

Health custodians

The Guest editorial by Kartha¹ has gone deep into the roots of medical education in our country since independence. One becomes a specialist after several years of reading a particular subject or practising a profession for an extended time. When doctors are trained, the intention of such training is to make them useful to society. Thus, during the training period doctors should be taught subjects, the knowledge of which they can use for the betterment of society. What they read and what they practice should be the same for doctors to gain proficiency in the area of their functioning.

Hippocrates has said 'Whosoever wishes to study medicine well should proceed thus; in the first place to consider the seasons of the year, the waters, the ground, the mode in which the inhabitants live and what are their pursuits, whether they are fond of eating or drinking in excess, given to sedentary life or are fond of exercise or labour'.

A modern-day medical student has to study during his curriculum, outdated meth-

ods and also newly emerging 'not too sure' concepts which change almost every two years or less and all the newly emerging medical specialities. He is definitely more burdened than his counterpart of previous decades. One criticism regarding medical education is that the students are not examined for their communication abilities, ability to perceive patients' sufferings, ability to empathize and ability to establish a rapport with their patients. All these need to be not only taught but also examined before certifying a student and sending him to the community; these abilities are essential for better patient care. It appears we are merely manufacturing more academicians and not those who would be useful to the community. Medical profession is already in the grips of globalization and it appears that we are training prescription-writing machines and not really those essential to the community. The number of subjects they have to learn has increased considerably as also the number of medical colleges in our country, and teachers of specialities demand that there

should be an examination of that speciality, thus further increasing the burden on the medical student. Therefore good planning is required to prepare the health custodians of our population, and increasing the number of subjects will be of little use. It would be useful to the nation that the MCI and Government refrain from adding subjects like ayurveda and homeopathy to the medical curriculum, in addition to what is already being taught. In fact, interested students can learn those subjects after the completion of the their courses.

1. Kartha, C. C., *Curr. Sci.*, 2005, **89**, 725-726.

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Impact factor: Is it dragging science off course?

We are witnessing an exponential growth of scientific literature in recent times. 'Documentary chaos' is what Samuel C. Bradford, former librarian of the Science Museum in London said is happening in the field of scientific literature, referring to its exponential growth. But the assessment of scientific quality is a difficult task. The general trend was to use paper counts, importance of the journal, etc. But in the past three decades impact factors (IFs) and citation indices are being used at the international level.

So what is an IF? The IF for a journal is calculated by dividing the number of current citations to articles published in that journal in the two previous years by the total number of articles published in the journal in the two previous years.

IF judges the journal more effectively than the contributor or author, but it is also wrong to say that scientific content has a secondary role to play; in fact, it is the classical chicken or the egg story. An author

selects a high impact journal for his/her contribution and in turn the contribution is what increases the IF of the journal – a vicious circle of sorts. Journals have reputation, but their stature is only derived from the usefulness of the articles they publish. Evaluation of journals is a formidable but indispensable task considering the wide range of choices available, but again arbitrary evaluation of scientists based on the prestige of journals is a moot point.

The question is what does the IF indicate – quality of the journal, quality of the scientist or quality of science? One must agree that it does indicate all three, but the degree of importance varies with the decision-maker. The vertical flow of the connection between the three is undoubtedly: science > scientist > journal. Let us consider how each of these can be evaluated.

Taking journals first, it should be noted that the decision-maker with respect to

this criterion is the fund allocator or the library advisory committee, which essentially takes a decision on which journal to buy and which not to. By its very definition and its explanation, journal IF is a form of measurement used to determine the relative standing of journals in a particular field. Review articles are heavily cited and inflate the IF of journals. Annual reviews therefore qualify easily to get into any science library being state-of-the-art. Inversely, state-of-the-art science gets into the high IF journals and these journals ideally are the ones that should adorn the library. So inasmuch as the marketability of the journal is concerned, IF definitely is a prime criterion. This very fact has led to less scrupulous practices by editors to increase IF. Increasing citation by crooked means is one such method; it starts from the editor and goes down to the prospective author. Many journals, of late, run editorials citing their own journal. Some journals request authors