From the Editor’s Desk

GOOD AND SAFE DOCTORS

Topics that usually evoke heated debate among doctors include regulation, revalidation or recertification, rationing, and remuneration. Of these, the failure of regulation to ensure good and safe doctors invariably spills over into the media and is accompanied by a loss of public trust. But the issue is not black and white. As Sir Liam Donaldson, Chief Medical Officer for England, notes:

“There is little disagreement with the assertion that . . . every patient is entitled to a good doctor. Yet, there is no universally agreed and widely understood definition of what a good doctor is. Nor are there standards in order to operationalise such a definition and allow it to be measured in a valid and reliable way.”

In the United Kingdom, professional regulation is central to the General Medical Council, which sets standards and ensures only qualified doctors are registered, and deals effectively and fairly with concerns about individual doctors. But despite these clearly defined roles, scandals such as the Bristol mishaps and the Shipman Affair continue to plague British medicine.

In Australia, our regulation system is more diffuse, with a plethora of state and territory medical boards, as well as the Australian Medical Council. Unhappily, we too have experienced damaging scandals, as instanced most recently by the “Butcher of Bega” saga.

The Council of Australian Governments has recently agreed to move to a national medical registration system. However, such a system provides no assurance that further scandals will be avoided; nor does it necessarily guarantee that every patient will be cared for by a good and safe doctor. Instead, what we will have is a national system saddled with another complex tier of bureaucracy in conjunction with state institutions, and an overlap in responsibilities.

Importantly, optimal health care delivery remains essentially a human function, and its regulation requires clear and concise communication with as little background noise as possible.

Martin B Van Der Weyden


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IN OTHER JOURNALS
Teaching Tamil Tigers

An article in our recent Christmas issue provoked a huge response, both critical and complimentary.

We can not publish all of these responses, but a selection is reproduced here

(MJA 2007; 187: 703-705)

Asoka Girihagama

TO THE EDITOR: In his article “Teaching Tamil Tigers”,1 Whitehall gives the grossly false impression that the Sinhalese majority and Tamil minority are fighting with each other in Sri Lanka. It is not a conflict between Tamil and Sinhalese communities, but a terrorist issue. The terrorist organisation that calls itself the Liberation Tigers of Tamil Eelam (LTTE) is fighting the elected government of Sri Lanka in an attempt to carve out a separate monoethnic state in areas in the north and east of Sri Lanka. The LTTE’s terrorist approach is denounced by most of the democracies of the world.

The LTTE claim that the Tamils in Sri Lanka are discriminated against by the majority Sinhalese. This claim is contradicted by the fact that the 54% of Tamils who live in the southern part of Sri Lanka live in harmony with the Sinhala and Muslim communities. In the south, Tamil businessmen perform better than their Sinhala counterparts in Colombo; Tamil students continue their university studies undisturbed; and the Tamil language is treated as one of the official languages, on a par with the Sinhalese language. These are facts publicly available for all.

Whitehall claimed that “the conduct and cost of the conflict is obscured by suppression of the press on the government side and lack of access of the press to the other” — an unfounded statement that is deliberately crafted to tarnish the image of the Sri Lankan Government. Perhaps Whitehall is unaware of the numerous newspapers and other publications available in Sri Lanka that openly criticise the government and its conduct, and of the many international journalists and press organisations that report on the current situation in Sri Lanka on a daily basis to the rest of the world without any hindrance.

Whitehall referred to Kilinochchi as the administrative centre of the “Tamil” land. He appears ignorant of the fact that there are no separate lands for Sinhalese, Tamil and Muslim communities on the island. There is only one territory in Sri Lanka, and that territory belongs to all its people.

Whitehall describes the poor conditions at Kilinochchi Hospital. Kilinochchi was predominantly controlled by the LTTE terrorists, against whom the government forces are fighting to liberate the civilians. The LTTE requisitions whatever provisions are sent to the region by the government and utilises them for their cadres. Unfortunately, the outside world seems unaware of this situation.

Perhaps Whitehall’s opinion would be different if he was aware that the LTTE has been proscribed in the United States, the United Kingdom, Canada, the European Union and India because of its atrocities against innocent civilians, politicians and moderate Tamils who disagree with the LTTE philosophy, and because of the assassinations of the former Indian Prime Minister Rajiv Gandhi and the former Sri Lankan President Ranasinghe Premadasa. The former Foreign Minister of Sri Lanka, Lakshman Kadirgamar, an ethnic Tamil, was also assassinated by the LTTE.

Terrorism should be condemned wherever and whenever it manifests. The Sri Lankan Government is democratically elected and reserves the right to protect its citizens and the sovereignty and integrity of the state against a terrorist organisation. While using military forces to eliminate terrorism on its soil, the government of Sri Lanka is continuing its efforts to find a lasting solution to the conflict.

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Sri Lanka College of Paediatricians

TO THE EDITOR: The Sri Lanka College of Paediatricians views with great concern the publication of Whitehall’s article “Teaching Tamil Tigers”1 in the Journal.

Whitehall’s article ignores the ground situation and the actual realities in the Northern Province of Sri Lanka. Furthermore, it represents a biased and misleading point of view. It focuses on creating sympathy for the Liberation Tigers of Tamil Eelam (LTTE), without giving any credit whatsoever to the good work done by the Sri Lankan Government in protecting civilians, preserving democracy and maintaining health services and civil administration in the north in the face of enormous obstacles placed by the LTTE, a terrorist organisation.

Whitehall was not registered with the Sri Lanka Medical Council during his stay in the country, and thus the alleged “services” he claims to have provided constitute an illegal act under the laws of the Democratic Socialist Republic of Sri Lanka. In view of this, his purported honest and sincere intention of being of service as a doctor in the Northern Province is of dubious value.

Another cause for concern is the fact that Whitehall provided training to members of the medical wing of the LTTE. The government provides training to medical students at the University of Jaffna in the Northern Province according to the established norms and procedures for undergraduate medical education, as stipulated by the University Grants Commission and Sri Lanka’s Postgraduate Institute of Medicine. Thus, there was no necessity for Whitehall to teach medicine to LTTE cadres, who would, in any case, be inadequately educated and patently incompetent at performing responsible medical duties. There are fully trained doctors currently serving in the Northern Province, including those from the Sinhalese and Muslim ethnic groups.

The Sri Lankan Government provides free medical services (including all infrastructure facilities, personnel, drugs and vaccines) to all citizens of Sri Lanka, including those in the Northern Province, irrespective of race, caste or religion. Thus, there is no truth in Whitehall’s claim that the government does nothing for the Northern Province. In spite of severe problems, mainly caused by the LTTE, it makes every effort to ensure that essential medical supplies reach the LTTE-controlled northern part of Sri Lanka, which includes the hospitals at Kilinochchi and Mullaitivu. The costs of medicines, consumables, meals, capital expenditure, maintenance, and salaries of all hospital staff are borne by the government of Sri Lanka. Free immunisation programs are also provided

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by the government. All these facts show that the government is genuinely concerned about people in the Northern Province and does its utmost to help them.

It is pertinent to ask whether any country in the enlightened world, including Australia, would allow a foreigner who blatantly abuses the laws of the country to work and teach in that country. Would any civilised country allow people who are not properly registered with the relevant medical council to practise and to teach paediatrics to terrorists in that country? It is also disappointing that a medical journal of a country committed to eradicating terrorism from the world has deemed it fit to publish an article of this nature.

Whitehall admits that he has written the said piece at the behest of the LTTE. This is obviously another publicity stunt by the LTTE to try to rebuild their deteriorating image internationally. In our opinion, by associating with a terrorist organisation that has been banned in many areas of the globe, Whitehall has blatantly violated the hallowed fundamentals of the Hippocratic Oath.

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John S Whitehall

IN REPLY: I assure the Deputy High Commissioner of Sri Lanka and the Sri Lanka College of Paediatricians that I did look at “the actual realities” during 6 months of visiting hospitals and participating in tsunami relief in the south of Sri Lanka and teaching paediatrics in the Tamil north. I did see another side of the story that I felt needed telling, though not “at the behest of the LTTE [Liberation Tigers of Tamil Eelam]”. I observed a great disparity between the health facilities in the north and south of the country, and witnessed the stunting and wasting of Tamil women and children.

I did go through a government-approved channel, using lawful means. I was employed by an international organisation that handled my visit and redirected me, after arrival, to teach in the north. Before that, I had never knowingly met a Tamil Tiger. If my organisation did not register me with the Medical Council, it would not have been unusual in that post-tsunami period, when many organisations brought doctors from a range of countries into Sri Lanka.

I do not wish to name my organisation for fear of endangering its workers. Seventeen members of the French-based organisation Action Against Hunger have been murdered and, according to the Sri Lanka Monitoring Mission, “the Security Forces of Sri Lanka are widely and consistently deemed to be responsible”.

I abhor terrorism as much as most, but the question for Sri Lanka is: “Who is terrorising whom?” The use of terrorism by the LTTE is well publicised. Its use by the state is not, yet its aerial bombing has killed civilians, destroyed facilities and emptied villages, according to church sources. Over 250,000 people have been displaced, and “a deliberate policy of extrajudicial killings and abductions of Tamils” has resulted in hundreds of deaths and the disappearance of over 1000 people since early 2006. The dead include 23 aid or church workers and 68 children. Tamils fear that the underlying intention is genocide. It is hard for me to believe that the government is “protecting [Tamil] civilians” and doing its “utmost to help them”. Has the Sri Lanka College of Paediatricians protested the suffering of Tamil children?

Contrary to the Deputy High Commissioner’s assurances of freedom of the press in Sri Lanka, seven media workers have recently been killed, and in 2007 the country earned 156th place in a Worldwide Press Freedom Index, just above Somalia.

The statement of the College of Paediatricians that there was “no necessity … to teach medicine to LTTE cadres, who would, in any case, be inadequately educated and patently incompetent at performing responsible medical duties” is ignorant of “the actual realities”.

These practitioners began medical studies in 1992 based on the curriculum of the University of Jaffna. Since then, theory has been complemented with long periods of clinical responsibilities — from staffing field and civilian hospitals during warfare and peacetime to dealing with cholera and malaria outbreaks, the chronic problem of tuberculosis, the acute needs of tsunami victims and the constant needs of sick children. They function as medical officers of the Department of Health of the defacto government of the vast north-east region, historically inhabited by the Tamil race, whose needs exceed the capacity of the relatively few government doctors who, I acknowledge, do a great job with limited resources.

They wanted to learn more paediatrics. Should they have been left “inadequately educated”? For me, that would have constituted medical malpractice. Regarding the Hippocratic Oath, I assure the College of Paediatricians that I stayed in Kilinochchi “for the benefit of the sick, remaining free of all intentional injustice”, but I must confess that things I saw and heard in the course of the treatment I have not kept to myself, believing silence to be more “shameful”.

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cle=20798 (accessed Feb 2008).

Martin B Van Der Weyden

COMMENT: The article by Whitehall1 provoked a barrage of 15 emails to the Medical Journal of Australia that either criticised the Journal for publishing such an article or questioned Whitehall’s agenda and some details of the article. In short, it was suggested that the article was nothing but a propaganda tool for Tamil terrorists or a blatant attempt to romanticise “the terrorists”. Others were perturbed that the MJA saw fit to publish such a confronting article. However, these criticisms were balanced by another 40 emails congratulating the Journal for having the courage to expose what is occurring in Sri Lanka.

The Journal strongly stands by its decision to publish Whitehall’s article, as it gives an Australian insight into the turmoil and suffering affecting people caught up in an internal conflict that is foreign to our stable and largely harmonious society.

Martin B Van Der Weyden, Editor

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