Pediatric Surgery in Rural India: Past, Present, and Future

The present scenario of Pediatric Surgery in rural India is quite different from the developed world. The transition of pediatric surgery in the developed world over the past half-decade has been exemplary, resulting in its emergence both as one of the most sought for surgical superspecialty and as a surgical branch with the highest monetary benefits. With decreased birth rates and increased antenatal diagnosis of congenital anomalies, the number of children born with these anomalies has decreased. As a result, the developed world witnessed a decreased demand for pediatric surgical facilities. This culminated into the development of different central institutions in major cities of countries such as the United Kingdom and Europe as a whole. At these centers, the children requiring surgeries are transported efficiently for timely interventions. This working model became a great success both in terms of quality of care and the cost-effectiveness, and Pediatric Surgery has seen a positive transformation.

During this transition period in western countries, we have also witnessed our journey, albeit in a very different manner. We have seen the course of India on its path of development as citizens, as doctors, and as Pediatric Surgeons. The journey has been great for most of its part. The evolution from the practice of surgeries in operation theaters lighted by candles and liquid ether, to the sophisticated modular operation theaters and modern equipment, has been overwhelming. However, most of these triumph stories have been limited to the big cities and towns only.

Around 30 years ago, there were only a handful of trained pediatric surgeons even in major cities. Pediatric Surgery was not even considered as a separate superspecialty because of lack of awareness of the general population. Only a few major institutes and very few corporate centers provide pediatric surgery facilities in the whole country. One of the reasons for this scenario was the lack of trained pediatric surgeons, but the main reason was the poor basic medical facilities as a whole. Besides, stiff resistance from allied surgical specialties was also a hurdle. The number of primary health centers (PHCs) was limited and so was the workforce at these places. Life support equipment which is very crucial for surgical neonates and children was not available. This hindered with the growth of Pediatric Surgery across the country, especially in rural areas where even electricity was not available. Further, the mindset that the pediatric population does not need additional arrangements for better survival was a big hurdle.

As time has passed, the health infrastructure has improved. As of March 31, 2015, only around 8% of 25,300 PHCs in the country were without a doctor. However, the crisis in terms of the specialist at the rural level is still very large. In community health centers (CHCs), the shortfall of specialist doctors is huge – surgeons (83%), obstetricians and gynecologists (76%), physicians (83%), and pediatricians (82%).[1] The story with pediatric surgery is also the same. This has led to a new kind of problem for pediatric surgeons. With the increase in the number of trained pediatric surgeons, the centers providing care to children requiring surgery has also increased throughout the country. But the numbers of pediatric surgeons at the rural level are still meager. This is not only because of deficient health infrastructure in rural areas as a whole but also because of a drive for a better quality of life for young surgeons. Most of the trained pediatric surgeons want to stay in bigger cities. This has led to a disproportionate increase of pediatric surgeons in major cities, and now, we are facing a problem of too many pediatric surgeons with a limited number of patients as still the referral from the rural area is very poor. This is in contrast to the situation in rural areas, where the number of patients still overwhelms the
Pediatric Surgeons. However, as discussed earlier, due to lack of adequate infrastructure in rural areas, mortality is high which has led to a simultaneous occurrence of job satisfaction and dissatisfaction. Satisfaction for the operations performed and dissatisfaction for the number of problems faced due to infrastructure limitations and patient’s outcome. There is also the problem of lesser exposure of surgeons to newer technologies in smaller cities and other rural areas.

For the betterment of Pediatric Surgery in the rural areas, the Indian Association of Pediatric Surgeons (IAPS) has been constantly working for many years. The IAPS has contributed to the development and training of pediatric surgeons from a rural background. These surgeons are provided the opportunity to visit the reputed institutes of our country to get trained in recent advances and upgrade their knowledge and skills. Fellowship like IAPS Annamalai University Travel Fellowship has also been initiated for this purpose. Telemedicine education can help us expand these training programs in a big way.

The future of Pediatric Surgery in rural areas depends on the development of good infrastructure facilities in the villages and towns at the level of PHCs and CHCs. An important point is the promotion of Pediatric Surgery by the IAPS in coordination with state and central government. Creation of Pediatric Surgical posts in smaller cities will lead to financial security of the pediatric surgeons and the availability of cost-effective treatment options for patients in their proximity. Under different schemes, the state and central governments have started employing specialists for part-time services with a good amount of money in rural areas. These schemes are attracting more and more specialists at the level of small cities and villages. Developing good centers with infrastructure, especially in public–private partnership model, will help pediatric surgeons to establish themselves in these rural areas. This will improve the quality of services at the grass-root level and also decrease the referral load at the institute level, which in turn will also improve their quality. Besides this, improving the quality of life in smaller cities and rural areas may promote more surgeons to settle in these areas. The current scenario of Pediatric Surgery in rural India is better than its past, and we all hope and know that its future will be brighter than the present.

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