Interview with Dr. Ketan Desai, President of the World Medical Association 2016-2017, and Dr. Ajay Kumar, Indian Medical Association: Rise in status of WMA as the world health force; professional autonomy of Indian doctors

Ketan Desai  President, World Medical Association 2016-2017
Ajay Kumar  Indian Medical Association

Interview:
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(Saturday, October 22, 2016, during the WMA General Assembly, Grand Hyatt Taipei, Taiwan)


*1 This is an interview, during the term of the World Medical Association General Assembly, at its venue, Grand Hyatt Taipei. Japanese translation of this interview is published in Rinsho Hyoka (Clin Eval). 2018; 46(1): 107-11.

*2 An associate member of the World Medical Association; A member of the Japan Medical Association
Interviewer We wish to congratulate Dr. Desai to be inaugurated as the President of the World Medical Association (WMA), for the term until 2017 October.

Desai Firstly, the tenure of the WMA president is limited to a year. This is very little time to achieve anything important. Secondly, WMA is basically an advocacy body. They make resolutions or recommendations. Ultimately, it has to be implemented by the respective governments. What I said in my inaugural speech is that WMA should rise and take their status to such a level that any government whenever they want to formulate a policy must take the inputs of WMA. Right now, the government is taking inputs from WHO or United Nations (UN) agencies.

The situation is improving, but it requires more speed. WMA was established in 1947, so 70 years have already gone. I have suggested number of things, and out of these, I have asked them to take two things on priority. One is what I have already said about WMA should rise so that governments take inputs from WMA. Second is similar to international peacekeeping force which works in countries with warlike situations, there has to be world health force. Wherever some natural or unnatural calamity occurs, local government is not in a position to manage. During such time, the world health force will go and take over the situation. This will ensure that no citizen suffers because of lack of health facilities.

Interviewer In the previous interview, we heard from Dr. Kumar about your story and it was surprising that Indian doctors have strong power regarding setting up of medical universities and physician certifications.

Desai Right from college days, I used to contest for the elections of the inner city senate, vari-

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ous inner city bodies, then state medical council, then Indian Medical Association, and Medical Council of India. I have moved forward step by step.

As for the law that Medical Council of India set up medical universities and physician certification, it was brought in during my tenure. There is single entrance test in the whole country for undergraduate and post-graduate admissions. This was implemented this year successfully. This has eliminated all possible irregularities and corruption in the admission process. Now admissions to all medical colleges, whether private or government, are based on the merit list prepared by the entrance examination. Earlier, there used to be many exams and most were held on Sundays in the month of May and June. As a result, students were appearing for some exams and losing opportunity to try in other colleges due to clashing of exam dates. This also made the exams expensive as the students had to pay fees for appearing in all these exams. Further, it meant that the students had to travel around the country, and this meant additional stress to the young student. Being a girl, this added to the mental stress of the parents since they need to travel along with their children. The single entrance test has given tremendous relief to the medical aspirants.

Interviewer: We deeply respect such great contribution of Dr. Desai to Indian medical situation. Also looking forward to your activity for WMA. By the way, in the previous interview in 2014*3, as well as in the lecture meeting in 2013*4, both in Tokyo, Dr. Kumar talked about problems of clinical trial in India. Now Indian regulations for clinical trial have become so strict.

Desai: This is because in India, 80% of the population is treated by government hospitals; the

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rest being affluent are treated in a private hospital. However, in government hospitals, there are always certain constraints and compulsions, as you cannot expect five star facility in government hospitals.

**Kumar** On this issue, Dr. Desai is emotionally involved. Global companies have conducted many of clinical trials in India. There is a large section of vulnerable population in India who consists of illiterate women, children, and the elderly. They are also the treatment-naive population. For Western companies, India has been “favoured global site”.

Also we are fighting such situations that physicians come under the Consumer Protection Act where we are treated as traders and our patients as consumer, e.g., in the case of prenatal sex determination test, taking away the autonomy of the doctors. This is not possible in a medical profession which works ethically. Medical Council of India disagrees that the doctor is a trader and the patient is a consumer. We are opposing the government on these issues, and under Dr. Desai’s leadership.

**Interviewer** What is the essence of Dr. Desai’s leadership?

**Kumar** If you saw the enthusiastic group of doctors who came here for the installation of Dr. Desai, it speaks volumes about his popularity. I am a member in the World Medical Association for the last 14 years. I have not seen more than 10 people from any country when a president takes over. But in Dr. Desai’s case, there were more than 130 doctors coming from India just to felicitate him. In fact, about 1,000 doctors wanted to come for the felicitation, but we told them that only those doctors who are office bearers and hold positions in the Indian Medical Association should come in the felicitation. As a result, only 130 members arrived. Additionally, the organizer did not permit more than 130 due to lack of space. This speaks volumes about his popularity in the Indian medical community, which is about 600,000 in number.

Dr. Desai is a professor of urology. He is the head of the department of urology of a very renowned medical college in India. Sometimes when there is difference of opinion, Dr. Desai will not say a word in such situation. He will leave us in almost a chaotic situation. He then finds an appropriate time to interfere and ask everybody to settle down and then he will address the meeting.
Everybody will then understand his viewpoint and then they will follow him. This is the quality of a good leader. Another characteristic he has is he listens a lot, but talks very little.

Interviewer Where does his charisma originate?

Kumar Firstly, Mahatma Gandhi came from the same place, Ahmedabad, from where Dr. Desai comes. He must have learnt a lot from Gandhi, because all his activities and actions are like Gandhi. Secondly, Narendra Modi, India’s prime minister, also comes from the same place. So, probably, there is something in the soil of that place.

Interviewer Thank you so much for all of impressive talk. We believe growing in strength of WMA led by President Dr. Desai. Also appreciate Dr. Kumar for your acceptance of our second-time interview.

Dr. Desai, Dr. Kumar, and interviewers.

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