

## In This Issue

Over the past two decades the South-East Asia Region has been the scene of various innovative experiments in health care. The ensuing innovations have given birth to the concept of primary health care which emerged in clear terms at a Joint WHO/UNICEF International Conference on Primary Health Care held at Alma-Ata, U.S.S.R. in 1978. This has led to its universal adoption as a means for reaching the goal of 'Health for All by the year 2000'.

This issue of *Current Science* contains highlights of a symposium on 'The Role of Clinical Research in Health Care Delivery in Developing Countries' held at Madras in February 1990 by the Menon Foundation. The Symposium devoted three days (six sessions) to presentations by the international panel of experts and discussions between the panel and the other delegates. Different, yet related, topics within the ambit of the overall theme of the Symposium were debated and discussed. These included: Clinical Research and Development; Epidemiology of Endemic Diseases and Medical Needs; Additional Research Inputs on Existing Drugs; Availability, Accessibility and Usage of Resources for Health Care; Role of Technology in Diagnosis and Treatment and Strategic Approaches to Health Care Planning. The presentations are published here, so also are the recommendations that emerged from the deliberations.

G. N. Menon, in his overview gives a graphic account of the gigantic problem to be resolved if the stated WHO objective is to be achieved by India and other developing countries. He has made an in-depth analysis of the prevailing position in clinical medicine, clinical research and primary health care. M. D. Nair presents convincing statistics to contrast a developing country like India with an industrialized one with regard to health care. He also discusses the strategies for health care development.

Epidemiology is an essential tool in health care. Meticulous records of every citizen's health status – starting prior to birth – help the epidemiologists to take the pulse of a whole nation. Epidemiology, closely allied with health policy is an indispensable part of any health programme. C. R. Soman makes an appraisal of the neglect of epidemiology in medical education, health planning and health care delivery in India. A. S. Nanivadekar describes how epidemiological studies through practising physicians can help in obtaining information of practical value to health care delivery and decisions.

Drug development today involves phenomenal costs, which developing countries can ill afford. In marketing new drugs, drug companies must file applications in many countries. The government health authorities in these countries are interested in the clinical data sections of these applications and the clinical studies, therefore, must conform to certain generally accepted standards. R. K. Rondel describes the significance of Good Clinical Practice (GCP) in this regard. B. H. Smith discusses the relevance of the U.S. drug development programme and urges the developing world to devise new systems suited to their needs and realities. G. N. Menon discusses clinical drug development and its future in developing countries. Using the example of the drug phenytoin, B. H. Smith shows how additional research inputs can define new indications for existing drugs, a practical and useful strategy which can be adopted by developing countries. Rondel in his second article reviews some of the principal methods currently employed in Post-Marketing Surveillance (PMS). PMS attempts to monitor the outcome of drug usage in complete populations while Phase IV trials usually deal in numbers not more than 5000 patients.

Primary Health Care is likely to be most effective if it employs means that are understood and accepted by the community and applied by community health workers at an affordable cost.

These community health workers, including medical practitioners will function best if they are properly trained socially and technically to respond to the community's expressed health needs. Medical education can therefore stimulate better Primary Health Care development. G. M. Mitchell discusses the education of medical students to give effectively of their best in delivering Primary Health Care. A. S. Nanivadekar describes the practical benefits of clinical trials to postgraduate medical students and emphasizes the need for an attitude of combining patient care with research.

B. M. Hegde issues a timely warning against relying too much on high-tech medicine at the cost of clinical medicine. A. V. Ramani takes an overall look at India's requirements for biomaterials and devices, problems being faced by manufacturers and strategies which can be adopted to ensure proper production and use of biomedical devices.

R. Paul Singh defines technology transfer and discusses some of its aspects in relation to developing countries. V. Raman Kutty has analysed health planning in developing countries with special reference to India.

The message from this issue of *Current Science* should be: 'We have the capacity to save our health and thereby the health of our country, but we also have the capacity to ruin both'. It need hardly be added that we should opt for the former.

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"Research is an investigation or enquiry, usually made closely and carefully, to discover some fact or truth. Clinical research is limited to the study of man in health and disease, for advancement of his well-being. Clinical research is much harder than clinical work, more exact with less opportunity to cover up mistakes. It is not by coincidence that those centres of medical excellence are also the very centres from which the best research emanates".

Calnan J. *Research Defined*. London: William Heinemann, 1976.

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"In my reckoning, ethical medical practice requires both moral and scientific probity. The most unethical thing that a practising doctor can do is to let his competence fall away".

Black D A. *Recollections and Reflections*. The Memoir Club. *British Medical Journal*, 1987.

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"If we do not succeed in putting our message of urgency through to today's parents and decision-makers, we risk undermining our children's fundamental right to a healthy, life-enhancing environment. Unless we are able to translate our words into a language that can reach the minds and hearts of people, young and old, we shall not be able to undertake the extensive social changes needed to correct the course of development".

Brundtland G H. Foreword to *Our Common Future*, 1987. *World Health Forum* 1988; **9**: 184.