical colleges, it is necessary that those who are in practice or in service should be provided with refresher courses to keep them abreast with ever growing medical advancements.

Public awareness

I would like to suggest that our Association should spare no efforts to create an awareness among the public regarding the problems we

face such as detection of dermatological diseases and their treatment. It can be improved by upgrading the teaching standards of relevant subjects in the medical colleges.

Friends, I am grateful to you for your patient hearing as well as the opportunity given to me to address the conference. I take this opportunity to record my deep appreciation of the excellent arrangements made by the organising committee by providing us a pleasant stay, an occasion for fruitful discussion and deliberations.

I wish you a very happy and prosperous new year.