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## Author's reply

Sir,

Thank you very much for sending the critical comments<sup>1</sup> on the editorial titled "Cultivate... research an attitude and learning a passion".<sup>2</sup> 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 us<sup>3</sup>

- 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. <sup>4</sup> 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.

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