



Indian Journal of ORTHOPAEDICS

Volume 48 | Issue 6 | November - December 2014

In this Issue

- Minimum (optimum) standard of orthopedic care for all: An achievable target
- Pedicle screw piercer with warning device - A technique to increase accuracy of pedicle screw placement: A cadaveric study
- Biomechanical comparison of pedicle screws versus spinous process screws in C2 vertebra: A cadaveric study
- Navigated pedicle screw placement using computed tomographic data in dorsolumbar fractures
- Minimally invasive transforaminal lumbar interbody fusion: Results of 23 consecutive cases
- Thoracolumbar fracture dislocations treated by posterior reduction interbody fusion and segmental instrumentation



and insufficient infrastructure.¹ Both the malaria cycle was discovered in India; we started early on without having much facilities. Things have changed phenomenally since then. It is inappropriate to say that, since we often do away with research under the pressure of care. No doubt, for the surgical fraternity to pause for introspection and ponder about sincere and regular scientific inquiry that is all research. However, shall we not put some day for research alone? Should we have a research holiday in a week in teaching institutions is a trade-off for a country like ours. Do we have a system to retain and nurture talents further? It is humanly impossible for busy clinicians to do quality research in time and resource. Lack of digital clinical records in an easily retrievable manner and quality time to crystallize our genuine or insights are major factors. We also wonder how colleges and medical universities in this country earmark annual funds/research budget for intuitive and self-directed learning processes. Do regulations promote quality research? Should we involve the Medical Council of India and the Department of Medical Research to do something radical, e.g. to enact regulations to include research as prerequisites to ensure and maintain medical education instead or is it that putting our own house in order should be our first priority.

There is regional inequality in the standard of care.

Author's reply

Sir,

Thank you very much for sending the critical comments¹ on the editorial titled "Cultivate... research an attitude and learning a passion".² My replies are given below.

- I am extremely sorry if the editorial does suggest that by attitude for research and passion for learning we can compensate for the shortage of manpower and insufficient infrastructure. Most of the surgeons in developing countries are getting complicated clinical problems not only due to late presentation but also due to no treatment or inadequate treatment in a resource crunch environment. The evidence guides for neglected/delayed presentation cases are not available in the literature emanating from western countries. We the surgeon community working in a resource crunch milieu should critically evaluate our outcome of treatment and offer evidence based treatment to clinical problems unique to our land. Every experience while treating a patient should add to evidence building exercises. This in turn will make treatment
-

offered predictable and improve the outcome. We do have deficiencies in research infrastructure but at the same time financial allocation can be procured from funding agencies such as Indian Council of Medical Research, Department of Science and Technology and others. We have to break the vicious cycle by proactive efforts. We have to develop a research group conducting clinical research and then looking for financial support from funding agencies to develop research infrastructure. For us research is a necessity that is, finding evidence based solutions to clinical problems unique to us³

- Having a full fledged research infrastructure is a distant dream in a country where minimum standard of medical care to one and all has not been achieved. ⁴ No government or bureaucratic channel will understand the need of research better than us, the clinicians. We have to document and press for the case where research output has benefitted the patients at large and reduced economic burden on family, institution and country. I am sure day is not far when our administrator will help us in creating research infrastructure
- The author concurs with me that self-desire is the key to learning. Passionate learner utilizes even the scarce available education resource to the maximum
- I do agree that wasteful expenditure to research finding should be avoided by proper planning scrutinizing and calculating cost effectiveness of the research. This is possible if expert committee from funding agencies and institutional authorities do regular audits of infrastructure created
- Study quoted by the author does tell us about the misgivings about the research among the surgeon practitioners. Probably that itself suggest how important it is to cultivate an attitude for research
- Probably my last concluding remarks “that the attitude for research compensate for the shortage of manpower and insufficient infrastructure” were not understood

in the true spirit as it was written. We meant that if we offer a rational, evidence based treatment, generated in an available milieu where the treatment is executed will reduce the complication rate and produce predicable outcome which in the long run will reduce the chances of redo surgeries/treatment. It is most important in a resource crunch environment to use infrastructure judiciously that is, get it right for the first time

- I cannot agree more on the last issue that we have to have better documentation of clinical information, have an earmarked funds for research and self directly learning and if possible research hours.

A. K. Jain

Department of Orthopaedics, University College of Medical Sciences and GTB Hospital, Delhi, India

Address for correspondence: Prof. A. K. Jain,
University College of Medical Sciences and GTB Hospital,
Delhi - 110 095, India.
E-mail: draniilkjain@gmail.com

REFERENCES

1. Borgohain B, Saikia B, Sarma A. Cultivate... research an attitude and learning a passion. *Indian J Orthop* 2014;48:630-31.
2. Jain AK. Cultivate... research an attitude and learning a passion. *Indian J Orthop* 2014;48:125-6.
3. Jain AK. Research in orthopedics: A necessity. *Indian J Orthop* 2009;43:315-7.
4. Jain AK, Kumar S. Bone and Joint day-India. *Indian J Orthop* 2013;47:435-6.

Access this article online

Quick Response Code:



Website:
www.ijoonline.com