Dr Sunil Pandya ended his lecture titled ‘Grant Medical College and Sir Jamsetjee Jejeebhoy Hospital: Foundation, Renown and Decline’ with this quote which encapsulated the topic succinctly, yet aptly. The Krishna Raj Memorial Lecture Series was instituted in 2006 in the memory of Krishna Raj, the founding editor of Economic and political weekly, to honour his consistent efforts for encouraging scholarships in the field of health studies. The Ninth Krishna Raj Memorial Lecture was held on 27th September, 2018 at the Seth GS Medical College and the King Edward Memorial (KEM) Hospital on the topic ‘Grant Medical College and Sir Jamsetjee Jejeebhoy Hospital: Foundation, Renown and Decline’. The lecture was organized by CEHAT (Centre for Enquiry into Health and Allied Themes), Department of Medical Humanities, Seth GS Medical College and KEM Hospital, eSocial Sciences, and The Forum for Medical Ethics Society (FMES). The lecture was delivered by Dr Sunil Pandya, a neurosurgeon renowned for his contribution to ethical medical practice.

In his lecture, Dr Pandya traced the history of medical education in India, starting from the establishment of the first medical school in Calcutta in 1822, to as it stands. He elaborated upon how the first medical school in Bombay set up in 1826 differed from its predecessors. Pioneered by Sir Robert Grant and Dr Charles Morehead, it did not aim to produce mere assistants to British doctors, but aimed at producing fully qualified medical practitioners capable of rendering medical care of high quality to their fellow-countrymen. The Grant Medical College and Sir Jamsetjee Jejeebhoy Hospital hence opened to medical students in the year 1845; the hospital was established with a generous donation from Sir Jamsetjee Jejeebhoy who held that the attachment of a hospital with the medical college was imperative for students to gain practical knowledge and ethics of the medical profession.

Dr Pandya elaborated upon the workings, and the rigorous rules and regulations of the erstwhile medical college. The college inducted students regardless of caste or any other distinctions by virtue of birth, and taught only in the English medium, English hence becoming a prerequisite for studying in the college. Students had to attend classes for eight hours every day and had regular roll calls, were to engage in diligent note-taking under supervision, and learning medicine at bedside. There was exhaustive coverage of subjects, and weekly viva voce examinations were conducted in each subject to ensure comprehension and retention of teachings.

However, after the retirement of Dr. Charles Morehead, the Grant Medical College witnessed a decline in its quality of teaching and learning. Dr Pandya attributed the same to posts in medical colleges no longer being filled on the basis of merit, misuse of the provision of transfer to remote government medical colleges, and political interference in medical education processes.

Some significant points related to medical education were raised in the course of the lecture. It is significant to note that the foundation stone for medical education was laid by British individuals, who believed that there was great potential in Indian natives for imbibing knowledge, and delivering...
superior medical service. Another aspect which stood out was the expansive efforts of the early pioneers for not only institutionalizing, but also lending medical education the highest quality.

On the occasion, Dr S. P. Kalantri, Director Professor of Medicine at MGIMS and Medical Superintendent of Kasturba Hospital, too expressed his thoughts on the changing landscape of medical education. He spoke of the camaraderie among the great pioneers in medicine, who worked together to achieve a common goal. However, in the present day, medicine and philanthropy had come to acquire self-serving motives; humanitarianism had given way to roundabout benefits, profit-making, and a vast chasm in the trust between doctors and patients. The ethos of medical education had eroded to give way to generations of students who prioritized scores and rote learning to bedside medicine. The pillars of compassion, communication, empathy, and dedication toward public health were withering; it is now common to witness students who take up the medical profession not for serving the people, but for capital gain. He noted that India was the country of origin of majority of doctors emigrating to the United States.

The grim state of medical education in the country as it stands, mired in corruption, deteriorating quality, and dissatisfaction among students and teachers alike, calls for an urgent relooking at history to reconnect with what the early pioneers had envisaged for medical education in the country, to realign with their vision and mission to deliver medical education of the best quality, for, as George Santayana said: Those who do not know history's mistakes are doomed to repeat them.

*Dr Sunil Pandya has authored a book on the same topic, which shall soon be published by Cambridge Scholars Publishing House.*