

EDITORIAL

GOOD DOCTOR

In this issue, we publish the 9th SMA Lecture delivered in April this year. Mr. R.C.K. Loh, in this lecture, discussed some fundamental attributes of a good doctor. Chosen for special mention are the human qualities of compassion, kindness, humility and intellectual honesty. They are undoubtedly essential characteristics. Combine them with academic excellence and a well-developed sense of perspective and we have the ideal doctor. Some would argue that academic excellence is only a minor attribute. Certainly persons academically well-placed but devoid of the other important qualities make bad if not dangerous doctors. Such a person is at best a scientist and is probably more at home with rats in the laboratory than with the patient by the bedside.

The point that has often been raised, and was reiterated in this lecture is that in our selection, training and assessment of medical students, qualities other than academic performance do not receive the attention commensurate with their importance. There is a tendency to put premium on academic performance exclusively. In practice, however, qualities like kindness and compassion do not lend themselves to simple objective assessment, and as a result they tend to be passed over in the routine assessment at selection and examination. Instances of "top students" turning out to be failures as doctors are known, though admittedly rare. If these essential human qualities cannot be easily assessed, they can certainly be taught and inculcated during training by example and by precept. This of course assumes that the teachers and the seniors are themselves exemplary and interested, as they should be.

Medicine is a profession with a soul and it has no place for those who regard medical practice as a mere cold scientific exercise.

Another important quality which a medical school should aim to develop in its graduates is the unceasing desire to learn and improve throughout their professional life. They must also be shown how this can be achieved independently and effectively. The practice of medicine is itself generally hectic with heavy and unexpected demand on time. The doctor who runs a busy practice alone is particularly in danger of losing sight of his own continuing education (though it may be conceded that his practice itself actually constitutes a part of such a process), unless he is academically motivated and had been imbued in his formative years as a doctor with an enduring enthusiasm for knowledge and professional improvement. Here, again tradition must be set by the profession as a whole, and personal examples speak more than mere words of encouragement. Medical science is growing so fast that the risk of obsolescence threatens anyone, irrespective of his professional vintage, who does not bother to continually update his knowledge and skill. The professional bodies have played a vital role in this respect by regularly organising programmes of continuing education in their activities. Healthy reminders, at suitable intervals, of the important human aspects and the art of medicine, as provided by the SMA Lectures, should complement the fast-expanding knowledge in medicine that awaits to be assimilated. These efforts will go a long way in maintaining the high standard of medical care and help to foster the development of Singapore as a medical centre of excellence.
