

Text for RTI application

Question

1. Are persons with M.D. (Radiotherapy) degree only, no training and specialization of DM medical oncology or DNB medical Oncology, should give chemotherapy in government institutes where functional MEDICAL ONCOLOGY department with trained and qualified DM (Medical Oncology) super specialist exists in modern India?

Explanation

As per the code of ethics and regulation laid by Medical Council of India 2002 (updated 2016) , as mentioned in their official draft (see below)

2. 7.20

A Physician shall not claim to be specialist unless he has a special qualification in that branch.

Medical Council of India. Code of Ethics Regulations and Act, 2002 (Updated up to 8th October 2016) .Available at

<https://www.mciindia.org/ActivitiWebClient/rulesnregulations/codeofMedicalEthicsRegulations2002>

Allowing MD radiotherapy to give chemotherapy despite having a functional medical oncology department with trained and qualified DM (Medical Oncology), is direct violation of above Act and regulation promulgated by Medical Council of India

Intricacies of chemotherapy

Modern day chemotherapy protocols includes complex multidrug, intensive regimes especially for paediatric, hemato-oncology, adult and elderly cancer patients which is often harbinger of diverse and sometimes, life threatening complications. **Giving high dose chemotherapy** with intension to cure can result into life threatening febrile neutropenia, irreversible nephropathy, hepatitis, neuropathy and cardiomyopathy, dysarrythmia and dyselectrolytemia.

Giving less dose (to avoid facing complications) can lead to reduce response rates and compromising survival outcomes especially in paediatric and haematological malignancies which are otherwise curable in two-third cases.

Modern era India

Gone are the days when India had dearth of trained and qualified DM Medical Oncologists. Now all premier apex institute have 10-14 seats for candidates pursuing DM medical oncology like AIIMS, Tata Memorial Hospital, Kidwai Memorial, Gujrat cancer research Institute, Adyar Cancer center (WAI), Chennai etc. Equal numbers of students are passing out with DNB medical Oncology qualification in India. These trained and qualified doctors are joining several government institutes in department of medical oncology and are actively promoting better outcomes in cancer patients with optimised and rational use of chemotherapy combinations.

Being trained with 3 years rigorous workload in several premier institutes in department of medical oncology, these DM medical Oncology doctors with help of their mature skills and refined knowledge are better equipped to deal with curable and sometimes advanced malignancies with complicated multidrug chemotherapy protocols. Moreover, their training make them more refined to deal with complications and emergencies seen with handling complex, multidrug, multi-dose chemotherapy protocols which is grossly missing during MD radiotherapy training.

Arguments given by proponents of giving chemotherapy by MD radiotherapy colleagues is that they had topic of chemotherapy in theory MD radiotherapy exam, which in reality is often few months of training under radiotherapy department. This often make things difficult especially in handling complex multi drug curative chemotherapy protocols followed for paediatric and haematological malignancies and handing toxicities is another grave challenge. Moreover, MD radiotherapy has 1 year training in radiation physics and radiation biology, which is twice more in duration compared to chemotherapy exposure in MD radiotherapy training, but it is very unlikely to see any MD radiotherapy doctor practising radio-physics and radiobiology!

Medical graduates undergoing M.B,B.S degree and exposed to general surgery and obstetrics, but seldom they are termed specialists (as per point 7.20, mentioned in MCI code of ethics). For that they need to have been qualified as MS general surgery or MS obstetrics/gynaecology. Similarly, MD General

medicine are rotated through cardiology ward and neurology ward postings, but they seldom term themselves as cardiologist and neurologist; until they further specialize in DM cardiology or DM neurology. How can that same principle not applied in case of DM medical oncology who have qualified MCI degree to practice chemotherapy compared to MD radiotherapy, trained for radiotherapy.

It is high time medical council of India, being an apex body should intervene and clearly state the role of DM medical oncology versus MD radiotherapy in giving complex multidrug chemotherapy protocols, especially in those academic centre of excellence where an active and functional department of medical oncology exists in form and shape.