

Consumer Protection Act

— an introspection by a general practitioner

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The physician as God

Since time immemorial doctors have held a revered status in society. Over the years we have proved Goebbels' principles by equating ourselves with the Almighty. If you disagree, imagine your attitude when the patient asks for a second opinion or a situation wherein you, as a general practitioner (GP), question a consultant regarding a choice of antibiotics. Such an attitude has generated complacency in our professional outlook. Patients **used to** consider us as Gods. We **still** believe ourselves so.

It is at this juncture that the so-called catastrophe befell the celestial members of our esteemed profession. The Consumer Protection Act (CPA) was made applicable to medical doctors.

We were shocked and angry. How could any one even think of accountability from us? How could we be taken to task? Meetings were called. Talks were arranged. Everybody who was somebody was called upon to opine. Every aspect of CPA was dissected. The entire medical community revolted, albeit orally. Every practising doctor imagined himself in the dock. Doctors flocked to apply for indemnity insurance.

Did we stop to look at the situation through the eyes of the person immortalised by R. K. Laxman - the common man? Our panic reactions, in fact, provide the strongest justification for the CPA.

Arguments against CPA - do they hold water?

Let us analyse the arguments put forth against the CPA:

1. CPA is not applicable to doctors in other countries.

We forget that in these countries the medical councils are strong and just. We also lose sight

of the strict licensing system prevalent there. These require compulsory attendance at continuing medical education (CME) programs and frequent re-evaluation of medical competence.

2. There is a disparity of resources and qualified manpower in India.

Does this not exist in the developed countries too?

3. Doctors are being equated, under the CPA, with traders.

We conveniently ignore the commercialisation that has crept into our profession.

Using the CPA for the benefit of our patients

Rather than adopt such an antagonistic approach, of which the sole beneficiaries will be the lawyers, why do we not accept the writing on the wall that the CPA is here to stay. We should concentrate our energies into using the CPA for the benefit of our patients and our profession.

The provisions of the CPA that may cause concern to GPs are:

1. Reactions to drugs A reaction, per se, does not incriminate a doctor provided adequate prophylactic and curative measures have been taken by the practitioner. If the patient succumbs despite these, no blame can be attached to the doctor.
2. Referrals Unnecessary referrals or referrals to a wrong person or failure to refer a patient when necessary are avoidable problems. We should ensure adequate safeguards against them.
3. Certificates Our social obligations to our

patients by way of certificates should be restricted to those based on documented medical fact. This should not be difficult

4. Quacks We compete with a large number of unqualified and qualified quacks. They are usually more united than us. CPA can help us curb this menace to patients.
5. Fear Fear of penalties under the CPA will help keep us on our toes. It will, in fact, make us professionally more competent. There are several ills prevalent in our profession. We have been turning a blind eye to them thus far. We do not feel the pinch till a surgeon demands an exorbitant fee in unaccounted money from a friend or relative or operates on them without a genuine indication. A member of my family was subjected to a procedure in the radiological department of a private hospital. Operation theatre charges, separate charges for the use of a table and trolley containing a few pieces of gauze were added to the bill. Protests did not help till the CPA was referred to. It was only then that the hospital authorities saw reason.

Commercialisation of medicine

As Dr. N. H. Antia, Director, Foundation for Research in Community Health, points out, our middle class and elite have adopted all things western - music, fast food, attire and commercialisation. Unfortunately we, literate and highly educated doctors, have also fallen into this trap.

We, along with others in the middle class, pay exorbitant capitation fees to get our children into this profession so that they can make millions later.

Has the CPA proved a monster?

It is now several months since this act became applicable to us. How many of us have been hauled up before the court? Is the CPA flooded with complaints against doctors? Has not the court dealing with complaints against doctors, in fact, cleared the names of doctors?

Let us not oppose the CPA. Let us, instead, set our own house in order. We can do so by

- promoting ethical professional practices
- attending to our patients with sincerity, honesty and affection
- maintaining good medical records
- excellent communication with patients, relatives, colleagues and consultants
- attending CME programs
- promoting solidarity among ourselves so that we can help colleagues in need.

Having done this, let us help modify the CPA in a productive manner. Let us advocate that if a doctor is wrongly hauled up before the court, the complainant must be made to pay compensation for the harm done and inconvenience caused to the doctor.

Let us take this opportunity to promote through health education an ability in our patients to distinguish between appropriate, necessary and excessive medical care. Let us do justice to our task of serving as comprehensive advisors on health to the families entrusting themselves to us.

By pure chance we started publication of *Medical Ethics* in August 1993. Initially intended to serve as a newsletter, we have now set our sights on graduating into a full-fledged journal.

This goal will be better served if the first issue of each volume appears in January. We are therefore terminating Volume 2 with this issue. The first issue of Volume 3 will be published in January 1995.

Those entitled to receive Volume 2 will now be provided all four issues of Volume 3 in 1995, in addition to the two issues in 1994, without any extra cost.