

Financial situation of medical physicians in India

To the Editor: In reply to many colleagues asking for the financial situation of medical physicians in India and its overall implication on the health services, I take this opportunity to highlight the following facts: Just after the completion of Bachelor of Medicine and Bachelor of Surgery (MB, BS), that is the basic degree for doctors they have to go through 1 year period of internship where they are attached to various specialities on a rotation basis. During internship they get a stipend of 1200 to 2000 Indian Rupee (INR) (20-53 Euros) per month depending on the state in which they get their degree. Following internship once the doctors are registered with the Medical Council of India, they can work in medical establishments such as hospitals as junior residents. This is when they get a salary of 10,000 to 20,000 INR (166 to 300 Euros) per month depending upon the state and their experience. Once they reach the level of Associate Professor the take home salary is 25000 INR (400 Euros) per month. At the level of Professor this salary increases to about 36000 to 40000 per month (600 to 700 Euros).

At the beginning of their careers the doctors struggle to make ends meet. Even after post-graduation or super-specialization the pay structure does not commensurate with their capabilities.

The doctors are not only underpaid but these days they have also lost respect. One cause for this is black sheep amongst us who malign the profession by indulging in unethical practices. The problem is compounded by the acute shortage of qualified doctors in villages and small townships. The lack of infrastructure especially in peripheral areas is a major disincentive for medical personnel to practice in these regions leaving the health of the majority of the population at the mercy of quacks. Another possible reason for doctors avoiding peripheral area postings are the 'intolerant' patient or patient's relatives. The instances of doctors being beaten up by the patients' relatives if the patient dies are not uncommon especially in these areas.

To summarize, the present scenario for doctors in our country draws parallels with Archibald Joseph Cronin's account of medicine in the United Kingdom in the early 20th century.

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