

Ten years of the Malayan Medical Association

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I HAVE BEEN assigned the task of reviewing the work of the Malayan Medical Association since its inception ten years ago. A decade seems a relatively short period but both our Association and the Singapore Medical Association have been built on the foundations of the Malaya Branch of the British Medical Association and the Alumni Association of King Edward VII College of Medicine and Faculty of Medicine, University of Malaya, Singapore. Attempts were made to form a joint medical association to include the states of East Malaysia and Singapore but the requirements of the Registrars of Societies, differences in the Medical Registration Ordinance and Ethical Code, combined with long distances that have to be covered, made that impossible. Despite this, close liaison exists between the Singapore, Sarawak and the Malayan Medical Associations which are affiliated to one another, while some of the doctors in Sabah and Brunei are our members.

CONSTITUTION

The M.M.A. Constitution was approved at a special meeting held on 24 Oct 1959 and subsequently accepted by the Registrar of Societies. It is a democratic organisation with the management vested in a Council composed of a President, a President-Elect, the Immediate Past President, an Hon. General Secretary, an Hon. Deputy Secretary, an Hon. General Treasurer, an Hon. Editor and four representatives elected by each of the three Branches. An

Executive Committee, composed of Council Members with the exception that the Branches are represented only by its Chairman or a single nominee, manages the day-to-day affairs of the Association.

OFFICIALS OF THE ASSOCIATION

The Trustees of the Association are Dr. S.G. Rajahram, Dr. P.T. Arasu and Dr. Chong Yew Chong.

The Presidents of the Association, starting from 1960, have been Dr. S. G. Rajahram, Tan Sri (Dr.) Mohamed Din bin Ahmad, Dato (Dr.) S.M.A. Alhady, Dr. Abdullah bin Ahmad, Dato (Dr.) R. Sathiah, Dr. A.W.E. Moreira, Dr. R.F. D'Costa, Dr. Tan Chee Khoon, Dr. J.B.A. Peter and Dr. Lim Kee Jin.

During this period, we have had four Honorary General Secretaries, namely Dr. T. Visvanathan, Dato (Dr.) Keshmahinder Singh, Dr. F.R. Bhupalan and Dr. S. Param Palam, the last named having officiated for more than six years and continuously for the last three years.

By having a President-Elect appointed to the Council a year ahead of his assuming office as the highest ranking official of the Association, he acquires experience and knowledge of the Association's problems and responsibilities. By his continuing to serve another year as the Immediate Past President, he provides continuity and guidance to the new Council. This system has worked very well while at the same time, by arranging for the President-Elect to be nominated by each of the Branches in rotation,

the net is cast widely for the selection of suitable candidates and the honours are distributed evenly. This avoids the concentration of power in one individual as it might well happen if the same officer holds such a high executive office in an organisation continuously for too long a period.

OBJECTS OF THE ASSOCIATION

The main objects of the Association have been to represent the profession in the country, to maintain a high standard of medical ethics and conduct, to promote social, cultural and professional activities, to enlighten and direct public opinion on problems of health and to express the views of the profession to Government and other bodies.

MEMBERSHIP

The total membership has risen from 539 in 1960 to 1,249 in 1970, of whom 40 are Life Members and 85 contributing towards Life Membership. We regret that some of the doctors have not yet seen fit to become members for reasons of their own but the increasing membership list augurs well for the future. We have recently opened our doors to scientists in the para-medical fields to enable them to join us as Associate Members.

Dr. (Miss) Soo Kim Lan, Dr. Teh Lian Swee and Dato (Dr.) Cheah Toon Lock, are our Honorary Members.

AFFILIATIONS

The M.M.A. is a member of the Commonwealth Medical Association and the Confederation of Medical Associations in Asia and Oceania. Professor A.A. Sandosham has been elected to serve on the Council of the Confederation of Medical Associations in Asia and Oceania for the next four years. We are affiliated to the British Medical Association, the Singapore Medical Association, the Sarawak Medical Association and the Australian Medical Association.

Our delegates or representatives have attended the General Meetings of the British Medical Association, Singapore Medical Association, Australian Conference of General Practitioners and Commonwealth Medical Association. In August this year, the M.M.A. and the Singapore Medical Association will have the honour of acting as joint hosts for the first time to the biannual General Meeting of the Council of the Commonwealth Medical Association and it has been agreed that Professor A.A. Sandosham and Dr. Gwee Ah Leng will be Joint Presidents of the Commonwealth Medical Association for the next two years.

MEDICAL JOURNAL OF MALAYA

This, the official organ of the M.M.A., had its origin 34 years ago as the quarterly publication of the British Medical Association (Malaya Branch). It has been taken over with the formation of M.M.A. in 1960 and is under the charge of an Editorial Board, Mr. H.M. McGladdery having been Hon. Editor from 1960 to 1964 and Professor A.A. Sandosham since then. It is a scientific journal and has made its appearance regularly and finds its way into the Medical Libraries of many parts of the world and its contents are quoted and abstracted extensively. The editorial columns often reflect the Association's views and attitude towards medical problems of the country which receive publicity in the local press. All members receive a free copy of the Journal and it is also distributed on a reciprocal basis to the members of the Singapore Medical Association.

M.M.A. NEWSLETTER

There has long been felt the need for a regular publication, like the Newsletter, giving information to members scattered throughout the country regarding the activities of the Association, especially the Council, encouraging a healthy participation by members. It is intended to give members the opportunity to express their views about medical, social and related problems so that fellow members, the public and even Government may become aware of them. It has been published since the foundation of the M.M.A. somewhat irregularly and whenever there has been sufficient material to justify one. During the last year, four issues have appeared at 2-monthly intervals, largely through the efforts and enthusiasm of Dr. Lim Kee Jin and his Johore colleagues. It has been well received and whether it will endure or not will depend on the support in the way of contributions it receives from members.

THE ETHICAL COMMITTEE

As becomes a noble profession, it is necessary that its members maintain the highest standards of professional conduct. His first consideration should be his patient's health and he should not be unduly motivated by gains and profits. His behavior towards the fellow members of his profession should be above reproach. For instance, self-advertisement, enticing of patients from his colleagues, etc., are considered unethical. There are laws which can bring a miscreant to book but in practice, these laws are difficult to enforce. The Association, therefore, tries to enforce

the correct behaviour by showing its disapproval of unethical conduct on the part of the members of the profession, and by giving sound advice on what should be done.

The Association has drawn up a set of Ethical Rules to try and get acceptance of the Ethical Code of Behaviour. The Ethical Committee of the M.M.A. Council listens to complaints and impresses on the medical practitioners the need for maintaining a high standard in the practice of the profession. The Ethical Committee, under the chairmanship of Dr. S.G. Rajahram (except for one year when Dr. A.W.E. Moreira took charge), has done a splendid job answering numerous questions for clarification and interpretation of the Code and by appeals, impressing on those (fortunately few) who try to achieve fame and fortune by unethical methods. The Ethical Committee has achieved a measure of success and it is now considered that the time has come for Government to legislate and allow a small amount of punitive powers for minor offences rather like in New Zealand.

RELATIONS WITH GOVERNMENT

We have always tried to maintain cordial relations with the Ministry of Health and have made representations to Government on matters affecting the health of the people and the profession. Recently, an ex-Minister of Health had this to say: "Well, going back to the days when I was the Minister of Health, which I can assure you was a very pleasant one, I recall the cooperation and assistance given to the Ministry by the M.M.A. A number of schemes, now being put into operation, were as a result of discussions held with the chiefs of the M.M.A. who, as you know, were very generous with their comments or suggestions."

We have submitted memoranda to Government on numerous subjects, including undergraduate and post-graduate medical education in the country, and offered the voluntary services of our private practitioner members during national emergency, to help to run a School Health Service, to assist in the Government Hospitals which are proverbially understaffed, etc.

Our Association is represented on numerous Statutory Boards, like the Poisons Board, National Family Planning Board, Kedah Health Board, Estate Hospitals Board and Malaria Advisory Board, to mention only a few.

Our members serve on numerous Government and

non-Government Committees, such as the Medical Legislation Standing Committees on Employees' Provident Fund Ordinance, Workmen's Compensation Ordinance, Registration of Estate Dressers and Social Security. We have our nominees on the National Health Council, National Research Council, Malaysian Red Cross Society Council, Pharmacopoeas Advisory Committee and Committees on Communicable Diseases, Hospital Facilities, Public Health Education, Malayan Association for Prevention of Tuberculosis, Post-Graduate Medical Studies, Private Charitable Hospitals, Medical and Health Planning, Maternal and Child Health and others.

Our members have always readily come forward to the help of the people during periods of stress and strain. Both Tun Razak and the Minister of Health, Tan Sri Sardon, have singled out the medical profession for the yeoman service rendered during the recent emergency.

M.M.A. COMMITTEES

We have set up numerous Committees from time to time to study special problems like accident prevention, effects of smoking, medical legislation, sale of drugs and poisons by unqualified persons, dental health education, school health service, cholera epidemic, postgraduate medical education and others.

M.M.A. SOCIETIES

To facilitate professional advancement, we have been organising scientific and clinical meetings in all the Branches, lectures by various visiting and local specialists, film shows, refresher courses, conferences, and discussion panels, both for members and the public.

To cater for sectional interests and enhance their professional status in their respective specialities, we have organised the Public Health Society, Paediatric Society, Neuropsychiatric Society and Ophthalmology Society. These Societies organise Conferences, Panels and Scientific Meetings of their own and the Public Health Society publishes a Bulletin annually. There was a Private Practitioners' Section and the Association is presently considering the feasibility of setting up a College of General Practitioners to maintain high academic standards on the lines of the Australian College of General Practitioners.

OTHER BENEFITS FOR MEMBERS

We have entered into an agreement with the Medical Defence Union of London to provide M.M.A.

members with medical defence in cases where proceedings involving questions of professional principle or otherwise are brought against them.

We have established a Medical Benevolent Fund for the benefit of members and arrangements have been made to enable members to take out insurance policies under favourable terms.

We have issued car badges with the M.M.A. Crest for the exclusive use of members and car stickers and identity cards for use during emergencies.

We have published a Directory of Information on Medical Practitioners in West Malaysia giving details of qualifications, honours bestowed and other relevant data of our members.

We run competitions in tennis and golf in connection with the Annual General Meetings for trophies presented by Dr. S.G. Rajahram and Dr. Teh Lian Swee respectively.

M.M.A. HOUSE

Ambitious plans have been drawn up and piles have been driven for the building of a National Centre for the medical profession of this country. The M.M.A. House Committee in charge of this project is under the chairmanship of Dr. P.T. Arasu. The Association has obtained from the Selangor State Government a piece of land measuring 26,800 square feet in front of the General Hospital, Kuala Lumpur, on 99 years' lease at nominal cost. This is conveniently situated in close proximity to the General Hospital, Maternity Hospital, Institute for Medical Research and the T.B. Clinic and when ready, it will provide facilities for members to meet and more effectively carry out the objects of the Association. It will house the M.M.A. office and have accommodation in flats for use of outstation members.

THE FUTURE OF OUR MEDICAL SERVICES

We are far from achieving the U.N. goal for W.H.O. of "attaining the highest possible level of health for all people regardless of colour, race or economic level." Many modern countries have come a long way from the fee-for-service system wherein the rich got the cream of the medical service while the poor got the crumbs, if that. No longer should the poor depend on the traditional charitable disposition of the doctor or the community. Instead, the idea must be generally accepted that every individual has the right to health and that the Government is responsible for providing a total comprehensive medical service.

Even in the most enlightened and wealthy

countries, the changes have come about gradually, fighting reactionary elements. To start with, voluntary private health insurance plans catered for special groups. Small groups of workers, through their trade unions, obtained medical care for their workers, the doctor-patient relationship being maintained by the panel system. Gradually, a comprehensive programme was introduced financed by compulsory health insurance, social security, general taxation, etc., the doctors becoming full-time salaried officers, or through a capitation system or by Government reimbursing the patient for medical fees paid to the doctor, the practice of medicine changing from competitive business to a social service.

Medicine has come to be recognised as a social welfare institution in many modern countries. We like to know what system we should adopt, in what direction we should go and how soon should we start. It seems futile to go along haphazardly trying to meet the problems as they arise and hope for the best. We need people, with knowledge of the various systems including their good and bad points, to study the whole question of the future of our medical and health services and make recommendations on the direction we should take, having in mind the past and the present state of development, the conditions likely to prevail in Malaysia in the foreseeable future. The Association has made repeated attempts to get Government to set up a Royal Commission of Enquiry to study the whole problem, so far without any results.

CONCLUSION

In this rapid survey of the work of our Association in the last ten years of its existence, I have tried to show that ours is a democratic organisation representing the profession as a whole in the country. We have tried to maintain high ethical and professional standards among our members, have tried to serve the public and Government by being represented on numerous Boards and Committees at considerable sacrifice of time and energy on the part of members and by submitting our views on problems of health in numerous memoranda and publications. Though not a Trade Union, we have endeavoured to help our members, both in the private and public sectors, to improve their lot.

We look forward with confidence to the future, when our M.M.A. House is ready and when the Association will have better facilities to serve the members and the people of the country even more effectively and efficiently than in the past.