## Letter from Chennai

## THE FURTHER SOUTH EXCELS

Ever since my student days, we of Madras had a rather patronising attitude to our neighbours in Ceylon. They had very few university seats in their country, and most youngsters who wanted education beyond high school came here and joined us in academic pursuits. When we entered the medical college, the condescension continued, as patients came in search of better treatment, or so they and we thought. Today, we of Tamil Nadu retain the same feeling of superiority towards our friends in Sri Lanka. I am no exception.

I have been to Colombo twice before, but all I saw of the country was the drive from the airport to town, usually at night, and the interior of the five-star hotel where we stayed and conferred. I took my first vacation in Sri Lanka a couple of months ago and I am ashamed. I drove through the garbage-strewn roads of Chennai to reach the airport. We reached Colombo airport in broad daylight and drove off on our vacation. I could not find a scrap of paper on the roads or the pavements. There were no plastic bottles or bags strewn around. Any small store in Chennai will have all these signs of civilization and more, packing materials, dust and slush, piled up around the entrance. What do the Sri Lankans do with all their garbage?

You can paint white and yellow lines on our roads and mark out two lanes each way, but we Tamils will use the road to the maximum and drive five abreast on them, bumping into each other, cursing and shouting, and with our horns blaring to the high heavens. There are Tamils in Sri Lanka too. Why are they quietly driving one behind the other, never overtaking except when the road is clear? Are the motor horns out of order in all their vehicles? Why do they slow down for pedestrians on zebra crossings instead of speeding up and doing their best to run them down, to make sure no one will have the temerity to cross the road when we want to drive past?

The weather was hot, as hot as it was in Tamil Nadu, and perhaps more uncomfortable as it was more humid. Hot Sri Lankans relish sweet coconut water as much as we do, and there are stalls to serve them. You can identify the coconut vendor in Tamil Nadu by the huge pile of coconut husk filling the pavement and encroaching on the road. We slake our thirst and toss the husk and the shell on the road as we pull out our wallets to settle the bill. These Sri Lankans put us to shame by putting the husks in large wicker baskets, and carrying them to the designated garbage dump when they are filled. My superiority complex was rapidly draining away, and I desperately struggled to preserve it. These people seemed to be more courteous, more helpful, with a higher sense of civic responsibility. Where could we of Tamil Nadu score over them?

I turned for help to the health sector. Sri Lankan patients continue to pour into Chennai hospitals, and, from what I hear, to hospitals in Trichy and Madurai too. We must be scoring over their health system. I did not have the time to study this aspect of their life, but a student of mine who is now a nephrologist at one of Colombo's large private hospitals gave me some information.

Sri Lanka provides free universal healthcare. Services at all government hospitals are free, and the government spends 7.4% of the gross domestic product (GDP) on health against 1.3% by India. Life expectancy at birth is 9 years more than ours. Like us, people who can afford private healthcare do go to private hospitals, but these are concentrated in Colombo, and penetration of the

private sector in smaller towns is poor. My interest and that of my informant was primarily renal. I wrote in a recent Letter from Chennai about the ease with which Tamil Nadu nephrologists take their patients with their unrelated donors to Sri Lanka and get them operated there. I gather there are rules laid down by the Sri Lankan government and unrelated donors should be emotionally related with no financial inducements. However, implementation has been lax. While I was in Sri Lanka the news broke of arrests of the organizers of a Hyderabad-based racket mobilizing commercial donors for transplantation, and transporting them and their recipients to Sri Lanka for surgery. The Sri Lankan government banned transplantation on all foreigners as a temporary measure pending investigations, but no arrests were reported in Sri Lanka.

There are renal transplant services provided free by government hospitals in Sri Lanka, but the numbers have to be limited due to paucity of funds. People seek private hospitals for better comfort and better care. I do not know how the results of transplants in the public sector compare with those in the private sector. Reliable statistics are hard to come by there, as they are in India.

I strongly believe governments everywhere, and especially in developing countries, should concentrate on control of non-communicable diseases and thereby prevent renal failure, but Sri Lanka has shown no greater inclination to do so than India.

If you want private medical care and have to pay for it, costs are much higher in Sri Lanka than in private hospitals of Tamil Nadu, which is probably the main reason patients from there continue to come to us. Sri Lankan doctors are more prosperous than we are. This may reflect the general economy, for GDP per capita in Sri Lanka (2013) is US\$ 6500 against 4000 for us. The low airfare from Colombo to Trichy and Chennai may help patients to come to us

Obviously the Tamil regions have suffered greatly during the years before the Tamil Tigers were crushed, and we should hope reconstruction and rehabilitation of those areas will progress rapidly, and enable them to catch up with the rest of the country.

## AMMA HEALTH CHECK-UPS

The Cochrane collaboration has established that blind testing for various diseases in asymptomatic individuals yields no benefits in terms of mortality or morbidity. However, they remain popular among Indians. Apollo hospital has a variety of such check-up schemes, and they have been so successful that we now have an entire building devoted to the 'health check'. One would expect the government to concentrate its efforts on more meaningful schemes, but our government health department has chosen to jump on the bandwagon. We have a website devoted to the Amma Master Health check-up. It offers three levels of check-ups: Amma Gold for ₹1000, Amma Diamond for ₹2000 and Amma Platinum for ₹3000. Amma Gold offers a complete haemogram, erythrocyte sedimentation rate (ESR), urine analysis, fasting and post-prandial blood sugar, urea, creatinine, uric acid, total cholesterol, high-density lipoprotein (HDL), low-density lipoprotein (LDL), triglycerides, total cholesterol/HDL ratio, serum bilirubin (total and direct), alanine aminotransferase (ALT) and aspartate aminotransferase (AST), serum alkaline phosphatase (SAP), total protein and albumin, hepatitis B surface antigen (HBsAg), blood grouping and typing, ECG, X-ray chest, ultrasound (USG) abdomen and Pap smear. Diamond gives you all that and

echocardiogram, prostate-specific antigen (PSA), thyroid profile and glycosylated haemoglobin (HbA1c). Platinum would give you the Diamond and digital mammogram for women above 35 years of age, a DEXA scan, vitamin D, calcium, phosphorus and parathyroid hormone (PTH) level.

There is no doubt that this is excellent value for money in terms of the information generated, even if it would yield no genuine benefit. I wanted to try how easy it would be to get an appointment for this test. The website worked well, and in a few minutes I got an appointment and was asked to report at 7:30 a.m. The following instructions came to me by e-mail in a flash:

First Come First Serve Basis.

Please do not consume any food or beverage before the test.

Payment mode is cash only.

Carry a print of this form or remember the online appointment id.

Report can be collected in person at the venue, next day between 11 a.m. and 1 p.m.

You can consult the doctor after collecting your report. For any clarification, you may contact 044–2530–5000.

I did not want to waste the time of any government employee, so I called that number to cancel my appointment. I was put in touch with the concerned people in a moment, and the appointment was duly cancelled. I took advantage of the opportunity to speak to someone and asked how many tests were done each day. Apparently, the hospital does just 10 tests each day, and there are vacancies all the time. The asymptomatic common man of Chennai is perhaps better informed than the executives who come for

Apollo's famous check-up. I presume he waits till he has symptoms and then goes to his doctor. Meanwhile, I keep hoping that our government will do the one health check-up that would be valuable, just a recording of blood pressure and a routine urine examination for everyone once a year, but it seems this is not glamorous enough.

## PROHIBITION AGAIN

Almost every party in the fray for state assembly elections in May 2016 promised prohibition if it comes to power. The only holdout was the AIADMK of Ms Jayalalithaa, and this provided ammunition for all the others to attack her. She was perhaps more sensible than all the others, for it is impossible to continue with the promised freebies and sacrifice the earnings from alcohol. This year the DMK promised smart phones, suitably loaded with a number of apps, and free Wifi connectivity. I am sure that whoever wins will find an excuse to delay the introduction of prohibition. With feminine public opinion apparently shifting in favour of the prohibition plank, Jayalalithaa had to yield, and undertook to phase out prohibition in stages. The others criticize her, saying she will use this as a loophole to escape from her commitment.

I wish someone would come out boldly and say they would abolish prohibition and also all the freebies, and instead raise the standard of government schools, hospitals and preventive health programmes. I promise that person my vote. Meanwhile, with television, laptops, smart phones and free Wifi at home, do you think children would turn their backs on all these and take to academic pursuits?

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