

## INSPIRING LIVES

# ‘There is no greater gift than the opportunity to work in a government hospital’

A S THAMBIAH

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### **On government service**

I returned from England with the MRCP in dermatology in 1951 and joined the Madras Medical Service. I was the only assistant surgeon with a postgraduate qualification in dermatology, yet I was kept as a reserve tutor for a record period of ten years and shunted from department to department because I refused to approach the authorities for a posting in dermatology. This they attributed to arrogance, but my motives were different. I was sure of my abilities and I believed that God had put me there for a purpose. I knew that if I approached the authorities for a posting, it could be construed as a favour, and I might be approached later to return the favour in ways that I would be unwilling to do.

One day I was summoned by the dean, Dr Thayumanasamy and told to take over the department from the next day. Similarly, I was summoned one day by the director of medical education, and asked how much money I needed to start a postgraduate course. When I asked for only Rs 10,000, she was surprised. I bought six microscopes for Rs 6,000, and returned the rest of the money. People came from the public works department and offered to get me a new table, chair, etc. but I refused all that as my existing furniture was adequate. I only asked for the walls to be repainted. The basic rule in government service is: know your work, do your work, and keep your hands clean.

### **On teaching**

It is essential for the professor to be available in the department during working hours. I began the postgraduate class at 6 a.m. every day with no holidays. Attendance was not compulsory, yet hardly any postgraduate student missed these lectures. At 7 a.m. we began the outpatient services. I believe that bedside teaching and clinical demonstration are an invaluable part of training. At a meeting of the academic council, some professors of medicine and surgery said that medical postgraduates were mature and did not require formal teaching. The dean, a microbiologist, was uncertain about how to respond and turned to me. I told him that there were two

wings in the medical services, the departments of medical education and medical services. All those who were unwilling to teach should be sent to the departments of medical services. Needless to say, I was not popular with most of my colleagues!

I believe that a professor should not be away from the department for more than twenty-four hours. If you are a good teacher the students will follow you everywhere. Only about one per cent of students are bad. With them I was very stern. I keep my needs simple. A strong spiritual attitude is helpful.

### **On private practice**

The cost of medical education is too high at present. Parents and students have to beg, borrow and steal to afford the fees. After they graduate, doctors need to earn money quickly. This encourages wrong practices. The government cannot say that it has no money for education. It must follow such economic policies that it is possible to provide cheap education. India has enough talented economists who can suggest ways that make it possible.

### **On full-time versus part-time teaching**

There is nothing particularly advantageous about full-time teaching and stopping private practice by government doctors. Ultimately, it all comes down to the individual. Discipline and accountability are the most important virtues. A person who is a full-time teacher may practice in a far-away location. When I was in service, I fitted my practice within the time available after my duties to the government hospital. A doctor in a teaching hospital must treat patients, teach the students and do research. There can be no greater gift for a doctor than the opportunity to serve mankind in a government teaching hospital.

(As told to George Thomas and J Amalorpavanathan)

Professor Arthur Saravanamuthu Thambiah founded the postgraduate course in dermatology in the Madras Medical College and developed it into a department of international renown. Now 78, retirement sits lightly on him, and he still sees patients in his inimitable way—no appointments, come early and get a number.