



National Journal of Medical and Allied Sciences

[ISSN Online: 2319 – 6335, Print: 2393 – 9192|Original article |Open Access]

Website:-www.njmsonline.org

BIOSOCIAL PROFILE AND PERCEPTION ABOUT MEDICAL PROFESSION AMONG MBBS ENTRANTS OF GOVERNMENT MEDICAL COLLEGE KANNAUJ

SK Barman¹, Arun Kumar Srivastava², Samarjeet Kaur³, Seema Nigam⁴, Dinesh Singh Martolia⁵

¹Assistant Professor, Deptt. of Community Medicine, GMC, Kannauj, ²Assistant Professor, Deptt. of Community Medicine, BRD Medical College, Gorakhpur, ³Lecturer, Deptt. of Community Medicine, GMC, Kannauj, ⁴Professor, Deptt. of Community Medicine, GSVM Medical College, Kanpur, ⁵Professor, Deptt. of Community Medicine, GMC, Kannauj,

Abstract

Introduction: Medical profession is solely different than other professions because they have to maintain a dynamic balance between profession and humanity, which is most difficult task in to-days scenario, hence it is the need of the hour to know about the medical entrants and their perception about their field of work. This study was carried out to assess the biosocial background of the medical entrants, to understand their perception about their profession and to make recommendations on the basis of results, so that the entire humanity can be served with humanly soul and spirit. **Material and Method:** The entrance batch of first year and second year was interviewed and data were collected on predesigned and pretested questionnaire in calm and favourable conditions enabling them to reply voluntarily. A total of 187 students were interviewed. There was around 10 percent non-response. Data was compiled using SPSS and percentages were used to analyze the categorical variables. **Results:** Among the participants male comprised of 57.7% and 42.3% were females. The majority of students were in the age group 21 to 24 years (74%). 79.6% were educated from English medium and rest from Hindi medium. Majority of the Medical Entrants want to do Private Practice in future(69.5%). Around 10.7% want to go abroad to work, 5.9% wish to join civil services, and 7.5% seek to join faculty position. Only 3.7% wish to join government job. **Conclusion:** The most important thing is to treat MBBS entrants with a spirit of affection and tenderness by means of behavioural change communication workshops and CMEs at the college level and through involvement of parents and peer educators, so that they can develop a compassionate attitude and shower affection and show dedication while treating the sufferers and the community.

Key words: Medical students, perceptions, profession

Author for correspondence: Dr. DS Martolia, Professor, Deptt. of Community medicine, GMC, Kannauj UP, India E mail: drmartolia10@gmail.com

Introduction:

Till date it has been difficult to obtain solid data concerning the doctor patient relationship, not least because a general definition of a 'good doctor' is lacking. In recent years, there has been much

scrutiny of medical school admissions procedures⁽¹⁾. This has shown that in Europe and the US a number of admissions procedures are in use, which vary from weighted lotteries to tough selection procedures measuring cognitive and/or non-

cognitive capacities of the applicants⁽²⁻⁷⁾. Medical profession has been known as a noble, respectable, consistent, and lucrative career choice in India. There are more than 360 medical colleges in India and around 50,000 fresh medical students graduate every year. During past few decades, health care scenario has rapidly changed and so have the Indian economy and the society. Health care has also become more technology centric, expensive, urban focussed, and privatized. India is known for the maximum doctor making country in the world, because in most of the developed countries our doctors are working with their proficient knowledge and skill. Dating back to Bhore Committee's recommendation for doctors patient ratio till date we are not able to establish this ratio. The efforts are being made at national and state level to meet out the deficit by opening new medical colleges. The present study was conducted among medical entrants of Government Medical College Kannauj U.P. with following objectives:

1. To assess the biosocial background of the medical entrants.
2. To understand their perception about the profession which they have joined.
3. To make recommendations on the basis of result, so that the entire huminity can be served with humanly soul and spirit.

Material and methods:

It was a cross sectional study, conducted from October 2014 to December 2014. Ethical clearance was taken from the institutional ethical committee. The total number of MBBS entrants of the batch 2012 and 2013 were included. They were addressed and informed about the utility of the study and importance of actual answers of the questions asked. A total of 200 students were approached to be included in the study and only 187 could be interviewed. The predesigned and pretested questionnaire was the tool for recording

the information regarding biosocial profile and their perception about the medical profession. Data was compiled using SPSS and percentages were used to analyze the categorical variables.

Results and Discussion:

Among the participants male comprised of 57.7% and 42.3% were females. [Table 1] The majority of students were in the age group 21 to 24 years 74% and least below 18 years (5.3%). Around 79.6% were educated from English medium and rest from Hindi medium. Only 17.7% students had schooling from U.P. board and about equal number from ICSE and CBSE board. [Table 2] While asked for reason for joining medical profession, the majority (47.0%) answered financial reason followed by pressure from parents or relatives who are doctors (18.1%), for position in the society (16.5%) and least commonly as a result of peer pressure (6.2%). [Table 3]. It is indeed discouraging that majority of the students have joined that medical profession because it is a very lucrative profession. This is a noble profession and unless the students feel compassion for the sick and the sufferers, they cannot be completely dedicated to the cause of reduction of human suffering. This is the reason that the journalists are always on the lookout for profit-making tendencies of doctors to bring them to disrepute in the face of the general public. This compromises the commitment and compassion of those few doctors who are actually working in the interest of the patients and thereby prevent the patients from having faith in the doctor community. As a result, lack of faith leads to delay in seeking treatment and as a consequence many of the disease that can be detected early, often come to notice at a later stage of the disease. This approach needs to be changed by highlighting the role of doctors as saviours of the community and teaching them that if they do their duty with full commitment, fame and finances are bound to follow. The majority (69.5%)

opted coaching for preparation of entrance exam and least (13.4%) private tuition.[Table 4] Around 47% of the students perceive that MBBS requires more study whereas 14.5% feel that it requires equal amount of study as pre-medical entrance. Majority of the students (54%) feel that time management is very important for study. It is good that the students realize the importance of time management as it will help them to succeed in life. Most of the students (69.5%) plan to do private practice in the future. Around 10.7% want to go abroad to work, 5.9% wish to join civil services, and 7.5% seek to join faculty position. [Table 5] Only 3.7% wish to join government job and actually serve the needy. This conforms to the finding that most of the students have chosen this profession to earn money and therefore they are least interested in doing a government job and serving the community at the grass root level. The high degree of commercialization and modernism prevalent in the society has actually influenced these doctors of the future. Although there is growing interest in the concept of family medicine in India and family medicine is emerging as a viable career option for medical graduates in India, our study indicates that students have not yet explored this avenue.(8)

Table -1: Biosocial characteristics of study subjects

Age group	Number	Percentage
<18 years	11	5.8
18-20 year	42	22.3
21-22years	48	26.0
23-24years	89	48.0
>24 years	27	14.4
Total	187	100
Gender		
Male	108	57.7
Female	99	42.3
Total	187	100

Table-2: Medium, board of education and mode of preparation of study subjects

Medium	Number	Percentage
Hindi	38	22.4
English	149	79.6
Total	187	100
Board		
ICSE	75	40.1
CBSE	79	42.2
UP	43	17.7
TOTAL	187	100
Mode of preparation		
Coaching	130	69.5
Self study	32	17.1
Private tuition	25	13.4
Total	187	100

Table-3: Reason for joining medical profession

Reasons	Number	Percentage
Financial	88	47.0
To serve poor and needy	23	12.2
Position in the society	31	16.5
Parents are doctors	34	18.1
Peer pressure	11	6.2
Total	187	100

Table-4: Perception of study subjects

Difference between school teachers and coaching classes	No.	%
Coaching provides detailed knowledge	129	68.9
School teachers are not bothered	33	17.6
Both are equal	25	12.5
Total	187	100
Comparison between CPMT and MBBS		
MBBS needs more study	88	47.0
MBBS needs less study	72	38.5
Equal study	27	14.5
Total	187	100
Role of time management in study		
Very important	101	54.0
Important	65	34.7
Not important	21	11.3
Total	187	100

Table 5: Future ambition of study subjects

Future Ambition	Number	Percentage
Government Job	7	3.7
Faculty Position	14	7.5
Private Practice	130	69.5
Work Abroad	20	10.7
Civil Services	11	5.9
Armed Forces	5	2.7
Total	187	100

Conclusion:

The medical profession needs to retrace its steps to its origin, and redevelop as a noble profession so that our future doctors can look forward to working for the community at large.

References:

1. McGaghie WC. 1990. Perspectives on medical school admission. Acad Med 1990: 65;136-139.
2. Mitchell KJ. Traditional predictors of performance in medical school. Acad Med 1990: 65;149-158.
3. Ferguson E, James D, Madeley L. Factors associated with success in medical school: systematic review of the literature. BMJ 2002: 324(7343);952-957.
4. Tutton P, Price M. Selection of medical students. BMJ 2002;324(7347);:1170-1171.
5. Urlings-Strop LC, Stijnen T, Themmen APN, Splinter TAW. Selection of medical students: a controlled experiment. Med Educ 2009: 43:175-183.
6. Reiter HI, Eva KW, Rosenfeld J, Norman GR. Multiple mini-interviews predict clerkship and licensing examination performance. Med Educ 2007;41:378-384.
7. Gough HG. How to select medical students: a second look. Med Teach 2004;26;479-480.
8. Why Family Medicine is a Good Career Choice for Indian Medical Graduates? Editorial. Journal of Family Medicine and Primary Care 1 January 2014 : Volume 3 : Issue 1:191-195 Benny PV, Regi Jose, Anil Bindu S, Jeesha C Haran. Pattern Of Contraceptive Use Among Married Women

Of Reproductive Age Group In A Rural Panchayat In Kerala. Int J Med Appl Sci 2013;2(3):287-92.

Conflicts of Interest: None Funding: None

Citation: Barman SK, Srivastava AK, Kaur S, Nigam S, Martolia DS. *Biosocial Profile And Perception About Medical Profession Among MBBS Entrants Of Government Medical College Kannauj National Journal of Medical and Allied Sciences 2014; 3(2):39-42*