

“Punishing a couple of doctors for taking cuts will deter others

Dr Ramakanta Panda was better known as the eminent cardiac surgeon who was called to AIIMS to operate on then PM Manmohan Singh in 2009. That was before June 12, when his hospital put up a hoarding near Mumbai airport which said: “Honest opinion. No commission to doctors.” It kicked up a storm, and since then the 63-year-old has become famous as the doctor who had the courage to take on the practice of giving commissions to doctors to get patients, a countrywide menace. He speaks to Rema Nagarajan about the initiative

What sparked off the decision to put up the billboard? Why now?

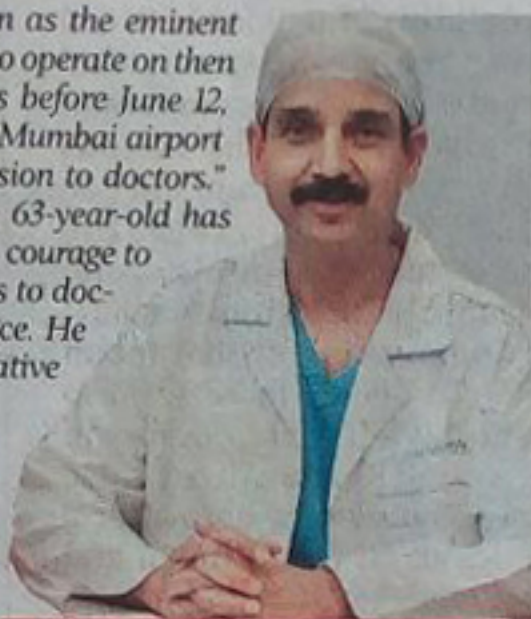
When I started my practice, only about 2-5% doctors indulged in giving commission or cuts to have patients referred to them. They were looked down upon by

the entire medical fraternity. By the time I finished my training abroad and

returned in 1993, it was bad. But now, ‘cut practice’ has moved from the fringe of medical practice to its core, with majority of doctors practising it. In some areas 80-90% of general practitioners are into getting commissions for referrals. I’m in the last phase of my professional life. I have always wanted to do something to give back to society. I have decided to dedicate the last 10 years of my active professional life to fighting this menace. It wasn’t an easy decision but I felt this was the right time. The government too is in the right frame of mind to take it up.

What was your reaction to Indian Medical Association’s objections to the billboard?

I was surprised by their demand that we take down the billboard. Our hoarding has two sentences: “Honest Opinion. No Commission to Doctors.” We haven’t said anything derogatory about anybody. So what were they objecting to? I told them to join us as this was a burning issue and a problem doctors themselves were facing. So we put up 10 more billboards across the city. Many alleged that we were doing it for publicity. But this is not an ad. This is a campaign that we want to take up not only in Mumbai but also at the



gled out. Most organisations have an induction programme when a new employee joins, to orient them about the rules and regulations of the company. Introduction to ‘cut practice’ is the medical equivalent of this induction programme. It then goes on to become a way of life. At the first level, cut practice makes one doctor fleece another. Then together, they fleece the patient. It’s a rotten practice that many young doctors don’t want to be a part of. It has also led to additional treatment and investigations, thus affecting patients too.

How realistic is it to expect this to end?
We don’t expect that we will be able

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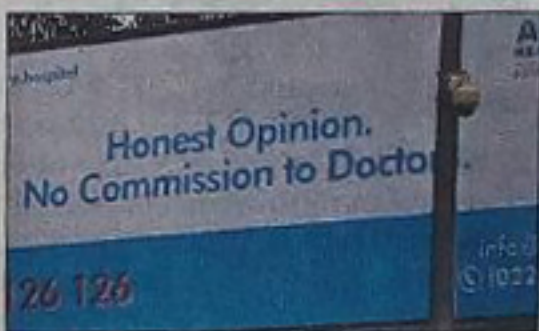
national level. It’s a campaign to build pressure to do something about it.

How have doctors and society reacted?

The kind of response we have received via post, mail and messages is overwhelming. One of the most satisfying was the appeal of a young radiologist, who corrected us by sharing that the cut is not 30-35% (as we had written) but 40-60%! The doctor pleaded with us: Please don’t stop. Some of the biggest names in medicine have come forward to support us from across the country.

Why should patients care about cuts to doctors? How does it affect healthcare?

We interviewed a radiologist last month for a job. When we asked why he left his practice, he was in tears saying that as a newcomer he had to pay 50% as cut practice and could not survive. And he’s too scared to speak up, for fear of being sin-



to eradicate it. But we need to get it down to at least 20%. It will take a lot of doing. It has to be a top-down and bottoms-up approach. At the top we have to work with government to bring in regulation to penalise those who indulge in this practice. Just exemplary punishment for two or three who do it will be deterrent enough. We are looking at our existing laws, like the Prevention of Corruption Act, and also studying anti-kickback laws from the US and UK. At the bottom we have to work with ethical doctors, to bring them together, because laws alone won’t work. We are launching a website named ethicaldoctors.com to reach out to these doctors. There is consensus that doctors and hospitals need to recommend changes in rules and regulations, and their enforcement. Over the last few decades, we have seen rot of unimaginable magnitude. This has to stop.