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18 YEARS OLD - TIME FOR NATIONAL IDENTIFICATION

Pakistan Society of Neurology (PSN) is organizing 18th Annual meeting in April 2011. For individuals, 18 years is considered to be the age of maturity, and this is recognized by provision of national identification card, voting rights, and several other rights. However, for organizations, 18 years may not be a long time. Pakistan Society of Neurology has taken birth from Pakistan Academy of Neurological Sciences (PANS), which was a joint organization of neurologists and neurosurgeons of Pakistan. In a short period of time it has evolved into the most important body of neurologists of the country. Despite the small age, the society has achieved many feats; yet, there is still a long way to go.

In the year 2011, American Academy of Neurology is organizing 63rd annual meeting, American Neurological Association is organizing 136th annual meeting, European Federation of Neurological Sciences is organizing 15th annual congress and World Federation of Neurology is organizing 20th World Congress of Neurology that is held every 4 years. Ours is the 18th annual meeting. I have been involved directly in the management and organization of two of these eighteen meetings, the first in 2006, when Shifa International Hospital, Islamabad hosted the meeting, and then again in 2010, when Bolan Medical College was the main host, with Shifa being the co-host as the meeting was moved to Islamabad in last minutes. I had the honor of asking some of the stalwarts of neurology in Pakistan about the initial meetings, and it is great to know that the meeting has come of age. Starting from monthly meeting of few interested people, evolving into a half day national meeting, the annual meeting now is a 2 day event that rotates between provincial capitals and federal capital. The participation has increased both in terms of attendees, and the scientific contribution. One of the major credits that go to the meeting is providing a platform where the original research done in Pakistan can be shared among colleagues. Many publications from Pakistani neurologist were first presented in this meeting. Provision of a forum for the neurology community to sit and discuss issues of mutual interest and concern is another credit to the meeting. To encourage neurology education, research and advocacy, the Best Neurology Teacher Award, the Young Investigator Award, and the Neurology Advocacy Award, bestowed in these annual meetings have had significant impact on promotion of academic and research culture among the neurology community of Pakistan.

Practice parameters and guidelines are developed to standardize patient care, and make decision making easy for the treating physicians. Diseases that are common, and afflict a large number of people are mostly the target of guidelines. Several international organizations develop disease specific guidelines, but recommend that rationale adjustments be made to suit the local needs of every country or region. Not only should that but the application of guidelines be individualized according to every patient's situation. One of the credits that go to Pakistan Society of Neurology is the development of local guidelines. So far, with the involvement of neurologists across the country, the society has been able to publish local guidelines for ischemic stroke, and peripheral neuropathy, which are two of the most common chronic neurological ailments. Some more guidelines are in the offing.

Through the guidelines and educational seminars, the society is increasing awareness among the physicians. Not only that, but on its own behalf and through sister organization

like Pakistan Stroke Society, Pakistan Headache Society, etc. the society also organizes frequent public awareness seminars, neurology related health camps, and public education efforts through media. In the recent past, there is addition of public awareness program on various topics during or at the end of the proceedings of national meetings. Stroke, epilepsy, multiple sclerosis, dementia and headache have been the recent themes for these awareness activities.

With all these achievements, there is a lot more ground to cover. Neurology remains one of the most under-recognized and under-appreciated specialty. Neurologists are not recognized at individual level, or as a community. There are very few recognized posts for neurologists in the government and private sector hospitals. Most medical colleges and teaching hospitals of Pakistan are functioning without a neurologist. There are no posts for neurologists at most secondary and tertiary care hospitals in the public sector. An alarming number of locally trained neurologists are moving out of the country, primarily due to lack of jobs, or very poorly compensated jobs. A recent trend is that teams of foreign hospital administrations come to Pakistan, interview local folks and lure them to go to their respective hospitals on good salaries. This is further adding to the brain drain which starts soon after the students graduate from medical colleges despite shortage of physicians in Pakistan.³

In the recent past, many new neurology training programs have been approved by College of Physicians and Surgeons of Pakistan. Nonetheless, the neurology training is not standardized, and there is lack of uniformity. Due to lack of standardization of training, the trainees do not get equal opportunities and exposure to various aspects of training. The trainees at private teaching institutions with advanced technology are exposed to more sophisticated aspects of training, whereas their counterparts at other institutes do not get any exposure to some of the advance technology. Similarly, the patient exposure, the hierarchal supervision, and gradual transition from all supervised to all independent varies greatly from institution to institution. Although certain set of competencies is expected from the trainees, but structured plan to develop and assess those competencies is lacking. The FCPS part II final examination is a snap shot assessment, which does not necessarily judges certain required competencies. The log book for trainees is way outdated. The sub-specialties of neurology are not appreciated even among neurology circles, and only one training program offers training in neurophysiology and stroke neurology. Rest of the sub-specialties are not only under-served but also under-acknowledged.

Despite lack of appropriate data, it is well-recognized that there is abundant prevalence of neurological ailments, which is ever increasing due to increasing longevity of the population, and shifting pattern of illnesses from diseases of infectious origin to disease of chronicity.^{2,4} The national health policy has very little focus on neurological diseases.⁴

Neurology research in Pakistan is very primitive, and most of the research focuses on hospital based epidemiology. The only national forums for the trainees and neurologists, both to present their original research are the meetings of Pakistan Society of Neurology, which accommodate about 30 to 40 presentations including case reports and poster pre-

presentations every year. Some of the original research is presented in annual neurology update. One additional forum is the Annual Neurology Research Day for Medical Students and Residents in Islamabad that has now been happening for 4 years. Less than 5 papers are presented in international meetings by our neurologists annually. Large, collaborative, multi-center studies and data-bases are almost non-existent. Basic and interventional research is still mostly a dream.

Advocacy is a process used to bring about change in the policies, laws and practices of individuals, groups, institutions, and governments. By identifying the needs of the community, developing a plan of action, and bringing attention to the relevant issues, advocates take a leadership role in effecting change. The concept of structured advocacy training during the medical colleges, and post-graduate training is fast getting acceptance in developed world, however, this important aspect is conspicuously missing in our training programs.

It is now right time for us to look back and reflect as to what we have achieved over past 18 years or more for the cause of neurology in our country. As a small, but well knit group, it is imperative for us to recognize the need for our collective effort to improve the availability of quality neurology care for the patients, quality training for the aspirants in neurology, and standardizing neurology education at undergraduate and postgraduate levels. Not only that but once we have trained our colleagues, it is imperative to make arrangements for them to contribute to the country, rather than leaving the country as soon as they get a chance. Neurology research and neurology advocacy should not remain the talk of aliens. Working together, and committing ourselves for the cause of neurology, we can achieve what most of us aspire or dream, but do not dare.

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REFERENCES

- 1. Wasay M. Future of neurology in Pakistan. Pak J Neurol Sci. 2010; 5(1):iv-v
- 2. Shafqat S. Neurology in Pakistan a vision. Pak J Neurol Sci. 2006; 1(3):159-161
- 3. Shafqat S, Zaidi AK. Pakistani physicians and the repatriation equation. N Engl J Med. 2007 Feb 1: 356(5):442-3.
- 4. Wasay M, Ali S. Growing burden of neurological disease in Pakistan need for a national health survey. J Pak Med Assoc. 2010; 60(4):249-250
- 5. Wasay M, Hauth E. Advocacy training in neurology: scope and impact. Nat Clin Pract Neurol. 2008 Feb; 4(2):114-5.

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