

## ARTICLE

## Medical Council of India : the rot within

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**Abstract**

*The Medical Council of India is a statutory national agency charged with several responsibilities. Sadly, it is plagued by inefficiency, arbitrariness and lack of transparency.*

*It has been functioning for some years as the fiefdom of one person - Dr Ketan Desai. He has been re-elected president of the council despite strictures against him by the High Court of New Delhi.*

*This essay provides data that may help the reader identify the rot within the Council.*

*Permitted optimism, we may hope that this essay and similar observations by others will prompt a change for the better.*

*At present such optimism is not justified.*

**Introduction**

The web page of the Medical Council of India provides the following information:

The Medical Council of India was set up in 1934 under the Indian Medical Council Act, 1933. This Act was repealed and a new Act, The Indian Medical Council Act, 1956, was enacted. This latter Act was further amended in 1964, 1993 and in 2001. The objectives of the Indian Medical Council, as per the Act, are as follows:

1. Maintenance of uniform standards of medical education, both undergraduate and postgraduate.
2. Recommendation for recognition/de-recognition of medical qualifications of medical institutions of India or foreign countries.
3. Permanent registration/provisional registration of doctors with recognised medical qualifications.
4. Reciprocity with foreign countries in the matter of mutual recognition of medical qualifications. (1)

The promotion of medical ethics; ensuring ethical medical practice and punishing wrong-doers; providing guidance to medical professionals on good medical practice, and advice on novel forms of treatment bristling with ethical implications (the use of embryos in medical research and the use of stem cells in clinical practice being just two recent examples) do not feature in the stated objectives.

In 2006, we learnt of a move to amend the Act. M R Madhavan and Ruchita Manghnani analysed the implications of the

proposed amendments (2). They wrote:

"There are two major issues. First, the proportion of elected members in the MCI and its executive committee has been lowered. Second, the Bill gives the central government powers to override the decisions of the council, and even to dissolve the executive committee.

"The percentage of elected members of MCI will decline from 69% to 54%. If elections were not held on time for even 5 of the 49 elected seats, elected members would be in a minority.

"Elected members will be in a minority in the executive committee (excluding President and Vice President).

"The powers granted to the central government could lower the autonomy and independence of the MCI to function as a regulatory body.

"New provisions to improve accountability have been proposed without utilising provisions within the existing Act, such as the power of the central government to constitute a Commission of Enquiry."

Given these facts, an attempt is made here to analyse the functioning and efficacy of the Medical Council of India in the field of medical ethics.

**The case of the irreplaceable Dr Ketan Desai**

In December 2001, the *BMJ* reported on the dismissal of Ketan Desai, president of the MCI:

"The High Court in Delhi has ordered that Dr Ketan Desai, the president of the Medical Council of India, be removed from his post after it found him guilty of corrupt practices and abuse of power.

"Besides heading the council, which regulates the medical profession in India, Dr Desai also heads the Indian Medical Association, which represents India's doctors...

"A writ petition was filed last year by Harish Bhalla, a private practitioner, challenging the appointment of Dr Desai, providing evidence of his corrupt practices, his subversion of the council by usurping all key decision making roles and appointment powers, and seeking his removal.

"The petition accused Dr Desai of large scale bungling in medical admissions. Evidence was also presented on manipulation of inspection records of two medical colleges in

Pune and Ghaziabad for granting them recognition.

"Minutes of the council meetings showed that all critical decisions were concentrated in Dr Desai's hands. Dr Bhalla presented details from an income tax raid at Dr Desai's house last year, which showed unexplained receipt of 6.5 million rupees (£95,000; \$136,000) via bank drafts in the names of his wife, daughters, and himself from several people in Delhi.

"The judges ruled that Dr Desai had misused his position as president of the Medical Council of India. 'We cannot allow an unscrupulous and corrupt person to function as the president of the MCI [Medical Council of India],' observed Justices Chopra and Kumar. 'Therefore we direct that Dr Ketan Desai shall cease to hold office of president of the MCI with immediate effect.'

"The judges also castigated the central government, whose officials had been accused of connivance in the affairs of the council, for not discharging its duties properly. Major General (Retired) S P Jhingon has now been appointed by the court to head the council as an interim administrator until the council is reconstituted." (3)

Neither the Medical Council of India nor Dr Ketan Desai challenged these statements published in the journal.

The judgement of the Delhi High Court notwithstanding, the list of members of the Medical Council of India, as shown on its website, included the following under "list of the executive committee members as on 9.01.2008": "Dr Ketan D Desai, B/h Rajpath Club, 7, Friends Avenue, Opp S G Highway, Bodakdev, Ahmedabad 380 059." (4)

Was this an accident? Were the Government and the Medical Council of India unaware of the decision of the Delhi High Court?

Reporting in *Frontline*, T K Rajalakshmi noted:

"...In an interim order issued on May 28, 2001, a single Judge of the High Court ordered the removal of Ketan Desai as MCI president until fresh elections were conducted.

"The Union of India and Ketan Desai filed appeals against the order.

"On June 4, a Division Bench of the High Court stayed the order and permitted the MCI to hold elections to the post of president and vice-president as scheduled.

"Harish Bhalla approached the Supreme Court. The apex court passed an order on June 18 substantially maintaining the Division Bench ruling. It directed the Delhi High Court to dispose of the appeals expeditiously. The petitioner filed an additional affidavit in the High Court. The final hearing began after all parties concerned filed their affidavits, rejoinders and counter-affidavits.

"The High Court had three aspects to deal with: the constitution of the MCI, the eligibility of Ketan Desai to hold the post of president and the alleged misuse of office by Ketan Desai. Under the Medical Council Act, the MCI has to be a

representative body with people drawn from various sections of the medical community. It was found that the Council had only 77 members against the stipulated 123. Also, the number of nominated members was much larger than the number of elected members. Under the Act, the number of elected members must be more than twice the number of nominated members. But the Council had an equal number of members from each category. A two-member Bench of the High Court pulled up the Central government on this matter. It observed that the Centre had failed to perform its duty of constituting the Council under Section 3 of the Act and that it was owing to this failure that the Council had lost its representative character. The government, it noted, 'had not at all made bona fide efforts and not adopted effective measures to ensure that elected members are in place'.

"The order said that the fact that Ketan Desai had won the election to the post of president with an overwhelming majority proved that he sought to retain control over the Council by such manoeuvres.

"Despite the gravity of the charges against Ketan Desai, he was renominated to several committees at the AIIMS in August 2001. Union Health Minister C P Thakur is the president of the institute and the chairman of the governing body. The AIIMS Faculty Association's plea against Ketan Desai's continuance in the institute body went unheard...

"...Apart from levelling corruption charges against Ketan Desai, the petitioner questioned his membership of the Council. Ketan Desai was initially appointed against a vacancy and his term was to end on February 19, 2000. However, the Central government nominated him as a member on February 1, 2000. The date was later changed to February 14, 2000...

"...On February 18 and 20, 2000, the Income Tax Department raided the business and residential premises of Ketan Desai and bank drafts for Rs 65 lakhs were found to have been received by him and his family members. The Joint Director of Income Tax (Investigation), Ahmedabad, concluded that prima facie these drafts appeared to be arranged gifts and that further inquiry was needed in this matter. This conclusion was conveyed to the Income Tax Department in Delhi. Investigations by the Joint Directors of Income Tax in Ahmedabad and Delhi revealed that the gift entries were not in lieu of loans and records as claimed by Ketan Desai. The Joint Director of Income Tax (Investigation), Delhi, stated in a letter to his counterpart in Ahmedabad that 'these are accommodation transactions in the form of gifts and the alleged donors merely acted as conduits to channelise the unaccounted money of Dr Ketan Desai into his and his family members' bank accounts...' (5)

Most damning of all was the final observation: "...It was not as if the Health Ministry was not aware of the state of affairs in the MCI. During a Rajya Sabha debate on August 6, C P Thakur agreed with the criticism by Y Radhakrishna Murthy of the Communist Party of India (Marxist) of the functioning of the MCI. The member's observations, the Minister said, were 'not far from the truth'. In this context, it is not clear why the

government did not take any action to straighten out matters. In fact, it was only two days after the Rajya Sabha debate that Ketan Desai was renominated to the AIIMS committees..." (5)

The officials in the council itself also appeared to be oblivious of the ignominy consequent to the decision of the High Court in Delhi and of corruption within the council itself. During further discussion on the affidavit filed by the administrator in the Hon'ble Delhi High Court on June 7, 2002, in LPA No. 470/2002 - Dr K P Aggarwal vs Union of India & Others, when asked whether he had found any corruption in the council, the administrator replied that he was 100 per cent convinced that there had been corruption in the functioning of the council. Dr L S Chawla requested the administrator to apologise and withdraw the words as he could not make a sweeping statement of "100 per cent corruption" in the Council. At this juncture the administrator informed the court that he meant that there was no cooperation from the staff and everybody in detecting the corruption, which fact he had also conveyed to the solicitor general of India (6).

In 2005, the acting president of the Medical Council of India stated: "The charges were of corruption..."

"I do not think there was any proven corruption charge. They were only allegations against which we have approached the Supreme Court. There was a CBI inquiry. I understand that the CBI inquiry has not proved any charges of corruption. They were only wild allegations. The Supreme Court has appointed me as the Acting President reposing full confidence in the Council." (7)

On September 16, 2005, *The Hindu* reported: "The Centre ... requested the Delhi High Court to quash the appointment of Lt Col (Rtd) A R N Setalvad as Medical Council of India Secretary terming the same as illegal.

"... allegation against (Setalvad) of embezzlement of Rs 8 crore from Bhavnagar Medical College, Gujarat and vigilance inquiry which is said to be pending, the appointment ..." the affidavit said.

"The Centre alleged that Setalvad was passing on files to former MCI president Dr Ketan Desai who was removed from the post in pursuance of orders passed by the Delhi High Court." (8)

It is of interest that even on June 8, 2009, Lt Col (Rtd) A R N Setalvad remains on the Council and holds the office of secretary.

Evidently, Dr Ketan Desai has kept a firm grip on the strings that moved the acting president and other functionaries at the council, and on who is who in the council.

In the minutes of the general body meeting held on March 1, 2009, the president (acting) "was also happy to share with the House" that the Interim Appeal which was preferred by him before the Hon'ble Supreme Court challenging the decision of the Hon'ble Delhi High Court of November 2001 before the Hon'ble Supreme Court "has been totally upheld vide order dated 05.02.2009". (9) As a result of this, "not only

the composition of the MCI with reference to its desired representative character stands testimonised, but also the decks have been cleared for the conduct of election of the office bearers of the Council, which has been itemized in the agenda. In a way, he can say with all humility at his disposal that the destiny has made the Council move a full circle back on to its path of committed responsibility, fair name and credibility."

These minutes go on to record elections to two key posts:

"6. Executive Committee - Election of members.

"6(i) President - Election of.

"Dr Rani Bhaskaran proposed the name of Dr Ketan Desai which was seconded by Dr Ved Prakash Mishra.

"As there were no other nomination received, the Scrutiny Committee submitted its report to the Returning Officer informing therein that they have received only one nomination for the post of President i.e. Dr Ketan Desai, which is in order.

"Accordingly, the Returning Officer Dr Indrajit Ray informed that Dr Ketan Desai was declared elected as President of the Medical Council of India for a term of 5 years...

"6(ii). Vice President - Election of.

"The election of Vice President of Medical Council of India was conducted u/s 3(2) of the IMC Act, 1956 as per the order of the Hon'ble Supreme Court dated 05.02.2009 in C.A. No. 599-600 of 2002 etc. - Dr P.C. Kesavankutty Nayar Vs. Harish Bhalla & Ors.

"The following name was proposed for the post of Vice-President. MCI:-

"Dr P C Kesavankutty Nayar - Proposed by Dr D J Borah Seconded by Dr B P Dubey

"As there were no other nomination proposed, Dr P C Kesavankutty Nayar was declared elected unanimously as Vice-President of the Medical council of India for a term of 5 years."

Predictably, the minutes of the meeting of the executive committee held on March 13, 2009 carry the following illuminating items right at the start.

"At the outset, the members of the Executive Committee congratulated Dr Ketan Desai, Professor & Head, Department of Urology, B J Medical College, Ahmedabad, on his assuming the office of the President, Medical Council of India and wished him a very best towards adding to the fair name and credibility of the Council.

"The President thanked Dr P C Kesavankutty Nayar, the then President (Acting) for handling the affairs of the Council diligently and effectively during the past 7 years. All the members congratulated Dr Nayar on his assuming the office of the Vice-President of the Council and wished him a very best." (10)

An impartial observer might be pardoned for voicing some nagging thoughts.

- How did the powers-that-be permit the council to function for seven years with the same individual as “president (acting)?”
- Did the august members of the council not find the functioning of “president (acting) for seven long years good enough to want him to function as president without the (acting)?
- Is there no one else in the country who can serve the Medical Council of India in the capacities of president and vice-president than these two worthies?
- What did the executive committee mean by Dr Ketan Desai “adding to the fair name and credibility of the Council”?

### **Decisions of the Medical Council of India on misconduct by doctors**

I have studied decisions made prior to 2008 and provide my findings of some decisions that need clarification.

#### ***The case of Dr \*\*\****

In response to a complaint that a doctor was present for an MCI inspection in a medical college other than the one in which he was employed, the MCI's ethics committee noted:

“The Ethics Committee feels that Dr \*\*\* was forced by the management of Basaveswara Medical College & Hospital, Chitragurga to attend the MCI inspection on 1.6.2005... It is very clear that the college has taken advantage of his inexperience and helplessness to force him to face MCI inspection ....

“...Such behaviour of the college towards medical teachers is highly objectionable and deserved to be condemned... Therefore, Ethics Committee decided to absolve him (Dr \*\*\*) from the charge of serving simultaneously in two medical colleges. The matter may be treated as closed.” (11)

What action did the Medical Council of India take against the management of Basaveswara Medical College and Hospital, Chitragurga for behaviour that was “highly objectionable and deserved to be condemned”?

#### ***The case of Dr Tuli and VIMHANS***

A complaint was filed against Dr S M Tuli (VIMHANS), New Delhi, stating that the histology report of a malignant tumour was not communicated to the patient and an oncology opinion not sought for three months. The patient died. Had the report been communicated in time and an oncology opinion sought, treatment may have provided a better outcome. The complaint was considered by the ethics and executive committees of the Medical Council of India - F.No. 292/2007. The ethics committee noted:

- “1. The biopsy report of the patient was sent by the hospital for histopathology examinations on 12.09.2005 and the report of the said examination was received by the hospital on 16.09.2005.
- “2. The operating surgeon Dr S M Tuli failed to inform the patient on the date of discharge on 16.09.2005 about the

biopsy report which was highly malignant.

- “3. On 27.09.2005 ... Dr S M Tuli failed to inform the patient about the serious diagnosis of malignancy and failed to advise him for the treatment.
- “4. Three long months elapsed before the doctors of VIMHANS Hospital informed the patient regarding diagnosis of the disease and the case was referred to Oncologist on 27.12.2005.
- “5. The Ethics Committee notice that there is fault on the part of treating doctor by not showing the report to the patient. “The Ethics Committee further notice that there is failure on the part of VIMHANS Hospital, New Delhi also because they have failed to inform the patient about the biopsy report which has arrived at the hospital in time.

“The Ethics Committee has further noted the observations raised by the Delhi Medical Council on the lapses of the hospital in this regard and has therefore, decided to issue a strong censure to the concerned authorities of VIMHANS Hospital, New Delhi for this failure.

“This censure may also be communicated to the registering authority i.e. Directorate of Health Services, Govt. of NCT, New Delhi and also to the Secretary (Health) besides the hospital.”

The conduct of the ethics committee thus far is impeccable. Having considered available evidence, the committee outlined appropriate corrective action. Subsequent events demand an explanation. According to the minutes, “The Executive Committee ... decided to refer back this case to the ethics committee for re-consideration.” No reasons for this referral are noted. There is no reference to the ethics committee's recommendation that the hospital and its authorities be censured. Then, in an amazing and unexplained volte-face the ethics committee, after review, unanimously decided that the name of Dr S M Tuli should be removed from the Indian Medical Register for a period of four weeks instead of three months. “The matter may be sent to Executive Committee and the file may be treated as closed.” As with the executive committee, so with the ethics committee, no explanation for this abrupt turnaround was deemed necessary. (12)

#### ***The case involving the Maharashtra Medical Council***

Dealing with a complaint against Dr \*\*\* by Mr K K Abdul Azeez (F.No. 85/2008), the Medical Council of India decided: “... Dr \*\*\* is registered with Maharashtra Medical Council. Hence, the Ethics Committee decided that the matter may be referred to Maharashtra Medical Council for taking necessary action at their end .... The matter may be recorded in the referral register and the file may be treated as closed.” (13)

The ethics committee of the Medical Council of India appeared unaware that when they made this dismissive decision, the Maharashtra Medical Council had no elected members. The earlier committee of members was disqualified by the Court. Its affairs were being dealt with by Mr R S Mhaskar, registrar.

When I made enquiries, I was unable to determine how the Maharashtra Medical Council dealt with cases referred to it

by the Medical Council of India or complaints made to it by members of the public. I do not know what the Maharashtra Medical Council did in this particular case. The Medical Council of India is, of course, not interested as it has treated the file as closed.

**Use of funds**

Huge sums are collected periodically from every department in each medical college for inspection and certification of their facilities and the mandatory recognition by the Medical Council of India. Propriety demands accountability of the sums received and the manner in which they are spent. An attempt at studying the budget of the Medical Council of India using sources accessible to me yielded the following data (14):

<b>33. MEDICAL COUNCIL OF INDIA</b>				
(Rupees in thousands)				
	<b>Actual Expenditure</b>	<b>Budget Estimates</b>	<b>Revised Estimates</b>	<b>Budget Estimates</b>
	1997-98	1998-99	1998-99	1999-2000
Plan	25,00	85,00	65,00	73,00
Non-Plan	1,00,00	53,00	56,00	56,00

No further data can be obtained at this site. Did the Ministry of Health and Family Welfare wash its hands off the Medical Council of India in 2000?

The website of the council itself provides the following information on income or expenditure during the years 2006-2008 (15) (see below)

I am afraid I do not possess the expertise for analysing such statements but even so am puzzled by the sums spent under "establishment" (Rs 29,263,319.00) and "administration" (Rs 91,202,112.00). I note that these are in addition to sums spent from grants (Rs 44,893,188.00) and the sum set aside as depreciation (Rs 22,789,109.00). The total expenditure of the council during the year 2007-2008 was Rs 188,147,728.00.

My attempts at obtaining some information on expenditure from the meeting's minutes provided by the Medical Council of India yielded two interesting bits of information.

Dr Ketan Desai has been provided special facilities by the Council. In the minutes of the meeting of the Executive Committee held on April 27, 2009 (16) we learn that "The Executive Committee of the Council approved the recommendations of the Purchase Committee for installation of Video Conferencing system in the Council Office through the NCCF Limited as under:

<b>Serial number</b>	<b>Particulars</b>	<b>Quantity</b>	<b>Rate (rupees)</b>	<b>Installation</b>
1.	Sony Group Video Communication system Complete with installation PCP-1P	Two numbers	2,87,500/- each (VAT extra)	One each at President's Office at New Delhi and One at President's Office at Ahmedabad.

<b>Income &amp; Expenditure Account for the period ended 31.3.2008</b>			
<b>INCOME</b>	<b>SCHEDULE</b>	<b>Current Year</b>	<b>Previous Year</b>
		<b>2007-08</b>	<b>2006-07</b>
Income from Sales/Services	<b>12</b>	280,740.00	397,426.00
Grants/Subsidies	<b>13</b>	18,018,032.00	14,624,067.00
Fees/Subscriptions	<b>14</b>	178,185,225.00	139,464,725.00
Income from Investments (Income on Invest. from earmarked/endow Funds transferred to Funds)	<b>15</b>	0.00	0.00
Income from Royalty, Publication etc.	<b>16</b>	0.00	0.00
Interest Earned	<b>17</b>	30,382,010.00	6,034,431.00
Other Income	<b>18</b>	24,079,501.00	23,664,672.00
Increase / (decrease) in stock of Finished goods and works - in - progress	<b>19</b>	0.00	0.00
<b>TOTAL (A)</b>		<b>250,945,508.00</b>	<b>184,185,321.00</b>
<b>EXPENDITURE</b>			
Establishment Expenses	<b>20</b>	29,263,319.00	20,481,201.00
Administrative Expenses	<b>21</b>	91,202,112.00	68,577,452.00
Expenditure on Grants, Subsidies etc.	<b>22</b>	0.00	0.00
Interest	<b>23</b>	0.00	0.00
Expenditures from Grants	<b>24</b>	44,893,188.00	11,085,269.00
Depreciation (Net Total at the year end-corresponding to schedule 8)	<b>8</b>	22,789,109.00	23,541,868.00
<b>Total (B)</b>		<b>188,147,728.00</b>	<b>123,685,790.00</b>
Balancing being excess of Income Over Expenditure (A-B)		62,797,780.00	60,499,531.00
Transfer to Special Reserve (Specify each)	<b>2</b>	62,000,000.00	60,000,000.00
Transfer to General Reserve	<b>2</b>		
<b>SURPLUS (DEFICIT) CARRIED TO CORPUS CAPITAL FUND</b>	<b>1</b>	<b>797,780.00</b>	<b>499,531.00</b>

In an earlier meeting an equally weighty item had been considered:

"At the outset the members expressed a desire that a beautiful Guest House which has been constructed should be put to the optimal use by providing accommodation to the Members/ Ex-Members/Ex-Officers and the medical college fraternity on their visit to New Delhi. After detailed deliberations, the House unanimously decided that the following schedule of charges be adopted for providing accommodation in the Guest House of the Council:

#### Charges

- A. On Council's duty NIL (For attending meetings, inspections, transit stay, etc.)
- B. On personal visit
  - (i) Members of the Council Rs 250/- per day
  - (ii) Ex-Members/Ex-Officers of the Council Rs 500/- per day
  - (iii) Any other member of the medical college Fraternity Rs 1,000/- per day" (17)

#### Tainted officials?

The dictionary defines the word thus:

*taint* (tnt)

v. taint-ed, taint-ing, taints

v. tr.

1. To affect with or as if with a disease.
2. To affect with decay or putrefaction; spoil. See Synonyms at contaminate.
3. To corrupt morally.
4. To affect with a tinge of something reprehensible. v. intr.

To become affected with decay or putrefaction; spoil. n.

1. A moral defect considered as a stain or spot. See Synonyms at stain.
2. An infecting touch, influence, or tinge.

Consider two recent news items. The first in *The Times of India* on June 6, 2009 carried the headline "MCI members on erring college board". In the text of the report, which investigated medical colleges in Chennai that charged capitation fees from students in violation of the law, the reporter noted:

"Even as questions swirl over the impunity with which private medical colleges are charging illegal donations despite an explicit Supreme Court ban, it now appears members of the apex regulatory body – the Medical Council of India (MCI) – themselves have strong links with the offending institutions.

"Two senior officials of MCI, the authority tasked with keeping a vigil on medical education, are currently board members of one of the colleges caught demanding capitation fees in the TOI-Times Now investigation. MCI president Ketan Desai and vice-president P C Kesavankutty Nayar are on the board of management of Sri Ramachandra University (SRU), which

demanded Rs 40 lakh from students seeking MBBS admission."

Asked whether it was appropriate for him to be a member of the board of management of an institution that he was supposed to monitor in his capacity of president of the Medical Council of India, Dr Ketan Desai replied: "I am the UGC nominee and my colleague, Nayar, is the MCI nominee. It's just like how the Dental Council of India members are on the board of several dental colleges. But I have never attended board meetings of SRU for at least three years now. We are there only as ex-officio members." (18)

Were it not for Dr Ketan Desai's formidable reputation, such a statement could have been attributed to naivety. The lie to his disclaimer was unwittingly provided by officials within the SRU. As the reporter pointed out, "Amazingly, the two medical colleges in Chennai are virtually unmindful of the peculiarity of the situation. An SRU official told this reporter, 'The top MCI officials are on our board. We will talk to them about the allegations (of illegal donations) and sort them out.'" (18)

Dr Ketan Desai's expertise in "sorting matters out" will stand him and the SRU in good stead and to mutual benefit.

An independent report appeared on page 11 of the same issue of *The Times of India* as that on Dr Ketan Desai and Dr Nayar. Entitled "Trouble for UGC chief, CVC registers complaint against him on host of charges", it informed the reader that the Central Vigilance Commission had registered a complaint against the UGC chairman, S K Thorat. The allegations against him ranged from his involvement in pushing through a Rs 224 crore e-governance project, corruption in the grant of deemed university status and misusing UGC resources to run his own institute, Indian Institute of Dalit Studies. (19)

Isn't there an old English saying about birds of a feather?

#### "Herculean exercise"

In the minutes of the general body meeting held on March 1, 2009, we read an account of the presidential address delivered by Dr P C Kesavankutty Nayar, "president (acting)": Dr Nayar stated that "The 'intellectual informational inputs' that were received through this Herculean exercise were diligently compiled... in the commemorative Souvenir that was released today under the caption 'Tryst with Consensus.'" (17)

In the context of Dr Nayar's reference to Hercules, those at the helm of affairs might consider the fifth of the Twelve Labours set to Hercules. King Augeas was best known for his stables, which housed the single greatest number of cattle in the country and had never been cleaned. Hercules was asked to perform the task of cleaning these stables in a day - deemed almost impossible since the livestock were divinely healthy and therefore produced an enormous quantity of dung.

In the context of cleaning up the Medical Council of India, where shall we find an Indian Hercules today?

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## Opportunities for internships in ethics

Centre for Studies in Ethics and Rights (CSER) was set up in January 2005 by the Anusandhan Trust (AT) to undertake research in ethics and human rights.

CSER is engaged in research and training in ethics, rights and capacity building of voluntary organisations/NGOs. It organises training programmes in various fields, including bioethics, ethics in clinical trials and programme management. Our priority areas include professional ethics, research bioethics, public health ethics, development ethics, law, human rights and ethics, comparative ethics, and exploring linkages between the discourses in ethics and rights in the Indian context.

CSER faculty members include social scientists, medical professionals, bioethicists and public health practitioners. These include Dr Amar Jesani, Dr Nobhojit Roy, Dr Padma Prakash, Ms Padma Deosthali, Ms Sandhya Srinivasan, Ms Pranoti Chirmuley and Ms Neha Madhiwalla.

CSER offers internships to graduate, postgraduate and doctoral students from the fields of medicine, law, social work and social sciences, and others who are interested in these areas of study. Faculty at CSER offers mentorship throughout the internship period and resources like libraries and documentations centres of CSER and CEHAT in Mumbai can be accessed by the intern. Interns will be expected to do a time-bound project or assignment to the satisfaction of CSER faculty. Certificates of experience will be provided to the students.

The internships are for a minimum of six weeks and can extend to six months. An intern from Mumbai and outstation who has an accommodation facility in Mumbai will get Rs. 8000/- as stipend. Any Intern from outstation who does not have any accommodation in Mumbai will get Rs. 12,000/- as stipend. CSER will offer partial support. CSER will cover the costs of any local travel and related expenses incurred by the intern while doing project-related work.

Interested applicants can email Mr Shinde [[mahendra.csere@gmail.com](mailto:mahendra.csere@gmail.com) or (call +91-22-2668 1568)] with updated resumes, areas of interest and contact details. A faculty member will follow up with the applicant. Interns will be selected based on their interests, skills, experience and the requirements of the centre.