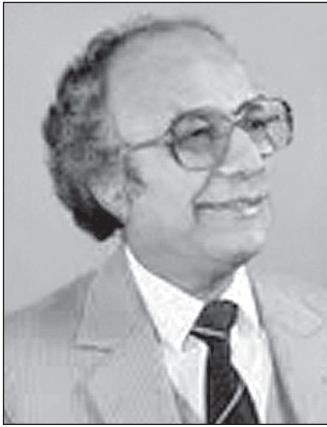


Obituary

M. Krishna Bhargava

(17 July 1927–20 June 2009)



Dr Bhargava was a giant among men. Very few people are remembered almost 2 decades after their retirement for what they had achieved, but he was such a man. In the Kidwai Memorial Institute of Oncology, his fourth child and favourite baby, it would not be untrue to say that not one day passes without one of its 1050 employees, more than half of whom were recruited by him, remembering him in some context or the other.

‘Those were the days...’ is a familiar refrain among the seniors, with no disrespect to the subsequent administration.

He came to Kidwai in the early 1980s after a long and distinguished service in government hospitals of Karnataka, where he served as pathologist and administrator. As Medical Superintendent of the Victoria Hospital, Bangalore, he changed the public perception of government hospitals, getting even the recalcitrant ward boys and *ayahs* to work with him towards better patient care. He had many firsts to his credit while there: opening of a 24-hour drugstore, and upgradation of the library and all departments with the money generated through grants from the government and other bodies. Dr K. M. Srinivasa Gowda, former Professor and Head of Pathology at the Kempegowda Institute of Medical Sciences (KIMS), Bangalore, was one of the new recruits at the Bangalore Medical College when Dr Bhargava was the Professor and Head of Pathology, circa 1969–70. He remembers how the laid-back department was energized into one buzzing with activity, one which generated reports in record time.

Under his eagle eye, Kidwai grew from a small 50-bed cancer hospital to a large regional cancer centre in Karnataka. Dr Bhargava established the hospital- and population-based cancer registries, and peripheral cancer centres in Gulbarga and Mandya. He also organized mobile cancer detection and education camps. He built the Dharmashala in which underprivileged ambulatory patients and their relatives from outside the city could stay during the course of investigations and treatment. In addition, he instituted the ‘free feeding scheme’ at Kidwai, which operates to this day. Under this scheme, all meals are taken care of through donations from philanthropists. He bought the major equipment required in a cancer hospital, such as a linear accelerator and computed tomography (CT) scan.

Dr Bhargava’s zeal was recognized by the government when it accommodated his pleas for more grants ... he often said he approached the government with a ‘begging bowl’! He leveraged his political access, as always, for the good of the institution he was working for. Apart from the new buildings that sprang up, he conceptualized and actualized many finer details—social and psychosocial workers, stoma care clinics, the pain relief unit and

other rehabilitation measures. He built a radiation sterilization plant on the premises and started the nuclear medicine unit in association with the Bhabha Atomic Research Centre. The Government of Karnataka conferred the Rajyotsava award on him, while the Government of India later honoured him with the Padma Shri.

He was one of the first allopathic doctors to recognize the importance of alternative systems of medicine. Kidwai was probably the only regional cancer centre to have on its rolls an Assistant Professor in Medical Oncology who was an ayurvedic *vaidya*! He actively encouraged trials using ayurvedic drugs in the Institute. This holistic approach also led him to build a meditation room in the special ward. A temple came up later on the premises.

At Kidwai, as before, Dr Bhargava was the embodiment of ‘the velvet fist in an iron glove’. His small frame sent many a shiver down the spines of errant hospital staff at all levels. The high standards he demanded from others were applied to himself with equal assiduity. Always dapper, he ensured that everything around him was presentable. He came early and was invariably the last to leave. His strictness and discipline made others toe the line as well. His vibrant energy and quick step generated the idea among the staff that ‘even the rocks knew when he was near’! He believed in unscheduled surprise rounds, during which he would run a finger on the surfaces to check for dust, quickly assess the staff strength and ascertain the number of absentees or latecomers, and peer into the ward toilets to see how clean they were. He did not even hesitate to pour water from a bucket to show the dumbstruck *dhobis* how to clean the cement blocks where the hospital laundry was washed on his ‘*dhobi ghat*’ rounds!

As a pathologist, he emphasized that cancer demanded a multidisciplinary approach. When we were junior pathologists in the 1980s, he made us aware of the need for communication with other specialties for an accurate and meaningful diagnosis. He would not finalize the reports of ‘problem’ cases until we had spoken with the treating doctor and conveyed the clinical opinion to him. Respect for the pathologist was *de rigueur* in his time and fortunately, remains his legacy. He encouraged us as younger colleagues to participate in seminars and conferences and undergo specialized training in our areas of interest. He also urged us to write papers (‘...don’t just diagnose and throw the slides!’) and learn administrative skills. His dream was to establish a cancer research wing with facilities for molecular biology, in addition to the existing cytogenetics unit. The latter was his brainchild and some of Dr Bhargava’s students are now authorities in the field in various parts of the globe. Unfortunately, although space was allocated for a research wing, the idea had to be scrapped in favour of more hospital beds to accommodate the burgeoning burden of patients.

Many people knew that despite Dr Bhargava’s tough exterior, a kind heart dwelled within. Nobody hesitated to approach him in times of trouble because he invariably looked for a solution as best as he could. He was quick to notice the special talents of each individual and tapped them when necessary. This generated a feeling of ‘family’, so that, for example, the entire hospital staff would chip in when a conference was being organized, regardless of the specialty concerned. His vision surpassed the minor differences of language, religion and caste. One facet of

Dr Bhargava's personality is little known—his sympathy for star-crossed youngsters; many people tied the knot with his blessing, despite parental opposition! He was a simple man with simple habits. He rose early every morning and did an hour of yoga, which he said prepared him for the rigours of the day.

His 'work is worship' mantra inevitably left his family largely in the able hands of his wife Saraswathi, an eminent Professor of Microbiology herself. They had met as fellow postgraduate students in Pathology and Bacteriology (as the subjects of Pathology and Microbiology were then known). One decided to pursue the subspecialty of Pathology and the other, Microbiology in their subsequent careers.

Dr Bhargava's retirement from Kidwai in 1990 heralded a period when, probably for the first time, he could actually stop and smell the roses. He remained active, however, as an administrator at the Chinmaya Hospital for a couple of years. His post-retirement life was punctuated by brisk walks with his dogs, yoga and the avid reading he had never found the time for earlier. He was extremely devoted to his wife, and her death in 2000 shattered him. Dr Bhargava had always been spiritual and his interest in this

field intensified. He continued his research for the book he was writing on the metaphysical aspects of medicine, which is probably the only task he left incomplete.

It says much for the man that when his body was brought to Kidwai for public viewing (a fitting gesture), almost everybody who knew him was there to pay their last respects. He had once remarked to Dr Gowda that on his trek in the Himalayas (at the age of 65 years), he had felt that 'when in the Himalayas, you know what an insignificant figure you are'. He was not an insignificant man. His death literally marks the end of an era, when doctors believed in a bigger picture and a larger canvas in which every little bit counted and mattered; when institutions were not brick and mortar, but the men and women who toiled within. He did not live his life in vain. Rest in peace, Sir.

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Obituaries

Many doctors in India practise medicine in difficult areas under trying circumstances and resist the attraction of better prospects in western countries and in the Middle East. They die without their contributions to our country being acknowledged.

The National Medical Journal of India wishes to recognize the efforts of these doctors. We invite short accounts of the life and work of a recently deceased colleague by a friend, student or relative. The account in about 500 to 1000 words should describe his or her education and training and highlight the achievements as well as disappointments. A photograph should accompany the obituary.

—Editor