

# Ring in a new curriculum in clinical pharmacology

I am happy to write the editorial for this special supplement of the Indian Journal of Pharmacology which carries the proposed curriculum in clinical pharmacology for medical undergraduates in India. As one who has spent some of my best years teaching pharmacology and clinical pharmacology to undergraduate medical students, I recognize the importance, need and relevance of such a document. In this editorial, I wish to briefly comment on the process that was employed in formulating this curriculum, and draw your attention to some of the salient aspects of this process.

## The significance of the symposium held at Jaipur

The symposium on “Clinical pharmacology curriculum for medical undergraduate course” has the potential to be the most significant session of the Annual Conference of the Indian Pharmacological Society-2006; it may even perhaps be the most significant session of many annual conferences. The World Health Organisation has rational use of medicines as one of its key activities in medicines and therefore supported this symposium. The changes that it could potentially produce will affect the teaching in medical schools that serve over one billion. What bigger impact for better health can we envision?

Although precise estimates are unavailable (and maybe impossible to get), a huge proportion of medicines are prescribed irrationally and physicians are responsible for a vast majority of this. Therefore, teaching medical students those aspects of Pharmacology and Clinical pharmacology which will have a direct bearing on the rational use of medicines should have a long lasting impact.

## Working together with MCI

The present curriculum for undergraduates prescribed by the Medical Council of India (MCI) for Pharmacology and Clinical pharmacology has as its broad objective, “.. to inculcate a rational and scientific basis of therapeutics”. However it is a short document with principles only. Updating and enlarging this document is needed. The members of this society have put in a major effort to develop the draft curriculum through extensive consultation, which included electronic discussion groups and a huge volume of emails. The effort was also done in collaboration with, and in accordance with the workplan of MCI. This document will be submitted well in time for the 2007-2012 revision cycle of medical school curriculum.

## Overall change, yes, but more practical specific changes first

It could be argued that change in curriculum should be part of overall change including all subjects. Admirable though it may be, the effort to bring about overall change will be massive. Changing the curriculum in Pharmacology and Clinical pharmacology could be seen as more practical and possibly a vanguard that will bring about further change. The change proposed is not only in content but also in method. For example, ‘problem oriented teaching’, some amount of integration can be brought about within the existing subject-based curriculum.

## Additions and deletions, and what is required

The proposed curriculum is not simply adding new areas; careful thought has been given to material that may be redundant and specific recommendations for deletions have been made including deletions of equipment. Some may say the recommendations are ideal and impractical; however the recommendations are to be achieved gradually and working to a plan. The recommendation should be seen as time-limited objectives which will help the departments to place their human resource and equipment requirements before the administration in medical schools.

## In conclusion

The curriculum is a vision developed by teachers in pharmacology and clinical pharmacology in a transparent, collegial manner with wide consultation. The road map is now ready. Once the road map is approved, the journey will be long and arduous but the benefits will be for generations to come, both in the education of doctors and in the benefits that it will have for their patients. There is a Chinese saying “even the longest journey begins with a single step”. I believe the first step on this journey has been taken.

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