

Research and The Changing Truths

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Truth changes. What was true for Newton was not for Einstein; nevertheless, man the “seeking animal”¹ always pursues it. Owing perhaps to his quintessential characteristic of self-preservation. Throughout history there have been new problems, new insights, new facts and new methodologies. So truth arises in contradiction to old beliefs and thus is always challenged and defended. For man it is a never-ending quest.

Medical students in our country are essentially expected to be proficient in knowing the scientific facts and adequately applying that knowledge when confronted with a diseased patient. In other words, it is a disease-treatment approach. Not that anything is wrong with that but medicine as one knows it today considering all its implications pertaining to the health of the societies is so much more dynamic. While understanding the pathophysiology and the pharmacological basis of the diseases there should along with it, awareness related to the importance of that disease. A disease labelled to be rampant and important in the western world may not be in our country. Prevalence of a disease is different according to the geographic and sociocultural setup and so is its importance. The fundamental tool to gauge the sociodemographic morbidity is research.

“The primary goal of research in general is to describe and explain reality”², the notion that research is only done in multi million dollar laboratories is misplaced among the majority of medical students. To understand the question of importance of research and more importantly for medical students the main purposes of the health research should thus be elucidated.

1. Identify and prioritize any health problems.
2. To guide and accelerate application of knowledge to solve health problems.
3. To develop new tools and fresh strategies.
4. To advance basic understanding and the frontier of knowledge³.

Lately there has been “increased collaboration between social scientists and practicing health professionals in the areas of behavioral medicine and health psychology”⁴. A partnership between the government and community foster a participatory relationship that can make program implementations more effective⁵. Students, if working under the government funded researches in their respective community based hospitals can facilitate such projects. Thus medical students should be made aware of their health settings and encouraged to conduct such research programmes.

The World Health Report 1995 showed that many countries are experiencing not only an epidemiological transition, but also an epidemiological polarization - a widening gap in health between rich and poor. World wide, life expectancy has increased dramatically during the last decades of 20th century but so has “double burden” phenomenon of infectious diseases and chronic illnesses, present in parallel to each other. Pakistan though a developing country, has reached that stage. It needs stronger scientific and institutional capacity to address problems unique to its circumstances. However, sufficient investment is not being made to build and sustain health research capacity in our part of the world⁶.

World Federation for Medical Education in 1988 in it’s Edinburgh Declaration urged the world’s medical educators to consider specific action aimed overcoming the dichotomy between the direction of medical schools and the health needs of countries³. The challenge for medical colleges in Pakistan is not overwhelming. If there is only a will to overcome the initial inertia. Starting from a smaller scale, epidemiology and basic biostatistics courses can be integrated with the Community Health course. Adopting a research approach should be made a mandatory exercise. This will not only produce more

enterprising students but also future doctors with a greater sensitivity to existing problems in our surroundings. Further more better job incentives can be provided to accommodate such doctors in the Government Health sector.

Research can strengthen the ability of developing countries to meet the needs of the most disadvantaged, reinforced by international and financial resources, to accelerate program toward the fundamental goal of equity in health⁶. For instance if WHO allots millions of dollars for health projects world wide, it is research that can guide us to properly channelize that money where it is needed most. It is for the medical/health related sections to realize this responsibility and take initiatives no matter what the odds are as Tennyson in his poem Ulysses presses "To strive, to seek, to find, and never to yield".

References

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2. The commission in health research for development the health research, essential link to equity in development Oxford Oxford University Press, 1990.
3. Office of World Health Reporting The World Health Report 1997, Geneva WHO Printing Office, 1998.