

# Meet your Teacher

## Prof. Dr. G. K. Dubey

Interviewed by Dr.Tankhiwale and Dr.Balankhe

**Q: Sir we all know you as a teacher, but we would like to know about your childhood.**

Dr. GKD: I had a very pleasant childhood. Most of my childhood was spent in MAYO HOSPITAL. My father used to stay there in the civil surgeon's bungalow. I did my schooling from Bishop Cotton School. Here apart from studies I was also interested in sports. I had represented our school in cricket, football and hockey.

**Q: Sir were you predetermined to become a doctor? What influenced you to come to the medical profession?**

Dr. GKD: (instantly) I was always determined to become a doctor. As I told you my father and the environment of Mayo hospital both influenced me to become a doctor.

**Q: Sir during your medical training which teachers influenced you the most?**

Dr. GKD: I think all my teachers had a great influence on me all throughout since 1961 when I entered the medical school. I can recollect few of them now but then everyone in their own style and class that left a very strong impression on all of us. To name a few I can recollect Dr. Bansal (anatomy), Dr. Sen (physiology), Dr. Shukla, Dr. Tiwaskar, Dr. Junnarkar, Dr. Rajapurkar, Dr. Vaishwanar, Dr. JN Berry, Dr. RD Lele, Dr. BJ Subhedar, Dr. BS Chaubey, Dr. Balkrishnan, Dr. Shastrakar, Dr. Gharpure and many more.

**Q: Sir for all of us ward 24 was one of the neat, clean and tidy wards. It had PFT machine to further add to its assets. Tell us something about it.**

Dr.GKD: I have a very special attachment for ward 24 .To begin with I was house officer in wd 24 under Dr.MG Shastri. Then from Reader to Unit In-charge I was there in Wd. 24 only. Except once when I was lecturer in Dr. BS Chaubey's unit in ward 23. For the cleanliness and overall atmosphere in ward 24, credit should go to sister

Yarmia and sister Vrinda along with all the other staff. They had a motherly approach to all the patients. Time and again they used to boost up for cleanliness, right up to the toilets. Regarding the PFT machine we were fortunate to have it. I had a special training in respiratory physiology at Patel Chest Institute New Delhi in 1977 and then 2<sup>nd</sup> time again in the same place but this time in Allergy and Immunology unit.. This immensely helped us to set up a pulmonology unit GMC. We were also the first to start Allergy Clinic at GMC. I am thankful to Dr. BS Chaubey for inspiring me to generate interest in pulmonology and critical care medicine. Due to significant amount of work we had here we could have quite a few publications. Based on these articles I was conferred with THE EMINENT CITIZEN OF INDIA AWARD by Indian College of Chest Physicians New Delhi.

**Q: Sir what do you think were your best contributions to GMC?**

Dr.GKD: (thinks and then laughs).... of course my services to GMC.

**Q: Everyone of us know that you had an excellent association with Dr.RN Das. Can you tell something about it?**

Dr.GKD: I had an excellent rapport with Dr. Das. We used to have discussions on variety of cases medical and surgical. They were always very useful and interesting. I still remember an interesting case referred by Dr. Das. It was a case of hemoptysis admitted with him .When I saw the case patient was bringing out sputum which was very much like anchovy sauce. We investigated him and he turned out to be extra intestinal amoebiasis with broncho-biliary fistula. He responded to anti amoebic treatment. I also had an opportunity to look after most of his cases of mitral commisurotomy. Many times he insisted that I should be present in OT during surgery.

**Q: Do you recollect some of your best**

students?

Dr.GKD: All my students were always equal to me. My objective used to be to give extra attention and a special eye to those who did not do well.

**Q: We always looked at you as one of our best, very well read, most accomplished, updated and a straight forward teacher. Have you ever repented to be a teacher or is there something still left out which you wanted to do as a teacher?**

Dr.GKD: (instantly) I have never repented to be a teacher. I am fully contented. One can never achieve everything in life. I am fully satisfied with what I have done.

**Q: How do you keep yourself updated today?**

Dr.GKD: Initially I used to subscribe to lot of journals. BMJ and NEJM were amongst my favorites. Nowadays I refer to text books and to the available journals. I also take the help of internet through friends.

**Q: Medical education has undergone a sea change in the last decade. Do you subscribe to the type of medical education today?**

Dr.GKD: The only thing that happens constantly is a change, and the changes that are occurring with time should always be accepted. Though I feel there was nothing wrong in the previous education structure. I still feel house job is the most important component of the post graduate training program. CET is very good way of exchanging students, but I still believe that CET should be there only for students of other states. Students from parent institution should have preferential seats. This CET totally undermines the MBBS education pattern. It definitely gives the student an extra stress. All this is my unbiased opinion.

Another thing which I would proudly tell you is that I also learned the method of critical analytical evaluation of the students during viva voce from none else but

Dr. Tankhiwale. It is extremely good and useful to the examiners. There is always something to learn from others. Learning is a process that never ends.

**Q: Private medical colleges are increasing in number at an unimaginable pace. You were**

**the dean and HOD of Lata Mangeshkar Hospital. What were the difficulties you encountered while initiating the smooth running of that organization in the early days.**

Dr.GKD: Initially the private medical colleges were looked down upon by the people because they were owned by politicians. Proper establishment with required time bound program as per MCI norm was difficult to achieve. We could achieve that although slowly but surely. I think everything required can be achieved in the stipulated period of time if there is proper staffing with adequate availability of materials required for teaching (including clinical teaching). I am sure the pursuance and dedication of the staff can be possible only if the job is assured and stable (i.e. non-transferable).

**Q: Have the private medical colleges helped the society in anyway?**

Dr.GKD: The urban health care systems have definitely improved in a big way. The time taken to rectify the problems or the non functioning units is much much less in private medical college than in government organization. This would be possible in government colleges also if the dean is given more power and autonomy there.

**Q: When you used to teach us we were strongly convinced that our medicine is a social medicine where we have to reach to the society at large to achieve the goals of health for all without much financial gains. But now health has become a commercial commodity that is accessible to a selected few. How can we change it?**

Dr.GKD: In the last decade entire teaching was clinical and bedside medicine with only one outlet i.e. return it back to the society. Now a days everything is machine based, investigation oriented and everything is becoming more and more commercial. While the urban health systems have developed leaps and bounds, the rural health care system has not developed in the same proportions. Health care providers are still not inclined to go to the rural areas for practice. For this the government should be creating more and more specialists so that they have no other option but to cater to a larger group of people in

rural areas .I think people will be inclined to go to rural areas if there is semi urbanization of rural infrastructure. But while doing this care should be taken to see that agriculture is not destabilized or affected. This would definitely make more number of people utilizing the more advanced health care facilities.

**Q: What do you think about the standards of today's teaching faculty, their methodology of teaching and about the students?**

Dr.GKD: I think with the usage of laptops teaching has become much easier. Black board teaching required lots of reading, understanding the subject well and hard work before delivering the lecture in a correct sequence.

Regarding the students I think they are a bit more aggressive, but that is good for the teachers because they are required to be updated all the times. Today's student can ask anything, anywhere and at anytime. This is a bold generation.

**Q: In our college days it was like 8am and a brown maruti van used to get parked near ophthalmic OPD. Watching you and madam was a pleasant site. I still remember your dark blue safari. Does madam influence your thoughts even today?**

Dr. GKD: (Thinks and smiles...) I might have had dark blue safari but I used to enjoy wearing blazers or suits.

Of course madam still continues to influence all of us. I first met her during our skin posting. There we made an album that covered almost every skin disease with a brief description of treatment.

**Q: What are your non medical interests?**

Dr.GKD: I love traveling, watching movies, TV, and reading books. I used to enjoy reading Ayn Rand, Harold Robbins, Earl Stanley Gardner, Agatha Christie, etc. Now a days I am enjoying watching TV serial CID.

**Q: Any message to the journal?**

Dr.GKD: Our journal is extremely good. You should try to include more and more research articles.