

Progress is Earned Not Learned

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WE, as the children of Adam & Eve inherit the first sin, we benefit nothing from their experience/mistake as we repeat their error, at different times and in different ways. Being wise after the event emphasises that we do not learn from others.

The mistakes that are made and allowed to continue in the Progression of the under-developed world, be they social, economic or educational are they not a repetition of the blunders made and rectified in the developed world ?

The greatest mistake man makes is not listening to the wisdom of the history. He fails to explore the background that led to the evolution of ideas and relate his ideas to previous experience.

OUR IDEALS :

We, the so called elite and educated are uplifted and fascinated by the civilisation and progress of the people in the country where we were educated, there we learn their arts, science and gain technical knowledge. Do we ever try to understand all the effort and hard self denial that led up to this development ? Why and how did these people respond to the physical, mental and social sickness of their country, we copy without wisdom. We do not use our reasoning powers to help us to be creative in meeting the ideals of our population. Is it a natural phenomenon that the child finds his ideal in his father, his elder brother and later his teacher ? As he matures, by virtue of reasoning he comes to know that ideals cannot be taken for granted and he must develop the higher elements of his personality in the pursuit of his ideals and there begins the change.

OLD WORLD NEW WORLD UNDER DEVELOPED :

Europe, the old world, had developed slowly and achieved progress but not without resistance to new ideas and revolutionary experimentation in Medical Sciences and Technology. To cite but one example, Dr. Green who in 1828 noted that the Larynx tolerates a foreign body easily perfected a Catheter to look into the Larynx and Trachea. In 1847 he presented his finding to the Society of Medicine and Surgery in New York. He was criticised and was asked to resign from the Society.

It took another 50 years until 1895 for Bennett to re-introduce the same idea and 9 years later the Branderscopy technique was perfected in the U.S. by Chevallier Jackson.

New ideas had to take refuge in the New World — America — where zeal and courage brought about a new order of things, that has become the standards for all the world. All progress contains seeds of new problems and in the Scientific and technicological

approach to medicine one very important aspect of medical care was forgotten — the concept of patient/doctor relationship.

Today's sophisticated modern approach to medical training does not stimulate the reasoning and curiosity of the young students, they are not exposed to the community needs and the new graduates have not had the benefits of being taught by argument, discussion and disputation.

The world today searches for a Graduate Scientist, a humanist (doctor) who is interested in pure science as well as in the community ailment for the epidemiology and the natural history of diseases rather than the isoteric disease and rare syndroms isolating himself in close un-personified institutions and deal with disease and laboratory technical data, neglecting the human being.

Bahrain has created a highly sophisticated secondary care system and is indulging on tertiary care facilities. This was emphasised in the sixties to keep up with the trend created for our graduate doctors. Fortunately at the same time educational institutes and health agencies realized the need of a new approach and new trends in teaching medical sciences to remedy the big vacuum precipitated over the century by University professors not recognising the role of the General Practitioner in the medical profession.

Appropriate steps were taken in Bahrain by the Ministry of Health to correct this void by creating the facilities for the Primary health care, encouraging the young doctor to consider specialising in Family Medicine. A programme of residency training in General practice was introduced. This went side by side with the training in other specialities and sub specialities both locally and abroad. The articles of Dr. Vincent Hunt appearing in this issue of the bulletin would cover the history of this trend in the world and the programme adopted in Bahrain in affiliation with the American University of Beirut to be a certifying body.

The Ministry of Health expects that the future family medicine specialist will have a great impact on the health of the society and hopes that the family doctor will meet the expectation of the public, exemplify the good physician in terms of his accessibility, availability, sensitivity and concern, in addition to his sound knowledge and scientific approach. His attitude should reflect the social, economic and cultural realities of his nation. □□