

HISTORY OF
IPGMR

N. ISLAM

HISTORY IPGMR 1964-78



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PREFACE

The IPGMR which began as a postgraduate centre within Dacca Medical College Campus way back in 1964 could not have a fullfledged scheme approved till 1978. With a beginning in the department of Physiology of the Dacca Medical College settling ultimately at the present site, the institute has many significant events in between. Most of those connected with it from the beginning are fortunately still alive and active except that Mr. Abdul Monem Khan, the then Governor of East Pakistan and Sir James D. S. Cameron, the first Director of this institute are no more in this mortal world to happily witness the present development.

For reasons obvious many in future would be interested to know the history of this biggest National Institute of the country in the field of Postgraduate Medical Education and Research. It has, as such been considered worth publishing.

Whatever has been recorded here is largely based on published documents of the institute, newspapers and notifications. Personal memories have been corroborated from those who have been associated with the institute from the beginning.

The author has no intention to injure the sentiment of any person or persons while recording facts about the Institute. Interpretation of any item in that light shall be most unfortunate and he offers prior apologies for unanticipated misunderstandings.

- Any omission anywhere should also be taken as unintentional. Despite the challenges and setbacks in the past it is hoped that the IPGMR shall continue to develop and fulfil its obligations to the nation. The book may serve as a useful guide.

Gulmeher

63, Central Road, Dhanmondi,

Dacca-5, Bangladesh.

Sept. 1979, 1980.

N. Islam



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ACKNOWLEDGEMENTS

The compilation of this History would not have been possible without active help and cooperation of the staff of the Institute. Mr. M. A. Farah, Secretary of the Institute from its inception made significant contribution by corroborating some facts. His retirement could not separate him from the Institute. He continues to serve as Hon'ry Secretary while Mr. Gholam Rahman, the new Secretary works in close cooperation with him.

Prof. Mujibur Rahman of Blood Transfusion Service, Prof. M. R. Khan, till recently Joint Director of the Institute, Mr. Mozammel Huq of Hyder Baksh Lane, Mr. Rashid Talukdar, Senior Staff Photographer of the Ittefaq, the Press Information Department of Govt. of Bangladesh and Messrs. Jasimuddin Ahmed and Md. Shahabuddin Khan, Librarian and Photographer respectively of IPGMR supplied the photographs reproduced here. Without these, the History must have suffered a deficiency.

Dr. Zafar A. Latif has done much more than one can realise. The most challenging task of publication in our country is proof-reading and technical guidance. Both require experience and love for work. He possesses both. Of many others who helped me in more than one way include Drs. Firdous Ara J. Janan, Nasseem Akhtar Chowdhury and Mr. Sirajul Karim. Dr. A. K. Azad Khan took pains in verifying the list of qualified doctors. If any error has crept in, he may not be solely responsible. Dr. A. Wadud and Mrs. A. Islam had to sit late night for writing down dictations with patience.

Mr. Mir Ahmed, Stenographer, proved his sense of responsibility and patience in the process of typing. Mr. A. Rahman and his staff of the press deserve thanks for their co-operation.

CALENDAR OF EVENTS

July	1964	Scheme for establishment of the Institute.
November	1965	Ad-hoc appointments made by the Govt.
Dec. 1,	1965	Dr. A. K. S. Ahmed joins as Professor of Medicine (Cardiac)
Dec. 6,	1965	<u>Dr. N. Islam joins as Joint Director & Prof. of Medicine.</u>
Dec. 10,	1965	Dr. James D. S. Cameron joins as Adviser, later designated as Director and Professor of Medicine.
Feb. 15,	1966	<u>M Phil and FCPS courses open.</u>
May, 13,	1966	Teaching block of the Institute opens.
March, 14,	1966	Symposium on Postgraduate Medical Education.
March	1968	<u>Dr. N. Islam takes over charge as Director & Professor of the Institute.</u>
March	1968	Introduction of DD course.
June	1971	The institute shifts to Shahbag.
January	1972	Al-haj Zahur Ahmad Chowdhury, hands over the former Muslim League Building to the institute.
March	1972	Dr. M. R. Khan takes over as J. D.
March	1972	School of Tropical Medicine amalgamated.
October	1972	Bangabandhu Sheikh Mujibur Rahman inaugurates the Central Blood Transfusion Service and opens Asma Khatun ward.
June	1972	Five more Postgraduate Courses open. viz DPH, DTM&H, DO, DCH, DBS&T
May	1973	Creation of Faculty of Postgraduate Medical Sciences and Research,
July	1974	Visit by Sir Francis Avery Jones and Prof. A. W. Woodruff.

December	1974	EEG machine set up in the Institute under Prof. M.A. Mannan.
February	1975	Visit by Prof. John Crofton, President, Royal College of Physicians, Edinburgh.
July	1975	Introduction of DPM Course.
December	1975	Dialysis unit starts functioning with Dr. Matiur Rahman
December	1975	Finalisation of the present site with the initiative of Prof. Md. Ibrahim.
January	1976	Introduction of MS (Orth) and DOrth.
February	1976	Acquisition of land for further expansion of the institute.
June	1976	Introduction of Refresher course for General Practitioners and MCPS examinees.
August	1976	Opening of a new block for ENT Diseases.
January	1977	Decision to introduce Postgraduate Course and training on Community Medicine.
October	1977	Final Approval of the IPGMR Scheme by ECNEC.
January	1978	Opening of new Paediatric Unit by Prof. A.Q.M.B. Chowdhury.
February	1978	President Ziaur Rahman Lays foundation stone for IPGMR complex.
March	1978	Health Education Exhibition.
April, 7	1978	Col. A. M. Chowdhury joins as Project Director.
August	1978	Additional 4 acres of land allotted for Residential accommodation.
August, 8,	1978	Prof. K. Ahmed takes over as Joint Director.



Sir James D.S. Cameron
Director and Professor,
Dec. 1965 to Mar. 1968



Professor N. Islam
Director and Professor, Mar. 1968 to till date

THE BEGINNING

The earliest available record on Postgraduate Medical Education is the Dacca University Ordinance of 1961 which lays down the courses and syllabi for various Postgraduate qualifications intended to be conducted in the Dacca Medical College (D. M. C.) under the Faculty of Medicine.

As an Associate Professor of Medicine of the Dacca Medical College I had hardly any scope for participation in the faculty meetings. It was, however, evident that no concerted effort was ever made to put the ordinance into practice.

INITIAL SCHEME—1964

It was only in July 29, 1964 that scheme for Post-Graduate training Center in Dacca Medical College was submitted to the P. P. A (Provincial Planning Authority) by the Director of Health Services, Govt. of East Pakistan. The introductory few lines of the scheme are of interest and therefore quoted here.

“We have to depend entirely on foreign countries for Postgraduate Training in Medicine. A scheme for the Institute of Postgraduate Medicine and Research has been prepared. But due to non availability of a large number of senior qualified teachers it will be impossible to implement the whole scheme until before the end of the Third Five Year Plan. In the interim period it is necessary that we take up training as many subjects and of as many students as possible within the available resources”.

The planning authority approved the scheme.

AN AD-HOC COMMITTEE—1965

An ad-hoc committee was formed with some senior Professors of Dacca Medical College namely Dr. Abdur Rahman, Professor of Physiology, Dr. A. K. S. Ahmed, Professor of Medicine and Dr. Mohammed Asiruddin, Professor of Surgery to implement the scheme with the facilities available in the Medical College and in the Institute of Public Health. The Committee could not make much headway inspite of their sincere effort except purchasing some furnitures, a car and appointing a few clerical staff.

MR. ABDUL MONEM KHAN—THE GOVERNOR

Mr. Abdul Monem Khan was then the Governor of East Pakistan. He strongly felt the need for establishing a Postgraduate Medical Centre in this wing. Mr. S. M. Shafiul Azam was then the Chief Secretary. He had keen interest in the development of Medical Education in the country in general and the Postgraduate Medical Education in particular. Both of them pushed forward the case for establishing an institute of Postgraduate Medicine. The British Council offered the services of Sir James D.S. Cameron, a former President of the Royal College of Physicians, Edinburgh as an adviser to the Provincial Government.

APPOINTMENT OF JOINT DIRECTOR

I was then working as Professor of Medicine, Chittagong Medical College after my return from U. K. on completion of my advanced study with a Nuffield Fellowship. Incidentally, I was the first Nuffield scholar in Medicine from this wing. None else could avail of this opportunity in medicine before.

One evening I received a phone call from Professor Abdur Rahman, Professor of Physiology, Dacca Medical College who had been working for the Postgraduate Project in addition to his own duties. He inquired if I knew any

thing about my new assignment. I admitted my ignorance. He told me that the Hon'ble Governor himself put my name as Joint Director of the Institute though the proposal was moved for him (Professor Abdur Rahman).

It was quite an unexpected news for me. Within a couple of days I received the Government order of my appointment as Joint Director of the Institute for which I was not at all prepared and decided to come to Dacca to have consultation with some of the seniors.

I was the first Professor of Medicine in Chittagong Medical College. There was no Professor in the subject before my joining the College. The department used to be run by Associate Professors. In fact, I joined the College as Professor in Feb. 1962 and left for U. K. in 1963 to return in mid-1964. During this short period I developed a great liking for the college and the students.

A REQUEST TO THE GOVERNOR

Dr. Md. Asiruddin, Professor of Surgery and Dr. A.K.S. Ahmed, Professor of Medicine of Dacca Medical College were close friends. I had cordial relationship with both of them. One day Dr. Asiruddin arranged a lunch in his Dhanmondi residence where Dr. A.K.S. Ahmed was also invited. During lunch Dr. Asiruddin wanted to know if I was very keen to join as Joint Director. I immediately replied that I was not prepared for the post nor I was very keen. He then told me that Dr. A.K.S. Ahmed was very eager for the post and I could take him to the Governor and place the proposal before him. Professors Asiruddin and A. K. S. Ahmed were very much known to the Governor. In fact they were his family doctors. I readily agreed and we decided to meet the Governor for the specific purpose. Sometime during the last week of November 1965 we fixed up an appointment with the Provincial Head and met him. I thought Professor

Ahmed who used to visit the Governor off and on for medical examination of his ailing daughter might have indicated about it earlier. The moment I started talking I could discover an expression of dissatisfaction on the face of the Governor. He very bluntly said that I was behaving like a 'daroga' who refused to be an inspector. He also said pointing Dr. A.K.S. Ahmed that he (Dr. Ahmed) would never be able to organise such a centre. Mr. Monem Khan was well known for his not infrequent crude remarks with conviction. Undoubtedly he had great faith in me and he loved me. I kept silent and came back pondering if I should have at all agreed for this joint visit.

THE FIRST THREE

Whatever might have happened till this time, I could not make a final decision whether I should join. On the 4th of December 1965, I met Mr. Shafiul Azam and apprised him of the whole situation. He advised me to join without any more delay. He also told me that Mr. Monem Khan selected me as Joint Director because he had some definite opinion about me. In case I did not accept this job he would be very much displeased with me and might even place me some where which would be worse than my previous position as Professor of Medicine. I took his advice and reported my joining on December 6, 1965.

Incidentally Dr. A.K.S. Ahmed joined as Professor of Cardiology on December 1, 1965 and Sir James Cameron on December 10, 1965. Thus we had the privilege of being the first three to join the institute.

ADMISSION OF FIRST BATCH

Till my joining the IPGM as Joint Director on December 6, 1965 Prof. Abdur Rahman, Prof. of Physiology, DMC acted as Coordinator for the implementation of the scheme

for establishing the Institute which, as earlier stated was accepted on principle by the Provincial Government in July, 1964. He had significant contribution in recruiting many of the office staffs and having sanctions for some of the important posts namely Professor of Medicine (Cardiac), Professor of Surgery and Professorial posts of Basic Medical Sciences, namely, Anatomy, Physiology and some part time posts for other branches.

On the 10th and 11th December, 1965 an informal meeting was held in the conference room of Dacca Medical College where Sir James Cameron, Professor Shamsuddin and myself participated. Decision was taken to start the course during the last week of January or as early as possible. Accordingly applications were invited from the students on December 12, 1965.

METHOD OF SELECTION

An interview committee was constituted with Professors of basic and clinical subjects. The candidates were called for interview only when they fulfilled the requirements as laid down by the College of Physicians and Surgeons of Pakistan and the Dacca University. Final selection of candidates was made on the basis of their academic career and the result of interview.

The final list of first batch of 33 selected students was sent to the Government on January 15, 1966. It received final approval and deputation on February 8, 1966 with the following facilities :

1. Full pay and allowances, during the period of study.
2. Book grant of Tk. 500/—(five hundred) only each.

(A student had to return the books to the library on completion of his course.)

3. Examination fees as payable to the University or to the College of Physicians and Surgeons.

INITIAL FACILITIES

Till the admission of first batch of students the institute had no physical existence. It was functioning in the department of Physiology of the Dacca Medical College. Provision for some beds were made in Ward II of the same hospital. Cabins were available on the basis of priority list set up for medical college.

Sir James Cameron, Professor A. K. S. Ahmed and myself used to share 30 medical beds while no separate surgical facilities were available except those of Dacca Medical College. Most of the teachers were part-time with an honorarium of Taka 25/—per lecture up to a maximum of Taka 300/—. Those part-time teachers were drawn mostly from Dacca Medical College. Others were from Institute of Public Health (I.P.H) and Sir Salimullah Medical College (S.S.M.C.).

At the beginning the institute had 9 full time and 12 part-time teachers. Their names and designations are :

FULL TIME :

1. Sir James D. S. Cameron
CBE, TD, FRCPE, FRSE
Director and Professor of Medicine.
2. Nurul Islam
MB (Cal), TDD (Wales), FRCP (Ed), FCPS (Pk), FCCP (USA)
Joint Director and Professor of Medicine.
3. A.K.S. Ahmed
MB (Cal), MRCP (Lond), FRCP (Edin), FCPS (Pk)
Professor of Medicine (Cardiac).
4. K. M. Fariduddin
MBBS (Dac), M Sc (PMC, Karachi), PhD (Indiana Univ)
Associate Professor of Physiology.

5. Md. Abdul Bari
MBBS (Dac), MSc (PMC, Karachi), Ph D (Indiana Univ)
Associate Professor of Anatomy.
6. Md. Mofazzal Hossain
MBBS, MRCP (Glas), MRCP (Edin)
Associate Professor of Medicine.
7. Kazi Mashiur Rahman
MBBS (Dac), MSc (PMC, Karachi), D Bact.
D Path (Lond), M C Path (Lond)
Associate Professor of Pathology.
8. S. Ali Ashraf
MBBS (Cal), MS (Cal), FRCS (Edin), FRCS (Eng)
Associate Professor of Surgery.
9. Jalaluddin Ahmed
MBBS (Dac), MSc (PMC, Karachi)
Associate Professor of Biochemistry.

PART-TIME

1. K. A. Mansur
MB (Cal), D Bact, DCP,
Professor of Microbiology, IPH
2. K.A. Khalaque
MB (cal), D Bact (Eng), FC Path (Lond)
Professor of Pathology, DMC
3. Kazi Shamsul Huq
MBBS (Cal), DMRD (Lond)
Professor of Radiology, DMC
4. Abdur Rahman
MB (Cal), MA (Cal), DTM&H (Eng)
Professor of Physiology, IPH

5. K. A. S. M. Abdul Quader
MBBS (Cal), DA (Lond), FFARCS
Professor of Anaesthesiology, DMC
6. M. A. Latif
MB, MA (Toronto)
Professor of Anatomy, DMC
7. Ali Afzal Khan,
MB (Cal), DLO (Lond), FRCS (Glas), FRCS (Edin)
Professor of ENT Diseases, DMC
8. Shamsur Rahman
MSc (Dac), MSc (PMC Karachi), PhD (Indiana Univ)
Professor of Biochemistry, IPH
9. Syeda Feroza Begum
MBBS (Dac), MRCOG (Lond)
Associate Professor of Medwifery, DMC
10. T. H. Khan
MBBS (Cal), DO (Lond)
Associate Professor of Ophthalmology, DMC
11. Md. Aatur Rahman
MBBS, DPH, MPH, PhD.
Associate Professor of Microbiology, IPH
12. Mazharul Imam
MBBS (Dacca), MSc (PMC Karachi).
Associate Professor of Pharmacology, DMC

Members of the clinical staff consisted of following :

- | | |
|-----------------------------|--|
| 1. Ahmed Nurul Alam | Clinical Assistant |
| 2. Md. Nurul Islam | —do— |
| 3. Alamgir Mohiuddin, Kabir | Sr. Honorary House Physician |
| 4. Md. Matiur Rahman | Research Asstt. to Professor
of Medicine. |
| 5. Osman Ali Sarker | Sr. Honorary House Physician |

- | | |
|---------------------------------|-------------------------------------|
| 6. Dr. A. Q. Siddique | Clinical Assistant. |
| 7. Dr. Humayun Quadir | Registrar (Surgical) |
| 8. Dr. Md. Farhad Naseem | Demonstrator of Pharmacology. |
| 9. Dr. A. B. M. Abdus Sattar | Demonstrator of Pathology. |
| 10. Dr. Md. Sanaullah | C. A (Medicine) |
| 11. Dr. Md. Rakibur Raza | C. A (Surgical). |
| 12. Dr. Md. Sirajur Rahman Khan | C. A (Surgical) |
| 13. Dr. Mrs. Hazera Mahtab | Research Assistant. |
| 14. Dr Khodeza Begum | House Physician. |
| 15. Dr. Md. Fazlul Haque | House Physician. |
| 16. Mrs. Diana Bowne | Dietician |
| 17. Miss. H. Halder | Staff Nurse, incharge of male ward. |

INAUGURATION OF THE FIRST COURSE

The inauguration of the first course was done on February 15, 1966 in a room adjacent to the department of Physiology, DMC in a brief ceremony with Mr. M. Alauddin CSP., Secretary Health, Labour and Social Welfare as the Chief guest.

Sir James Cameron wished all present "good morning and welcome." It was a good morning for all associated with the Institute in that they were now ready to start on the work which they had long looked forward to. A good morning for the guests who were now able to see the start of services for which they had made all the necessary preparation and a good morning for the students who were now able to start the advance work which would lead to the qualifications which they desired to make their life career. Sir James quoted as a motto, "to teach is as great a joy as to learn." He had noticed this saying of Donder in the department of medicine at the University of Leyden in Holland. The teaching of medicine originated in the East and then spread via Greece, Italy and France to Holland where Leyden became the centre of medical

instruction. There the emphasis was placed on clinical observations and examination based on instructions in Medicine as Basic Sciences. Physicians from Edinburgh went to Leyden for their instruction in medicine and a number of these founded the Royal College of Physicians, Edinburgh in 1681, thereby carrying the clinical instruction of Leyden to Scottish medicine. Now Scottish medicine, was largely represented in the new Institute of Postgraduate Medicine, Dacca and so the teaching of medicine, originating in the East and modified by progress to the West was returning to the East where it would provide the Postgraduate Medical education of the future. Sir James expressed complete confidence that with the combined enthusiasm of staff and student the Institute of Postgraduate Medicine, Dacca would become one of the leading world institutes of medicine.

Mr. M. Aladuddin. Secretary to the Government of East Pakistan, Health, Labour & Social Welfare Deptt. expressed the pleasure it had given him and his staff to take part in the organisation proceeding the establishment of the institute and his happiness that the teaching course was now being inaugurated. He was sure there was a great place for the Institute not only in Pakistan medicine but also in the training of other eastern countries. Pakistan required many more highly trained medical personnel and he saw instruction of the Institute providing teachers who would be able to develop the teaching potential of the country and thereby provide the much needed additional medical manpower. He wished the Institute a successful future and was certain that the staff and students would ensure this. There were 33 students admitted in the first batch including one nominee from the Central Government.

About this time a primary FRCS examination of the Royal College of Surgeons of Edinburgh was arranged in Lahore where

the students were as such selected for primary FRCS examination.

The names of the students and their fields of study are given below :

Name of student	Field of training
1. Anwarul Qader	Primary F. R. C. S.
2. Md. Nurul Absar	" "
3. Md. Shahidullah	" "
4. Shamsuddin Ahmed	F. C. P. S (Surgery)
5. Mohammad Ruhul Amin	" "
6. Abul Fazal Md. Masood	" "
7. M. Mojibur Rahman	" "
8. Muhammad Fazlul Haq	" "
9. A. S. Abdur Rasheed	" "
10. Muhammad Jahangir Khaled	" "
11. Moqbul Hossain	" "
12. A. K. Badruddoza	" "
13. Md. Abdul Wahed	" "
14. A. K. M. Anowarul Azim	" (Midwifery)
15. Mozammel Hossain Mallick	M.Sc. (Anatomy)
16. Abu Taleb Md. Fazlur Rashid	M.Sc. (Pathology)
17. Sheikh Monirul Hoq	" "
18. Farida Haq	M.Sc.(Microbiology)
19. Nazrul Islam	" "
20. Md. Abdul Jalil Mia	M.Sc.(Biochemistry)
21. Abdul Muzaffar Ahmmed	F.C.P.S. (Medicine)
22. Md. Anwerul Islam	" "
23. Muhammad Abdullah	" "
24. Muhammad Ishaque	" "
25. Roqunuddin Ahmed Chowdhury	" "
26. A. J. M. Mujibul Hoq	" "

27. Mahmudul Hoque Chowdhury	F.C.P.S. (Medicine)
28. A. K. M. Abdul Hafiz,	" "
29. Sqn. Leader J. Ahmed (PAF)	" "
30. Mahbub Kamal Chowdhury	" "
31. Md. Nasiruddin (Central Govt.)	" "
32. Abdul Rouf Bhuiyan	" "
33. Firoza Begum	F.C.P.S. (Midwifery)

The course was conducted in various departments of Dacca Medical College.

While the courses were being run in the borrowed wards and laboratories of the Dacca Medical College and hospital some addition and alterations were going on in the old Arts building and the Commerce block of the Dacca University. It may be mentioned here that the main building of Dacca Medical College Hospital originally belonged to the Dacca University. Except the old arts building and the commerce block located on the eastern block of the building all other departments of the University were shifted to the new site at Nilkhet. The block along with famous Modhu's Canteen were handed over to the Postgraduate for its temporary location.

The area which accommodated "Madhu's Canteen" of the Dacca University had a new construction. The historic Canteen of the University with memories of many many political discussions and group meetings was now replaced by the laboratory for clinical pathology while the other investigation departments were with the corresponding departments of DMC and Mohakhali Public Health Laboratory. The latter allowed learning space for Biochemistry and Microbiology students. The DMC accommodated all other departments viz. Anatomy, Physiology, Ophthalmology, Surgery, Obstetrics and Gynae. The eastern block which was originally a part of arts

block of the Dacca University is now converted into students hostel. This have accommodation for thirty male students. The Commerce block was renovated, additions and alteration were made for office accommodation and lecture rooms. On the left side at entrance there was a semi permanent structure. This was converted to Library.

INAUGURATION OF THE TEACHING BLOCK

The inaugural ceremony was performed on May 13, 1966 Mr. Fazlul Bari Chowdhury, Minister for Health, Labour & Social welfare, Govt. of East Pakistan was the Chief guest.

In his address of welcome Sir James Cameron said :

"Faith is the bird that seeks the light,
That sings while the dawn it still dark"

At the beginning of each year I enter in my diary a quotation, I consider suitable as motto for the year. There was no significance in my choice for 1966 being by Rabindranath Tagore, other than its appropriateness. I felt that faith was my strongest need in facing what lay ahead and it alone has carried me through to today. Many a time in the past five months my bird has been tempted to turn back and fly again westwards but it was continued to face to the still dark east. Now to-day it sees the first ray of light, to-day we see the completion of the first place of work in the reconstruction of the old secretariat buildings, the old University Faculty of Arts Buildings, to provide the Institute of Postgraduate medicine. It is a coincidence that the bird finds the dawn in the week of anniversary of Tagore's birth.

Faith continues strong as dawn heralds a long day ahead. The teaching block is the smallest of the works that require to be done. This room in which we are conducting our opening ceremony may look dilapidated to-day but we hope

to make it the radiological department of the hospital into which this building will be converted, a radiology department and a hospital which will provide everything of higher standard than is available anywhere in Pakistan. The other old buildings around the campus will be converted to library, residential accommodation, out patients department and dispensary. In addition laboratory and other requirements of basic sciences' teaching will be met by developments at the Public Health Institute. In 6 months time I hope you will all be with us again as our guests at the opening of the completed buildings of the Institute of Postgraduate Medicine. "Six months"—what a challenge to all concerned ! To ourselves, to the Government and their officials, and to the contractors. We look to you, Mr. Minister, for your support in achieving this target. We must be ready for the heavy examination and teaching programme which starts from November 1966. We are all eager to make this Institute a centre of Postgraduate education which will attract students from all parts of the East, may even from other parts of the world also. Give us the facilities and we will do so.

This is an auspicious day for the Institute. Some may regard it superstitiously as an unfortunate date to choose—In Britain no fisherman puts to sea on a Friday, in Britain no bride marries in May, and in Britain and in every other country 13 is an unlucky number. Our faith rises above superstition and we open on Friday, May 13th.

We, staff and students of the Institute of Postgraduate Medicine, welcome you here today, Mr. Bari, as the Minister of Health, Labour and Social Welfare in the East Pakistan Government, the Minister responsible for the Institute and the work that has so far been done. We thank you for kindly accepting our invitation to open the Teaching Block. Your

presence with us affords us the opportunity to thank all those who have worked under you and to present to you the many friends in non Pakistan Government circles who have been of great assistance to us. We have with us as guests, to whom we ask you to convey our thanks, the Director and Deputy Directors of the Health Services, the Secretary of the Health Department, officials from the Chief Engineers Department and the contractors who have worked for them. We also welcome an international group who have given us much solid help, representatives of the British High Commission and British Council, of the American Consulate and Information service, of the SEATO Cholera Research Laboratories, of Asia Foundation and many other bodies who have been "real friends". Also present are representatives of East Pakistan bodies who have already shown a practical interest in our development, and of bodies who, we hope, today's function will inspire to give us their interest and help. Our friends are too numerous to introduce to you personally, Mr. Minister. I present them all to you now and express our thanks to them. They are an international body and I am glad specially to welcome our two visitors from the Phillipines.

I have already thanked you, Mr. Minister, for coming to us today for this ceremony. I have pleasure in calling on you now to address us and later to unfurl the flag of Pakistan over our new building.

MR. FAZLUL BARI CHOWDHURY

In reply the Minister of Health Labour and Social welfare Mr. Fazlul Bari Chowdhury said " Sir James, Director of Health Services, Professors, students, Ladies and gentlemen.

It is a great pleasure for me to be able to be present in your midst and to inaugurate the teaching block of the Institute

of Postgraduate Medicine. The need for such an institute in East Pakistan was very keenly felt for sometime past. There is shortage of trained medical personnel in this part of the country. Effective steps have been taken to establish four more medical colleges in the province. Government is also proposing to produce Postgraduate qualified doctors. These will need the services of a Postgraduate Institute. Nothing unfortunately has yet been done. Till now we have been depending entirely on the foreign countries at the cost of hard earned foreign exchange. There are already 150 foreign trained doctors in the province and 207 are being trained in the foreign countries. An amount of Rs. 10 lacs of foreign currency is being spent for them annually. In future it will be multiplied several times.

So we have designed this IPGM to impart training in different branches of Medicine and Surgery and to conduct clinical research and research on basic subjects. The institute will conduct courses of training in basic and clinical branches of medicine leading to postgraduate degrees and diplomas of the Dacca University and Fellowship of the College of Physicians and Surgeons of Pakistan.

We are very grateful to the Government of U. K. for their very kindly placing of the services of Sir James D. S. Cameron at our disposal. With his help and guidance, I am confident, the institute will continue to prosper.

At the initial stage the institute has been started with 33 students and 100 beds. Our ultimate aim, however, is to shift it to Mohakhali with accommodation for 500 beds and the institute building during the 3rd five year plan. I hope this institute will serve as a modest beginning with a brilliant future. With these few words, I have pleasure, in declaring the teaching block open.

The vote of thanks was offered by me. During my short speech I tried to emphasise on the importance of such a national institute. A plea was also made to consider health sector as productive. Labelled as a non productive sector this, I said, had much less attention from the Government that it deserved. Nothing, I emphasised, could be productive without health and this sector should be given priority. The full text is reproduced below :

PROF. N. ISLAM

‘Health Minister, Sir James, distinguished guests, students and friends.

It is my proud privilege and a pleasant duty to offer you a vote of thanks.

I, therefore, on behalf of the staff and students of this institute extend to you our hearty welcome and offer our sincerest thanks for coming and joining us in this very uncomfortable hall in a mid-summer day.

I must admit, that rather intentionally we have arranged this function in this hall having only two or three temporarily connected fans. We want to show what we actually have at present. We did not like to have a white wash to conceal the underlying defects.

Sir James has already expressed to you his optimism about the great future of this institute and its possible role in South East Asia. With all his experiences in life, with successes and failures, if Sir James can be so optimistic I can almost certainly be equally so.

Before I conclude I have a request. This is for those who are directly connected with the administration of health in this country.

It is most unfortunate that health is not considered as a productive sector. We as such do not get as much as our friends do in other sectors. In other words, the financial allocation for health section is far less than that in other branches.

What I want to emphasise from this platform is that ours is also a productive sector. Perhaps we produce more. We produce talent, we produce research and we produce prosperity and reputation.

We produce talent and thereby we earn foreign exchange. I am glad that the Health Minister, only a little while ago, agreed on this very point and stressed on the loss of foreign exchange for not having had an institute like this so long.

May I make it clear that we do earn reputation abroad. This institute shall in many cases serve as a sieving process to find out suitable persons, who could be sent abroad on various schemes. They shall reflect our performance in a much better way than at present and some shall even earn reputation and come back with fresh laurels.

May I in the end, say that we shall regard this function a success if this Postgraduate is considered as a productive sector and extended the facilities it deserves''.

SYMPOSIUM ON POSTGRADUATE MEDICAL EDUCATION—1966

Simultaneously with the inauguration of the teaching block a symposium on Postgraduate Medical Education was organised. Delegates from both wings of Pakistan attended and participated.

The participants from West Pakistan included Prof. Hamid Ali Khan, Prof. of Paediatrics, Jinnah Postgraduate Medical Centre, Karachi, Lt. Col. S. M. K. Malik, one of the senior most Professors of Pakistan.

Those from East Pakistan included Prof. A. K. M. Abdul Wahed and Prof. Nowab Ali, one of the senior most members of the profession and a retired Surgeon General of Govt. of East Pakistan, Sir James Cameron, Professors K. A. Khaleque, Md. Abdur Rahman, A. K. S. Ahmed, Mominul Haque, S. A. Ashraf, A. K. M. Atabuddin and myself.

The two day symposium on Postgraduate Medicine in Pakistan concluded on Saturday after passing eight resolutions which demanded inter alia admission of students on merit basis and not by nomination, with due consideration on the nomination from backward areas of the country.

Various speakers from both the wings of Pakistan participated in discussion under the Chairmanship of Lt. Col. S.M. K. Malik of Lahore. Dr. Hamid Ali Khan of Karachi and Sir James Cameron, Director & Professor of Medicine, IPGM, Dacca participated in the discussion.

A resolution suggested to accord to M. Sc. (Medl.) the same status as other research qualifications specially for undergraduate colleges in order to encourage more doctors to join basic sciences.

Other resolutions passed in the symposium were :

Principals of the Medical Colleges should be from professor but should be permitted to continue as teachers for utilization of their talent and compensate shortage of manpower.

All teachers of undergraduate and Postgraduate institutions should be full-time with facilities of consultant practice of geographic type only (i.e. practice as consultant within the premises of the institution) and not like private practitioners outside.

Young doctors entering basic sciences should be given separate pay scale in the form of additional allowances such as non-practicing and teaching allowance.

Appointment to the professional posts should be by competition only.

The Postgraduate institution should have permanently posted Professors who should not preferably be transferred.

Teachers of the basic subjects of the FCPS course should have basic medical degree to be able to correlate the basic sciences and clinical problems.

ABDUL HAMID CHOWDHURY

The week-end's programme ended with a dinner at Hotel Empire, on May 14, 1966 at which Mr. Abdul Hamid Chowdhury, Speaker, Provincial Assembly, was the Chief guest.

The post-dinner speech by him is reproduced below :

"Ladies and Gentlemen,

I am indeed delighted to be in this assembly of persons who have chosen a profession of immense public utility. My esteem for the profession of medicine prompted me readily to accept with thanks the kind invitation extended to me.

I intend to make a departure from usual practice of after dinner humour in order to avail myself of this solemn occasion to say a few words of my own in regard to your profession.

You belong to a great profession. It gives you ample scope to serve the sick and suffering humanity. It is true you are to earn your living. It is understood you have not renounced the world, but while earning rewards for your work, our nation legitimately expects your dedicated service in the discharge of your responsibilities.

Yours is a noble profession but the very term imposes an obligation on you to remember that a profession is noble when it is nobly performed and I have no doubt in my mind that

although faced with many difficulties you are anxious to maintain the high tradition of your profession.

You have many problems and your one such problem was the establishment of a Postgraduate institute to enable our enthusiastic students to devote themselves to such work and higher studies in medicine and surgery. Of late there has been some increase in the number of Medical Colleges which has in its turn increased the number of Medical graduates.

The majority of these graduates wanted to take training in Postgraduate Medicine, some in general medicine and others in special subjects. They had to look to overseas Pastgraduate institutions for this purpose. As it invoked considerable foreign exchange, only few could go abroad. It is heartening to see that a full-fledged Postgraduate Institute has been established and it is a source of great encouragement to find that it is headed by a person of international repute—Sir James Cameron.

Many of our medical graduates will now be able to take training here. They will be well trained to appear in Postgraduate Diploma, Membership and Fellowship Examinations as well as Master Degrees. Our Medical Colleges are in need of trained qualified Professors and their associates. Many posts are vacant. Postgraduate students of this Institute will be able to fill these vacancies in a short time and there will be no dearth of qualified persons. What I want to stress is that all the trainees should devote themselves not only to the learning of higher medicine but also dedicate themselves to research work. The problems of the diseases of this country are entirely different from those of other already developed countries and our doctors should try to probe into them and solve these problems themselves. I would, therefore, like that this institute be called not only the Institute of Postgraduate Medicine but Institute of Postgraduate Medicine and Research.

I wish this institute long life and pray that our doctors getting training in this institute will enhance the prestige of the country in the international field of Medical Education and Research by making effective contributions.

We are grateful to Sir James Cameron, a past President of the Royal College of Physicians, Edinburgh, for his great enthusiasm and zeal. He brings with him a spirit of dedication and long experience to guide and train our students in this remote corner of the globe.

Thank you again for your gracious invitation".

SYMPOSIA ON

INDUSTRIAL HEALTH AND RURAL MEDICINE—1967

One significant event during 1967 was a symposia on Industrial Health and Rural Medicine held on April 22nd and 23rd under the auspices of the institute. This was the first symposia of its kind held in East Pakistan. Mr. M. Fazlul Bari, Minister for Health, Labour & Social Welfare, Government of East Pakistan inuagurated the function.

Dr. D. M. Mackay, Chief Medical Officer, Consolidated Tea and Lands Company (Pakistan) Ltd. and Professor Nawab Ali, retired Surgeon General of the Government of East Pakistan acted as Chairman on the first and second day respectively. I myself and Dr. Jean F. Rogier acted as rapporteurs. Most of the industrial medical officers attended the symposia. The whole transaction was subsequently published.

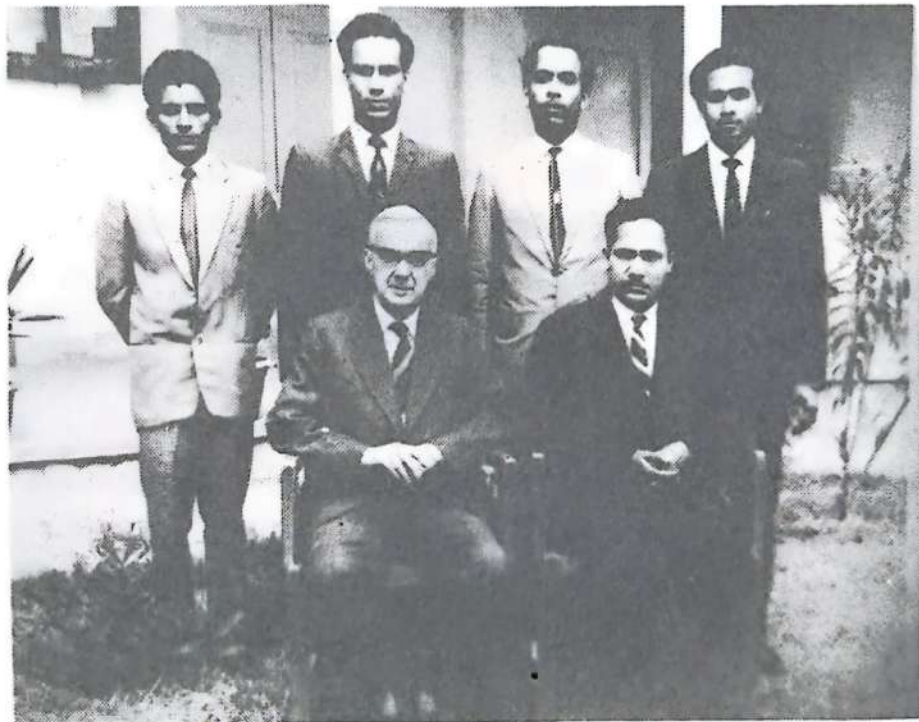
SIR JAMES LEAVES

On the expiry of his tenure as Director and Professor of Medicine Sir James left East Pakistan on March, 1968. I took over the charge having additional responsibility of Joint Director till Dr. M. R. Khan, Professor of Paediatrics took over



First batch of Clinical Staff

Sitting (R-L): Prof. N. Islam, Miss A.K. Halder (Staff Nurse)
Sir James Cameron, Lady Brown (Hon'y dietician)
Prof. A. K. S. Ahmed, Lady Cameron, Dr. M. M. Hossain,
Standing (R-L) : Drs. A. Q. Siddique, Osman Ali Sarkar,
Ahmed N. Alam, Md. Matiur Rahman, Mr.M.A. Farah(Secy.)



First batch of FCPS—1968

Sitting (L-R) : Sir James D. S. Cameron (Director) &
Prof. N. Islam (Jt. Director) Standing (L-R) : Drs. A.R.
Bhuiyan, Md. Ishaque, Md. Nasiruddin, R. Amin

the charge as Joint Director in March, 1972. Before leaving Sir James left a message in the visitors book at my request. This was :

“Faith is the bird that seeks the light, That sings while the dawn is still dark. The Institute of Postgraduate Medicine, Dacca a vision started in faith and on which I look for a great future development.”

OBJECTION FROM CENTRAL GOVERNMENT—1968

A request to the Central Government for taking up the Postgraduate Scheme under Federal Government Development Programme has long been kept in the cold storage. The Provincial Government, therefore, went ahead in her own way. When the institute run by the Provincial Government was rapidly gaining popularity with the financial and the moral backing from the Provincial Government, the Central Government raised an objection in 1968, on the plea that there should not be more than one institute in the whole of Pakistan. As one such existed in Karachi, there was no need or justification of having another in the same country no matter where it was located. This was a cabinet decision forwarded to the then Secretary Health, Government of East Pakistan. M. Siddiquir Rahman was then holding the charge of the Health Division, in place of Mr. Sultanuzzaman Khan who was then outside the country. He was convinced of the utility of such an institute in this wing but wanted my ‘expert’ opinion on the issue to strengthen his argument. He called me to his office and explained the implication. I put forward the following points in favour of establishing an institute in East Wing.

1. Pakistan, though one country, had two wings thousand miles apart.

2. The disease pattern, social and environmental factors in the two wings are different.
3. Establishment of the centre in Karachi could never extend service facilities to one of the components of the country—the eastern wing.
4. The centre, in Karachi could attract much less students from East Pakistan whereas the IPGM run by Provincial Government could attract many times more student during its short span of life from 1965 to 1968.
5. Students from East Pakistan would prefer going abroad for study in various fields rather than studying in West Pakistan, as both involve separation from home environment and relations and western system was still popular and highly estimated.

These arguments were forwarded to the Centre. Mr. Sultanuzzaman Khan, Secretary Health on return pursued the matter. This resulted in partial modification of their decision. The Provincial Government they said, could run a centre of its own if it so desired but the Central Government would extend no financial help. The Central Govt. was aware that health was a provincial subject and they had limited jurisdiction.

INTRODUCTION OF D. D. COURSE—1969

During the tenure of Sir James Cameron, Dr. A. Basit Prof. of Dermatology, Dacca Medical College tried his utmost to introduce a Diploma in Dermatology Course in the IPGM but could not succeed in persuading him. Prof. Basit was infact the only qualified man having Ph. D in Dermatology in East Pakistan. There was no other Postgraduate qualified Dermatologist in the country. The problem of skin diseases was however no less important and the general physicians used to treat these cases in a way they could manage it.



Teaching block—where we began
A part of Old Dacca University Building



Remodelled Shahbag Hotel—Present Postgraduate

Soon after Sir James left the country Prof. A. Basit approached me for introducing the course. I told him that Sir James was right in his own way in not introducing the course as there was no man-power to organise it. But the whole proposal should be judged in the light of circumstances prevalent in our country and our national priorities. It was, therefore, essential that we should organise such a course inspite of all limitations and we did it.

The first batch of students in D. D. course was admitted in June, 1969. There were two students who joined the course. They are :

1. Dr. Hasan Mohammad Khan.
2. Dr. Salahuddin Ahmed.

Dr. Hasan Mohammad Khan and Dr. A. Wadud, another D. D. student had the privilege of having further training in Dermatology and Veneriology in West Germany under Fellowship Programme. Dr. Basit retired in September, 1976 and Dr. Hasan Mohammad Khan is now responsible for organising the course. It should be mentioned here that the D. D. course was subsequently renamed as D. D. V., meaning Diploma in Dermatology and Veneriology. Veneriology was infact, included in the D. D. course also but the diploma (DD) as it stood did not indicate it.

THE INSTITUTE SHIFTS—1971

Shahbag, the only first class hotel during the earlier period of East Pakistan was fast deteriorating over the past several years. Properties were being taken away and internal fittings and fixtures were deteriorating. The Govt. constituted a committee consisting of Professors K.S. Haque, Asiruddin, S. Ahmed and myself to examine the possibilities of converting the hotel into Postgraduate Institute. The committee examined the possibility with the assistance of engineers and recommended to the Govt. in favour of converting

the hotel into hospital. Mr. S. M. Shafiul Azam was then the Chief Secretary, Government of East Pakistan. He was one time Secretary Health, Govt. of East Pakistan. Since his assumption of office as Secretary Health, Govt. of East Pakistan, he made significant contribution for the growth of Postgraduate Medical education in the country, without his bold step in sending more than three dozen doctors for higher education in U. K. in various branches of medicine the country by now would have suffered a gross deficiency of teachers in multiplying medical colleges. This he did in the teeth of opposition from the Central Government. None else could equally feel the need for facilities for Postgraduate Medical education in the country. Through his initiative and zeal a notification was issued handing over the decaying hotel to the Postgraduate authorities.

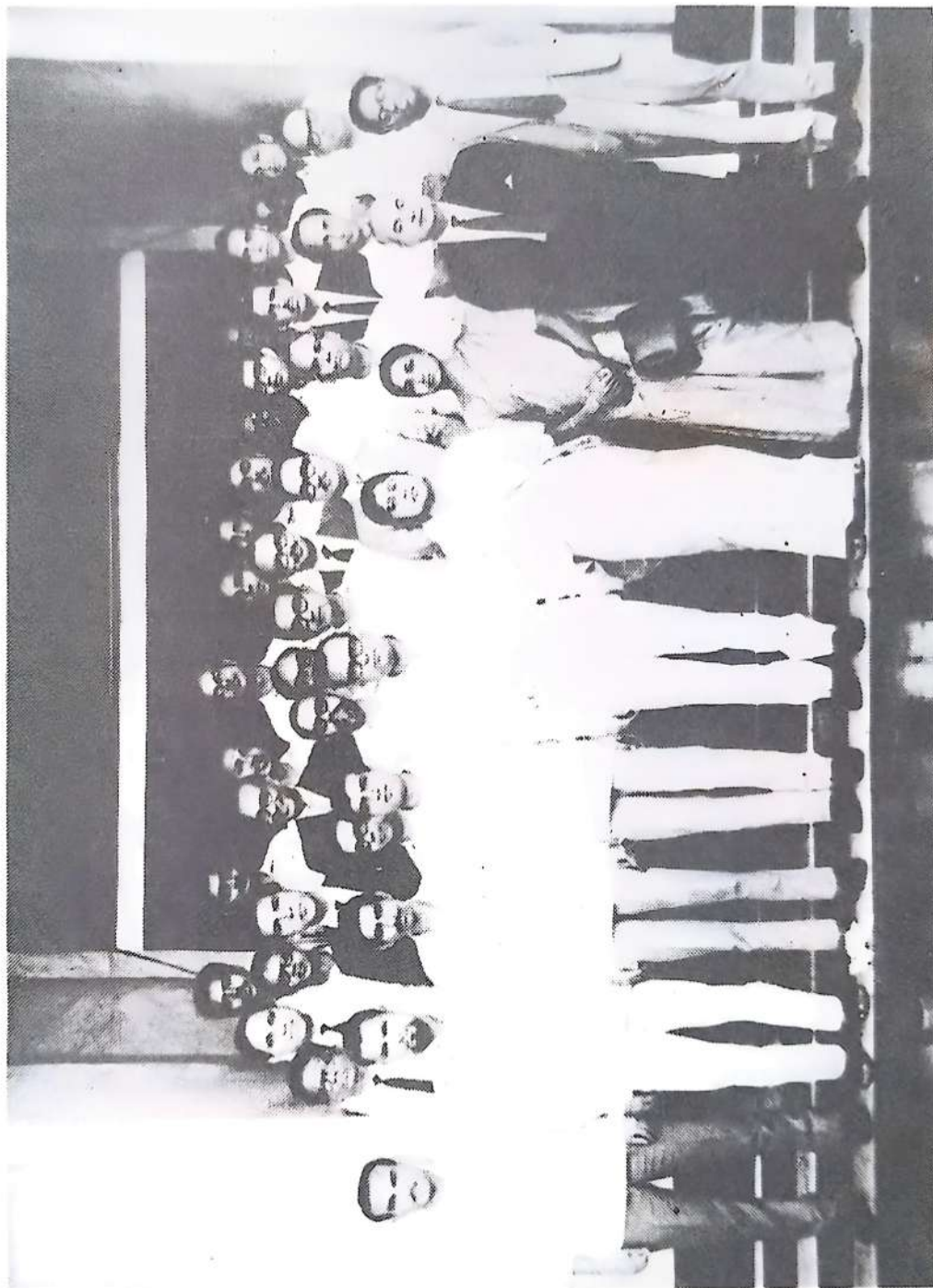
THE FIRST OCCUPATION—1971

The premises were occupied by us in June, 1971. Soon after the receipt of the order, as a first step the bar hall was converted into a medical ward and four patients were put therein. Nothing could perhaps be better safeguard against any unexpected onslaught from interested quarters. It may be mentioned here that there had been several aspirants for the spacious building so nicely located in the heart of the city.

The idea that prompted us to put patients in spite of difficulties for their management was to safeguard the possession. Experience taught us that hospital patients for compassionate reasons are least disturbed and they could never be thrown out.

INITIAL ADJUSTMENTS—1971

On occupation we gradually discovered the difficulties, deficiencies and drawbacks in running a full-fledged hospital in a hotel. My colleagues had several sittings for internal rearrangements, distribution of departments and extension of



At Shahbag : First get together after taking over—1971

facilities. The big dinning hall was soon converted to library and the tea room to Conference room. Plans were drawn for accommodation of other essential departments like Radiology and Biochemistry. Former small dining hall adjacent to the big one was considered suitable for Radiology. Nurses were accommodated in the top floor and the cabins were allotted in the 2nd and the 3rd floor of the south west wing. Other rooms were converted into paying and non-paying wards placing 3-4 patients in each room depending on the size. Senior teachers were given office accommodation in some rooms adjacent to their respective wards. The junior doctors were given residential accommodation on the top floor of the northern wing of the main building.

The V.I.P. block having provision for additional four floors was found suitable for Basic Sciences Department, whereas the ground floor of the same building which was initially a dining hall was converted into a lecture theatre.

The ungrudging help and support from various staff during this initial phase cannot be adequately appreciated. Those who were actively associated in planning include :

M. R. Khan	Professor of Paediatrics.
M. A. Mannan	„ Neurology.
S. A. Sobhan	„ Radiology.
K. Ahmed	„ Pharmacology.
K. M. Fariduddin	„ Physiology.
M. G. Muazzam	„ Microbiology.
S. Ali Ashraf	„ Surgery.
M. A. Matin	Associate Professor of Ophthalmology.

Incidentally these teachers were the first in their respective specialities and played a significant role in the development of their departments in the Institute.

FORMER MUSLIM LEAGUE BUILDING (SOUTH ANNEXE BUILDING)

On the southern side of the main Shahbag building, just grazing the road, there is a huge construction with an area of 15,000 square feet per floor. This was initially a property of the Nowab Family. DIT was supposed to acquire it for road side development. A construction was never desired as this would partly destroy the front view of the then only good hotel in the city namely the Shahbag Hotel. When the Nowab Family came to know about this from DIT sources they thought it would be wiser to donate the land to the Muslim League which was then the most powerful political organisation. The property belonged to the Wakf but Nowab wanted to have the credit of donation rather losing it to the DIT.

Soon after it was handed over the Muslim League went ahead with the construction. The plan was to have parking on the ground floor, a Cinema hall on the first and second floor, Muslim League office on the third floor and so on. The division of Muslim League and controversy over the assets of the Pakistan Muslim League left this building unfinished. Mr. Fazlul Quader Chowdhury, one of the seniormost politicians, became the President of the Convention Muslim League, a fraction of the divided Muslim League. He ordered for construction of the first floor of the building and decided to rent out the ground floor for shopping centre with some salamies. This is the story behind having shops in the ground floor. Even then many shops remained vacant and many were illegally occupied without any valid documents.

ALHAJ ZAHUR AHMAD CHOWDHURY—1972

Soon after liberation, Muslim League ceased to exist and the building was declared an abandoned property. In January, 1972, Late Alhaj Zahur Ahmad Chowdhury, the first Minister

for Health, Labour and Social Welfare, Govt. of the Peoples' Republic of Bangladesh, handed over this unfinished building to the institute in an impressive ceremony in the auditorium of the same building which was temporarily electrified. The function was largely attended and the auditorium was packed to the capacity, having many distinguished persons from home and many foreign diplomats and other officials.

In my address of welcome I narrated in brief the developments of the Postgraduate Institute over the years, its difficulties and the immediate need for expansion. I pleaded that the building where we were holding the meeting could be best utilised by the institute, meant for serving the suffering humanity. No other purpose could be equally justified. Besides the Muslim League when in power could justifiably reoccupy it if it were used for any other purpose.

Alhaj Zahur Ahmad Chowdhury after my address of welcome delivered his inaugural speech in which he called upon the doctors and medical practitioners of the country to rededicate themselves to the services of the teeming millions who had been deprived of necessary medical facilities during the last 24 years of Pakistan rule.

The Minister said that he was immediately concerned about health problem which, he added, was very vital. He stressed on the need of those poor people who lived in the villages and required medical help urgently. For this he urged the Government doctors to work very hard with honesty, sincerity and in a missionary zeal on emergency basis.

He recalled the great sacrifices made by the Bangalee youth and the freedom fighters for liberation of Bangladesh and disclosed that many of the freedom fighters died for want of medical treatment in course of their struggle. The doctors were,

therefore, reminded of their duties and responsibilities towards reconstruction of medical system of the country in such a manner and at a very short time so that the poor and the affected people of the country could no longer be neglected in any way in respect of medical treatment.

The Minister appealed to the doctors to work with the feeling of a free people. Because, he said, with the revolution entire social system would be changed and the medical practitioners had to work with a changed outlook so as to meet the need of the suffering humanity.

Al-Haj Zahur Ahmad Chowdhury emphasised that no time should be wasted for bringing about a revolutionary change in the old medical setup and cautioned that anyone failing to adapt himself with the changed outlook would be dealt with severely. As for government all due protection would be given to the good workers, he added.

The Minister conveyed the nation's gratitude to the Indian Prime Minister who came forward with humanitarian support at a very critical juncture of Bangladesh for liberation of Bangalees from the yoke of barbarism.

The outgoing military janta of Pakistan had crushed our national resources but they could not destroy our ideology, talents and national integrity which, he felt, would be enough to rebuild Bangladesh amidst cruel ruins caused by the Pak army. He referred to the new building of the Postgraduate Hospital in which the function was being held and which was used by the agents of the Pak army as their camp. The Minister declared amidst loud cheers that all unauthorised properties of the collaborators of the then Pak army would be utilised for the welfare of the People. From today, he said, the building shall belong to the Postgraduate Institute devoted to the cause of suffering humanity.



Immediately after Liberation—

Alhaj Zahur Ahmad Chowdhury addresses doctors, Jan., 1972

The gathering was also addressed by Dr. T. Hossain, Health Secretary, Mr. Abul Kasem, MPA, acting President of Chittagong District Awami League and Mr. Abdullah Al-Haroon, MPA.

Mr. Santosh Kumar Roy, an ex-Minister of West Bengal Government who also attended the meeting said in his address that the friendly relations between India and Bangladesh would be maintained at any cost irrespective of pattern of Government that may exist both in India and Bangladesh. The Director of Health Services, Dr. K. A. Khaleque presided over the function. Dr. T. Hossain, Secretary Health, assured of all possible cooperation from the Govt. A national institute like this, he said, must of necessity grow from strength to strength. It 'however' demanded of sincerity and devotion of teachers which he hoped would not be lacking.

AN UNHAPPY INCIDENT

Soon after the function was over, a group of workers of erstwhile Shahbag hotel gathered together and wanted to assault me. These people were influenced by some interested quarter who had since been trying to occupy the hotel for various purposes. They complained to the Minister that I took away their job by converting the Hotel into Hospital. Just at the sight of those people, Dr. Khaleque who had been talking to me suddenly disappeared from the scene. But Al-Haj Zahur Ahmad Chowdhury and Dr. T. Hossain both came to my rescue, called those people and told them that the P. G. was not my personal property but a national one and the decision was made by the Govt. and not by me. Their employment was promised by the Minister.

He also told them of my contribution rather in a magnified way. They calmed down and possibly understood their mistake. Dr. T. Hossain was all along by my side and escorted me to the other side of the stage. He waited there for a while and then

took me to my residence at 63, Central Road, Dhanmondi. I thanked him sincerely for all his help, but was surprised at the unexpected disappearance of Dr. Khaleque. Many others advised me not to take note of it. To them it was not usual for him. Inspite of several differences with Dr. T. Hossain I discovered in him a great quality of partnership in distress. From the following day the out-patient department started functioning in this building. On the eastern side of first floor (auditorium) there were five rooms originally meant for office purpose. These were utilised for various sections of the out-patients department.

UNAUTHORISED OCCUPATION

At this time some ten to twelve Class III and IV employees of the former hotel continued to occupy the northern annexe building. These were the persons who staged demonstration against me before the Hon'ble Minister for Health, Al-haj Zahur Ahmad Chowdhury.

I decided to lodge a protest to the Govt. and maintain that I could not attend my office safely till those persons vacated the premises. Nothing was done. After about a week Professors M.A. Mannan, S.A. Sobhan, M.A. Matin, Col. M.A. Malik and K.M. Rahman came to my residence to request me to attend the office with the assurance that they would share the responsibilities and see that nothing happened. I thought it was almost digesting an insult.

I finally decided to meet Bangabandhu. On the following evening, I saw him in his office and explained the whole affairs. He expressed surprise as nobody told him about it before. Immediately he rang up the highest police authorities instructing them to get the premises vacated within 48 hours. This was done on the following Sunday within the specific time limit and I resumed my office next Monday. All

the buildings were now entirely in our possession. Our Class III and IV employees now occupied the building entirely. The hotel employees were, however, given jobs in State Guest houses like Padma, Meghna etc. Many were retained with us as cooks, masalchis, ward boys, bearers and darwans. As time passed on, things got settled and the workers were satisfied.

AMALGAMATION OF SCHOOL OF TROPICAL MEDICINE (STM)—1972

Second significant contribution made by Late Zahur Ahmad Chowdhury was the amalgamation of the School of Tropical Medicine with the Institute. The arguments in favour of amalgamation were as follows :

1. The country should have one centre of excellence for Postgraduate Medical Training and specialised patient care.
2. The origin of School of Tropical Medicine during British rule was for the purpose of offering short term training to the British doctors about tropical diseases so that they could serve in these tropical British colonies. Besides, some doctors from these countries were allowed to have the British Diploma of Tropical Medicine.
3. There could be nothing tropical as a separate category in a tropical country.
4. Diseases like malaria, kala-azar, dysenteries, filariasis tuberculosis, typhoid, leprosy, if excluded for a specialised hospital nothing more is left for the other institutes catering for medical education and health care.
5. Amalgamation is essentially an avoidance of duplication of equipments, personnel and establishment which involves huge expenditure. This adversely affects the budgetary allotment for health sector.

Later Zahur Ahmad Chowdhury and Dr. T. Hossain, the then Secretary, Ministry of Health and Family Planning issued order of amalgamation of the teaching posts and other technical and non-technical staff to strengthen the manpower of the thriving Postgraduate. Shifting of the equipments, furnitures and pictures strengthened the laboratory facilities. Dr. K. A. Mansur, officer on special duty, Mohakhali complex, with rank and status of Director of Health services was the part-time Director of the School of Tropical Medicine. With his untiring effort, the School of Tropical Medicine was approved by the Central Govt. Kazi Anowarul Haque, the then Minister for Health, Govt. of Pakistan extended all possible help and co-operation. By personal discussion with Dr. K.A. Mansur and on examination of the staffing pattern of the School, it was evident that Dr. Mansur had in mind the development of a full-fledged Postgraduate institute out of the School of Tropical Medicine. He very well realised that the Central Govt. would not go for a Postgraduate Institute in East Pakistan. The only way to extract financial allocation from the Central Govt. was, therefore, to have it in their line of action imperceptivably modifying the course with the ultimate aim in view. In the amalgamation, therefore, he did not find any objection. Dr. A .K. M. Kafiluddin, Professor of Epidemiology was extremely helpful during the whole process of amalgamation. Some of the junior staff of the S. T. M. even attempted to assault him during shifting. The only reason perhaps was their apprehension about the future. Many did not like the idea of having additional work load of a bigger institute.

F.C.P.S. TROPICAL

FCPS originally was intended for subjects like general medicine, surgery, ophthalmology, obstetrics, and gynaecology. Through the persuasion of Dr. K. A. Mansur a special

course for FCPS tropical medicine was, after much deliberation, accepted by the CPS (College of Physicians and Surgeons). The first batch of students in the meantime appeared in part one FCPS (Tropical) examination. Only two students passed out of six. One of these two belonged to West Pakistan and left the country after liberation. The other passed the final examination. With the amalgamation of the Tropical Medicine and after liberation the CPS reviewed the subject. A representation by the students of FCPS (Tropical) was made. Their arguments were that :

1. The course in part I tropical was extremely laboratory biased, not needed for clinical practice.
2. Teaching in clinical medicine could not be clearly isolated into two categories namely tropical and non-tropical in our country.
3. Having undergone elaborate and strenuous course with many unnecessary details the students could not have a proper prospect in future career as they by definition covered only small segment of internal medicine under the name and style 'Tropical'.

After amalgamation of the course those who failed in Part I (Tropical) were allowed to continue FCPS I (General) and appear in examination along with others. The only person who passed FCPS final in tropical was Dr. Mozharul Mannan who later on had further training in Gastroenterology under Commonwealth Scholarship with Sir Francis Avery Jones of Central Middlesex Hospital, London.

It must be mentioned here that the School of Tropical Medicine did not have independent physical existence. It was housed temporarily in the Infectious disease hospital constructed by the Provincial Govt. Some of the departments were located in Public Health Institute, another provincial organi-

sation. It was, therefore, only a stop-gap arrangement for the School of Tropical Medicine. The main building was intended to be constructed in the Second Capital adjacent to Suhrawardy Hospital then called Ayub Hospital. The construction of the hospital however, slowed down. Some of the quarters were completed and occupied by STM staff. Many of those are now occupied by other Govt. staff and some are still in possession of a few of the IPGM staff and students.

SEMINAR—1972

A three day seminar was held in May during this year dealing with the recent developments in various fields of Medicine. The final session was devoted to Postgraduate Medical Education. This was presided over by me. Different Sub-Committees dealt with various aspects of Postgraduate Medical Education in Bangladesh. It was unanimously recommended that the Postgraduate Medical Institutions should be autonomous at all levels in the same line and the selection of candidates for Postgraduate Medical education should always be competitive. They also recommended that the teaching of the Postgraduate Medical speciality should be extended to other Medical Institutes besides the existing Postgraduate Medical Centres.

Mr. Abdul Malek Ukil, Minister for Health and Family Planning who attending the dinner arranged on the occasion under the auspices of the participants said that it was essential for a newly-liberated nation to develop her health system in such a way as to make room for an improvement in the method of teaching, research and patient care in the remote areas.

He accepted the suggestions that admission to the Postgraduate must be on the basis merit, and appointments in the teaching course should be on the basis of qualifications, experience and research contributions of the teachers.

Among others who attended the dinner included Khandakar Mushtaque Ahmed, Minister for Flood Control and Irrigation, Professor Nurul Islam, Deputy Chairman, Planning Commission, Professor K.S. Huq, President of the College of Physicians and Surgeons, Bangladesh.

CENTRAL BLOOD TRANSFUSION CENTRE—1972

It was proposed during 1971 that the former Muslim league building should accommodate Auditorium, Library, Blood transfusion Centre, ENT (Ear, Nose, Throat) departments and some surgical departments. Brothers to all men, a philanthropic organisation from France agreed to donate towards the cost of construction for the blood transfusion centre. Accordingly a plan was drawn and the works completed during July, 1972.

Before shifting to the present site, the blood transfusion centre was located in four rooms of the Basic Science building. The work was initiated with the donation of 350ml of blood by me.

The department was being run by a part-time Professor. Dr. Mujibur Rahman of Dacca Medical College was the only Postgraduate qualified person in Blood transfusion having his Ph.D. from the University of Glasgow. I requested him to offer his services during planning of the centre. He ungrudgingly offered his services during the whole period of building up the department.

ASMA KHATUN WARD—A DONATION—1972

Meantime, Alhaj Mozammel Haque, a philanthropist contractor of Hyderbox Lane, Dacca, readily agreed on my request to construct an additional floor on the eastern side of main building to accommodate a female ward to be named after his mother Mrs. Asma Khatun. Mr. Haque was, in the earlier days of my profession, one of my serious patients. He was then a

nominal contractor suffering from diphtheria and successfully treated by me. Knowing the type of the disease as it was he became one of my very great admirers. He is now a close friend of mine and an established first class contractor.

Anyway, the work of construction of this ward was completed under the direct supervision of Mr. Mozammel Haque within a period of six months.

By August, 1972, therefore, both the Blood transfusion centre and the female ward were ready for use.

BANGABANDHU AT OPENING CEREMONY—1972

Bangabandhu Sk. Mujibur Rahman returned from abroad after undergoing an operation for gall-stone in London and then convalescing in Geneva for a few weeks.

Having had the privilege of being his personal physician, I was all along with Bangabandhu during his illness. On return home I was advised by some of my colleagues to have him with us for the opening ceremony for the blood bank and the Asma Khatun ward.

A meeting of the professors was convened which endorsed the views and we decided to approach him with a request for the ceremony.

Bangabandhu agreed to grace the occasion even though he was convalescing and still very weak after the major operation. On October, 8, 1972 in the auditorium most crowded and with many high ranking officials and foreign nationals Bangabandhu performed the function. He mentioned at the beginning of his speech that he could not refuse a request from the staff and students of IPGM including his personal physician even though his personal physician and consultants abroad advised him rest. His speech as reported in the Morning News October 9, 1972 is reproduced here.

EXTREME MEASURES WILL BE TAKEN AGAINST A FEW TO SAVE MILLIONS

Bangabandhu Sheikh Mujibur Rahman on Sunday said that in the largest interest of the nation he would not hesitate to take extreme measures against a few, reports BSS.

Speaking as chief guest at a function at the Postgraduate Hospital on Sunday morning the Prime Minister said that in view of the social evils in the country he had a feeling that he might have to go for drastic action.

He would not hesitate to take extreme measures against two hundred or five hundred persons to save seven and a half crore people, he said.

Bangabandhu said, I shall be with the suffering people. The white collar gentlemen were interested only in promotions, he commented.

The function was arranged for the inauguration of central blood transfusion service and a new female ward at the Postgraduate Hospital. This was the Prime Minister's first public engagement since his return last month from abroad after gall bladder operation.

The Prime Minister, during his 20 minute speech gave a passionate call to all sections of people, particularly to those in medical profession to work with a spirit of service and dedication for the well-being of the masses.

Bangabandhu Mujibur Rahman recalled that he had begun his political career as a volunteer. He had extensively toured the country and was aware of the people.

ORDINARY PATIENTS

Referring to the difficulties that ordinary patients had to face in getting admission to hospitals and the discriminatory attitude shown by some doctors to them, the Prime Minister asserted that the members of the noble profession of medicine

must rise above such mentality. They must work with a sense of service to the suffering humanity so that the responsibility of the profession remain unaffected.

PAK BRUTALITY

Recalling that people from all walks of life had to die in order to liberate the country Bangabandhu said that so far the names of 50 doctors killed by the enemy had been ascertained. Bangabandhu said that it was a common practice that doctors were not killed in war. But the barbarous Pakistan Army brutally killed our doctors. He described the Pakistan occupation forces as even worse than beasts.

Bangabandhu suggested that a list of the Shaheed Doctors should be displayed in the Hospital so that their colleagues were reminded of their great sacrifice for the nation.

HUMANE OUTLOOK

The Prime Minister said that his Government would consider giving necessary funds for the development of the Postgraduate Hospital. Stating that money would not be lacking he observed that money alone would be no help. We must have a humane outlook, he said, adding that it seemed we had lost humane outlook. He regretted that there had been an apparent degradation of national character and recalled his earlier comment that one Bangabandhu would not suffice in rebuilding the country. Men of golden heart would be needed for building Sonar Bangla (Golden Bengal).

When 30 lakhs of people had to sacrifice their lives for achieving independence how could some persons stoop so low as to take bribe or misuse public money, he wondered.

There had been so many killings by the enemy, the wailing of orphaned children were heard all around, the walls were littered with blood-stains, he pointed out.



Bangabandhu opens Blood Transfusion Centre, Oct., 1972.



Bangabandhu opens Asma Khatun Female Ward, Oct., 1972

HEALTH PROBLEMS

Dwelling on health problems the Prime Minister expressed his dissatisfaction over the unhygienic conditions prevailing in hospitals. Why a hospital should be so that it would smell. Why a professor should not be serious about his responsibility to the ward, he asked. He also regretted that the specialists trained abroad with people's money were unwilling to go to rural areas.

The Prime Minister reminded that the hospitals in the country including the Postgraduate Hospital had been set up with money provided by the suffering people. And the doctors produced in those institutions were trained with public money. He stressed that doctors must remember this.

The Prime Minister said that he was emphasising the need for a change of attitude not only on the part of doctors but also a change of attitude on the part of every section in the society, he said.

CORRUPT ELEMENTS

Bangabandhu referred to a report in which he was quoted as saying that both his qualification and disqualification was his love for the people. But he emphasised none must mistake it for weakness.

Stating that the present situation in the society could not be allowed to continue, the Prime Minister said that the corrupt elements must mend themselves or the curse of the 30 lakh shaheeds would be upon them. He reminded them of what had been the fate of the Muslim Leaguers.

CHARACTER

Stressing the need for character, Bangabandhu observed that a nation could never achieve greatness unless it had character. He regretted that the suffering people were not getting

medicine and the unscrupulous persons were pushing spurious drugs in the market. He referred to an incident in which some patients became sick after taking a particular cough syrup. Referring to the assistance Bangladesh was getting from friendly countries, the Prime Minister asked what would be their reaction if such corruptions went on.

BLOOD DONATION

Dwelling on the issue of donation of blood to hospitals Bangabandhu expressed his confidence that people would come forward to give blood for saving patients lives. People who shed their blood by facing bullets would also give blood for saving the life of their fellow human beings, he observed. He also recalled that during the last mass movement and on other occasions they had always come forward to donate blood to the hospital blood banks.

BANGALEE DOCTORS

Bangabandhu said that during his stay abroad for treatment he had asked the Bangalee doctors there to return home for serving their country. It would be sin on their part if they stayed abroad for larger incomes. It was the people of the country who had paid the money that had been spent in making them doctors and sending them abroad for higher training, he reminded.

The Prime Minister, dwelling on the need for development of the health service, said that his Government wanted to set up a hospital in every thana so that the bulk of the people who lived in villages also got medical treatment. He also stressed the importance of family planning measures in the country so that growth of population did not stand in the way of national development.

Bangabandhu said that everybody engaged in the health service must work with an equal sense of service to the suffering humanity. All must work with mutual co-operation, he added.

The Prime Minister said that whether it was a doctor, a nurse or a sweeper in the hospital, all were working in the interest of the patients. So everybody in the hospital including the sweepers must be given the respect, he observed. He called for a change of attitude so that the nurses did not feel that they were not respected. The Prime Minister suggested that a plan should be chalked out to encourage graduate women to join the nursing profession.

The Prime Minister pointed out that in countries like Britain, France and Germany the hospital personnel worked together in mutual co-operation and they were all treated with dignity. Our doctors returning with degrees from those countries should also treat their colleagues in lower posts with respect.

The Prime Minister observed that a sweeper or nurse was as good a citizen of Bangladesh as anybody else. They were working for earning their bread like anybody else, he observed.

APPEAL

The Prime Minister appealed to all to perform their duties so that the nation could tide over the present difficulties, comparing the post-war situation in Bangladesh with that in other countries the Prime Minister said, here you can sleep peacefully, get your rations and salaries, although the Government had to depend on other countries for procuring food and the common man had exhausted his capacity to pay taxes. All must change their hearts and a man must be looked upon as a man, he urged. If we could do so the face of the country would be changed.

Bangabandhu appealed to the richer section of society to come forward with donations for the development of hospital service. Everybody should contribute according to his capacity for rebuilding the country, he said.

Mr. Abdul Malek Ukil, Minister for Health and Population Control in his presidential speech lauded the role of doctors in the service of suffering humanity. He expressed great satisfaction at the performance of the Institute of Postgraduate Medicine over the years inspite of many handicaps. Assuring all possible help from the Government he hoped that the institute would develop progressively and significantly contribute in the field of medical education and research.

The Prime Minister was then shown round the new premises of the blood transfusion centre and the new ward opened by him.

Other significant events during this month are the renovation of Basic Sciences Departments including Biochemistry, the Conference room, the Radiology department and the functioning of angiographic unit.

D.B.S.&T COURSE BEGINS—1972

A one year course in DBS&T (Diploma in blood serology and transfusion) was introduced through the initiative of Dr. Mujibur Rahman during the academic session in 1972.

Dr. M. A. Quader was the first student to be admitted while Dr. Musharraf Hossain was the first student to pass DBS&T in 1974 followed by Dr. Quader later in the same year.

In 1974 Dr. Mujibur Rahman joined the institute as full time professor in the department of blood transfusion Central Blood Transfusion Service.

FACULTY OF POSTGRADUATE MEDICAL SCIENCES & RESEARCH—1973

With the expansion of postgraduate courses, involving many departments with senior teachers, it became gradually evident that the courses of study, the requirements and regulations are entirely different from undergraduate courses. If all the course heads are included in the faculty it would

be too large. Besides, for reasons, often beyond control, under graduate medical faculty is frequently beset with problems of shifting the date of examination, relaxation of rules, special consideration for supplementary or supernumerary examination and the like. Postgraduate courses must of necessity maintain a high standard of examination comparable to international level unbiased by individual or personal factors. The dates must be fixed once for all, never to be shifted, short of a national calamity. Their result has to be published on the following day or within a week. All these are possible only when there exists a faculty exclusively for postgraduate medical sciences. Besides, a group of enthusiasts at that time were holding negotiations for introducing Postgraduate courses in Orthopaedics and some other branches. Dr. R. J. Garst who once told me that he would discuss about Postgraduate courses in Orthopaedics never came to me again, when he thought that I might be strict in formulating curriculum like those in other subjects. He thought he would easily get through this difficulty through undergraduate faculty.

I had discussions with some of my close friends who are known for their academic interest and professional ability. Dr. S. A. Sobhan, Professor of Radiology. Dr. M. A. Mannan, Professor of Neurology and Dr. M. A. Matin, Professor of Ophthalmology and Dr. M. R. Khan, Joint Director, Dr. A. K. M. Kafiluddin, Professor of Epidemiology were among those who dispassionately assessed the need for a separate faculty. Dr. Abdul Matin Chowdhury, the Vice-Chancellor of Dacca University could realise the importance of a Postgraduate faculty and the need for its early creation. He took immediate necessary steps for the purpose.

A faculty of Postgraduate Medical Sciences and Research was thus created by an order of the Chancellor of the University, Mr. Justice Abu Sayeed Chowdhury in May, 1973.

The composition of the first faculty was as follows :

1. Dr. N. Islam Director, IPGMR
2. „ M. A. Bari Professor of Anatomy, IPGMR
3. „ K. M. Fariduddin „ „ Physiology, „
4. „ K. Ahmed „ „ Pharmacology, „
5. „ K. A. Khaleque „ „ Pathology, „
6. „ K. M. Rahman „ „ Microbiology, „
7. „ A. M. Shamsul Huda „ „ Biochemistry, „
8. „ Mujibul Huq „ „ Medicine, „
9. „ S. A. Ashraf „ „ Surgery, „
10. „ T. A. Chowdhury „ „ Obs. & Gynae, „
11. „ S. A. Sobhan „ „ Radiology, „
12. „ S. F. Huq „ „ Radiotherapy, DMC
13. „ M. R. Khan „ „ Paediatrics, IPGMR,
14. „ M. A. Matin „ „ Ophthalmology „
15. „ Ali Afzal Khan „ „ ENT diseases, „
16. „ Shamsul Azam „ „ Dermatology, DMC
17. „ A. K. Khan Director, IDCH, Mohakhali.
18. „ A. K. M. Kafiluddin, Professor of Epidemiology, IPGMR
19. „ M. Rahman, Professor of Blood Transfusion, IPGMR
20. „ R.J. Garst, Hony. Professor, Orthopaedic Centre,
Shaheed Suhrawardy Hospital.
21. The Dean of the Faculty of Medicine, University of Dacca
22. The Principal, Sir Salimullah Medical College.
23. The „ Mymensingh Medical College.
24. The „ Barisal Medical College.
- 25-26. Two representatives of Academic Council, Dacca University.
- 27-30. Distinguished teachers and research workers of Medical
Sciences, to be co-opted.

THE FIRST MEETING OF THE FACULTY—1973

The first meeting of faculty was held on May 28, 1973 with myself as the Dean.

It was a very happy occasion where as many as 21 members attended. I took great pleasure in introducing the members of the faculty and welcoming them. The whole purpose was explained and the business transacted. Several important decisions were made.

These include formation of various committees for different postgraduate courses. Committee No. I was responsible for M. Phil and DCP Course with Dr. Kamaluddin Ahmed, Professor of Pharmacology as Chairman.

Committee No. II was made for DTM&H, DPH, DCH DCTD & DBST courses with Dr. A. K. Khan, Director, Institute of Diseases of the Chest as Chairman.

Committee No. III was headed by Dr. S. A. Sobhan, Professor of Radiology. This committee was responsible for DMRD, DMRT, DO, DLO, DA & MS (Ortho) Courses (Vide appendix).

PROPOSAL FOR SHIFTING THE INSTITUTE—1974

While delivering his Presidential address at the fresher's reception of Karatia Sadat College, Tangail, his own constituency on May 12, 1974, Mr. Abdul Mannan, Minister for Health and Family Planning said that the Institute of Postgraduate Medicine, the highest medical institution in the country and its hospital will soon be shifted to Mirzapur in Tangail District.

The Minister said that the Government would take over the Mirzapur Kumudini Hospital and place it under the management of the Institute of Postgraduate Medicine for

better functioning of both the institutes. The Kumudini Hospital according to him was in a bad shape and this adjustment would bring it up to expectation and also facilitate development of Postgraduate studies in the country.

The news came to us as a surprise. On enquiry it was revealed that a motivated group of some three or four persons visited the hospital for so called inspection and submitted a report quite in keeping with the desire of the Ministry.

This was taken to the President in a hurry to receive his verbal consent which was successfully done and then came this announcement.

I hastened to put my personal observation on record and a few days later I met the Minister for Health and submitted my representation. I was told the decision was final. This could not change my views. In reply I politely said that I owe a responsibility to the future generation and should record my objections even though I was fully aware that the Govt. could do anything they liked.

The Minister received my representation which was as follows :

**A MEMORANDUM BY DIRECTOR IPGM TO THE MINISTER
FOR HEALTH ON SHIFTING THE INSTITUTE TO MIRZAPUR**

The Institute of Postgraduate Medicine and Research is the only national institution of its kind in Bangladesh, saddled with the responsibility to turn out large number of properly qualified medical teachers and specialists, in order to meet the acute and ever-expanding need for such personnel, to man the medical institutions, hospitals, clinics department of public health etc ; with excellent academic performance in line with that of any advanced country in the world. It is,

therefore, only natural that all available medical talents and other related resources should be pooled together with a view to ensuring proper maintenance and development of this unique Institute which symbolises a growing edge in the field of medical education in our country.

Besides teaching and research programmes, one of the main functions of the institute is to provide specialized services to the people as well as to other hospitals all over the country. This is obvious as the specialists service cannot be multiplied for the following cogent reasons :

Limited Number of Specialists Available in the Country

In many branches of medicine which are most vital for the nation there is hardly more than one specialist, as for example, Cardiology, Nephrology, Neurology etc.

Development of Departments

The development of various departments involve considerable expenses, specialised nursing and other facilities including equipment and accessories.

Specialized Investigations

Various departments which form integral part of other specialities namely, Neurology, Radiology, Angiography etc. cannot be multiplied due to prohibitive cost and lack of technical manpower.

Emergency Service with Intensive Care Unit

Intensive care unit having round-the-clock emergency service with skilled personnel, is one of the most vital functions of the Postgraduate Institute. Many cardiac, respiratory, cerebral and other diseases may prove fatal if immediate hospitalization and therapeutic management are not instituted. This is why in

advanced countries of the world even ambulances carry special signs to signify the same priority of service as fire brigade in order to minimise time factor.

Communication Difficulties

Even if maximum development of communication between Dacca and Mirzapur could be envisaged in the distant future, despite all the attendant inconvenience and dislocation resulting from the inevitable uncertainties and congestion of the two-way traffic, one can not but take cognizance of a distance of 50 miles from the capital. So medical emergencies viz. cardiac conditions, renal resuscitations, cerebro-vascular accidents, various types of comas etc. cannot be attended to as these conditions which necessitate minimum time and maximum comfort during the transport of the patients. Furthermore, cost of shifting the patients will be a recurrent financial burden without any corresponding additional advantage whatsoever.

Absence of Academic Facilities

There is no gainsaying the fact that a national institute for postgraduate studies in medicine cannot be developed in a remote area where other related institutions and facilities are not available. It is inescapable that for academic and research activities, the Institute of Postgraduate Medical Sciences and Research must obtain help and co-operation from other institutions like the Medical Colleges, Institute of Public Health, Atomic Energy Centre, Institute of Nutrition, Diabetic Centres, BCSIR, Medical libraries, Universities, the British Council and information services of other foreign countries. Moreover, services of eminent medical teachers of other institutions have to be utilized by the institute. It is apparent that such facilities do exist only in a metropolis like Dacca and it is simply inconceivable to create them elsewhere in the country, not to speak of a solitary, isolated and remote place like Mirzapur that is far away from the capital.

Operational Facilities

Many valuable biochemical investigations for life saving measures require extensive facilities for continuous supply of gas. It is obvious that these facilities do not exist elsewhere outside the metropolis not to speak of Mirzapur.

Maintenance Services

All the equipment and machines are subject to breakdown and need immediate attention of specialized service personnel. Even in Dacca it becomes difficult to get the services of Electro-Medical personnel immediately and at Mirzapur it will take days, if not weeks to get an engineer from Dacca, causing constant dislocation and difficulties in carrying on the routine work of the institute.

Existing Facilities at Mirzapur

At present there exists only the hospital ward at Mirzapur. All the specialized wards have to be constructed anew, viz. Intensive Care Units for cardiac diseases, respiratory diseases and renal diseases. Besides, there is no provision for basic science departments viz. Anatomy, Physiology, Pharmacology, Pathology, Microbiology and Biochemistry. The investigating departments of the Mirzapur Hospital are in a rudimentary stage which cannot adequately serve even a modern district hospital.

Accommodation for Staff and Students

At present there are only a few staff quarters at Mirzapur, but in view of the tremendous residential needs of such an institute, immediate additional provision will have to be made at a huge cost for about 100 teaching staff (Professors, Associate Professors, Assistant Professor etc), 200 junior doctors, 100 Postgraduate students as well as for a large number of ancillary staff. Alternately, because of the non-availability of suitable private houses to be rented for residential purposes, even if it were possible to transport the teaching staff of



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Institute daily from Dacca and vice versa, it would surely deprive the patients in the hospital of the specialists service at night and the dwellers of Dacca during the day. As against the manifold unsurmountable difficulties in respect of accommodation at Mirzapur, at present the majority of the teaching staff of this institute reside either in rented houses or in their own.

Shortage of Hospital Beds

There is no denying the fact that at present there is an acute shortage of hospital beds in the country in general and in Dacca in particular. The existing hospitals are over congested and a look at the Dacca Medical College Hospital will substantiate the fact that the proposed shifting of the Institute of Postgraduate Medicine and Research will deprive the city of at least 600 hospital beds with best possible facilities in the country. At a time when the country needs multitude of specialists, the shifting of hospital will create a vacuum of specialists in the city, leaving the sick at the mercy of a few specialists with all the accompanying disadvantages.

Distress of Teaching Staff & Consequent Loss of Standards

Besides, as the teaching staff will be very senior people of the profession, they naturally will have university or college-going children. Hence they would be financially overburdened if they were required to send their wards to the institutions of higher education, Medical College, Engineering College/ University or a general University. Even if some one were posted under compulsion he would always endeavour to go out and the institute will have to be content with 2nd grade teachers, resulting in deterioration of its high standards.

The staffing problem of Mirzapur Hospital during the last two decades is a case in point. Even with double pay and

many additional facilities Mirzapur Hospital has been frequently used as spring board for future appointment in the city, preferably Dacca and very few suitable specialists permanently remained there.

Consequently the shifting of the institute will positively discourage brilliant and senior staff to pursue postgraduate teaching and thus the objective for which the institute was established will undoubtedly stand defeated. Consequently, loss of linkage with other medical institutions, lowering of service facilities, and perennial staffing problem are some of the main points that should be taken into consideration before the question of shifting this institute is even thought of.

International Practice

It is pertinent to mention here that nowhere in the world, a national institute like Postgraduate Medical Education and Research is situated outside the metropolis. The following are but few living instances :

Country	Institute	Location
India	All India Institute of Medical Sciences and Research	New Delhi
West Bengal	Institute of Postgraduate Medical Education	Calcutta
Burma	" " Medicine	Rangoon
Japan	" " "	Tokyo
Russia	Central Inst. of Postgraduate Medical Education and Research	Moscow
England	Hammersmith Postgraduate Medical School	London
Scotland	Postgraduate Medical Centre	Edinburgh

So it is in the fitness of things which the Institute of Postgraduate Medicine and Research which rightly belongs to the whole nation, should be located in Dacca, the Nation's Capital, which being the nerve centre is within the easy reach of even the remotest region of the country.

National and International role of the Institute

A national Institute of Postgraduate Medicine and Research is always located in the metropolis because it not only serves as the most effective organisation for the dissemination of highest learning in the field of medicine at home, but also as the necessary forum for the exchange of most upto-date knowledge and experience among the members of the medical profession at international level through seminars, workshops, conventions etc. Besides, because of its situational advantage it renders the best medical service to its own people as well as to the foreign dignitaries, including the members of the diplomatic missions who reside in the metropolis.

Selection of Site for the Institute

In the selection of a site for the Institute of Postgraduate Medicine and Research, the guiding principle should be the national interest to the exclusion of any consideration whatsoever. Hence it is only natural that feasibility report in this regard should be formulated by a competent body comprising the following :

1. Representative of WHO.
2. Representative of the Ministry of Health.
3. Representative of the Planning Commission.
4. Dean of the Faculty of Postgraduate Medicine.
5. Dean of the Faculty of Medicine, D. U.
6. Two senior members of the IPGMR representing clinical and basic subjects.

7. President, College of Physicians & Surgeons,
8. President, Bangladesh Medical Association.
9. President, Diabetic Association of Bangladesh.

There is every reason to believe that a feasibility report prepared by the proposed body will be in the best interest of the nation and will stand the judgement of the posterity as well.

Conclusion

In conclusion, it is fervently hoped that the above arguments advanced against the proposed shifting of the Institute of Postgraduate Medicine and Research will merit the highest consideration in the best interest of the nation.

PROTEST AGAINST SHIFTING

The proposal for shifting IPGM to Mirzapur could not go unchallenged. Bangladesh Medical Association, Dacca was an exception which hurriedly passed resolution congratulating Govt. for the decision, while all the branches objected to it. Chittagong and Khulna branches took the lead and all others followed. Postgraduate Student Association, Central Medical Students Association, College of Physicians and Surgeons all passed resolutions requesting the Govt. to revise the decision.

DEMAND FOR AN ENQUIRY COMMITTEE

Meanwhile a meeting of the teachers of IPGMR demanded that a judicial enquiry about the performances of the institute should be made against some false and motivated allegations against the teachers and the administration by some interested quarters who are behind the proposal for shifting under various false pretexts.

The meeting also expressed dissatisfaction and surprise at the resolution of the BMA, Dacca, supporting the Government move. This, the teachers felt, lowered the prestige of the profession in the eyes of the public.

ROLE OF THE PRESS

Significant role was played by the national dailies. They urged upon the Govt. to decide the issue dispassionately. The Ittefaq, one of the most influential national dailies, published series of comments faithfully projecting the views of the national intellectuals and scientific organisations (Vide Appendix).

DR. QUDRAT-E-KHUDA

Dr. Quadrat-e-Khuda an eminent educationist and chairman of the National Education Commission said in an interview to a national daily (Ittefaq) "If the Institute of Postgraduate Medicine and Research is shifted outside Dacca, this will not only insult the postgraduate education in the country but the decision will also be against the public interest. Personally, we do not agree to the decision nor we can support this decision on principle. Postgraduate medical training is a part of medical education. If the decision of shifting is made effective, it will downgrade the principle of medical education. Generally P. G. Hospitals should be located in the centre of the city. Increasing the facilities in the different medical colleges and expanding these institutes the general public in different areas can be given better facilities for treatment. But P. G. cannot be shifted outside the centre, because this teaching institute is dependent upon other associated teaching institutes."

Regarding the taking over the control of the Mirzapur Kumudini Hospital and Bharateswari Home by the Govt. Dr. Quadrat-e-Khuda said, "This is a trust. The decision of the

Govt. will not only show disrespect to the trust but also will derogate the ideal of serving humanity which prompted the great donor R. P. Shaha''. He further stated, ''It will not be justified to damage such a noble institution. Besides the shifting of P. G. to Kumudini will be a replacement of the latter by the former whereas both the institutes should exist.''

In reply to a question Dr. Khuda said ''It will not be possible for the public to get the same services of P. G. at Mirzapur as it will get if P.G. is kept at Dacca. We are not considering the political aspect of the issue but from the view point of the development of the country as a whole. One can safely say that it will be a colossal mistake to shift P. G. from Dacca''.

BANGABANDHU AND HIS CABINET—1974

In spite of all these the ministry was apparently unconcerned and the development work of institute came to a standstill. I made a personal attempt to explain the drawbacks and the dangers of shifting the institute to Bangabandhu Sk. Mujibur Rahman. He was greatly surprised that I did not like to have a ''First class centre'' at Mirzapur where already existed a very big hospital established by Roy Bahadur R.P. Shaha. I could immediately realise that Bangabandhu was given a picture of 'all roses' at Mirzapur by those behind the move and he was convinced that, everything there was most suitable and fine for the postgraduate institute. His personal affection for me, however, was a great factor which emboldened me to give a clear picture in the light of the memorandum which I submitted to the Minister for Health and Population Control, Mr. Abdul Mannan (Page 48).

Bangabandhu could not be fully convinced but I felt satisfied as I could bring home many facts which apparently were never explained to him before.

Some of us now felt the need for meeting the senior members of the cabinet. Accordingly myself, Dr. M. R. Khan, the Joint Director of the institute and Dr. M. A. Mannan, Professor of Neurology met almost all senior ministers and explained to them the merits and demerits of the whole issue. The response was encouraging. Messrs Mir Monsur Ali, the Prime Minister, Tajuddin Ahmed, Minister for Planning and Abdul Malek Ukil, the Speaker—all assured us in unequivocal terms that they were convinced and would place their views before Bangabandhu.

Dr. S. A. Sobhan, Professor of Radiology, joined us to meet Syed Nazrul Islam, the Vice President and Mr. Abdul Mannan, the Minister for Health. Both of them gave us a patient hearing. Mr. Abdul Mannan said at the end that he could not be convinced while the Vice President was noncommittal.

Mention must be made of the role played by Dr. Nurul Islam, Deputy Chairman Planning and a close associate of Bangabandhu. At least twice he pleaded our case with his usual sound arguments before Bangabandhu in my presence.

THE ISSUE AT THE ASSEMBLY—1974

By now enthusiasm of many of the teachers and students damped down. There was a suspense. Messrs Abdullah Sarker and Noore Alam Siddiqui expressed their willingness to raise the issue at the assembly and wanted some informations from us. Dr. M.R. Khan and myself clarified some technical points to them. It appeared they were well informed of the whole affairs and understood the technical aspect of the problem as well.

On the 21 st June, 1974 the question of shifting of IPGMR to Mirzapur was raised in the Assembly by the independent member Mr. Abdullah Sarker and seven others.

Mr. Abdullah Sarker (Independent), Mr. Moinuddin Ahmed Manik (JSD) and Mr. Noore Alam Siddiqui and Mr. Shamsur Rahman Khan (Govt.) participated in the discussion. Mr. Abdullah Sarker opposed the idea of shifting the institute to Mirzapur on the plea that it will hamper the progress of the institute, reduce its importance and multiply difficulties of many serious patients for treatment. He said that the P.G. Hospital and Kumudini Hospital were linked with donations. The blood transfusion centre and the female ward of P.G. Hospital were also made out of donation. Besides, the Kumudini Hospital of Mirzapur was a welfare trust. If public donations are handled by Government this way, it is unlikely that in future one would come forward for it. He also emphasised that shifting of the existing P.G. Hospital would involve huge expenditure as this would mean shifting of the equipments and readjustment of the hotel to its original shape. Mr. Abdullah Sarker found no reason in shifting the existing hospital and thereby crippling it. He also alleged that the concerned ministry was interested in shifting the hospital in its own interest and strongly pleaded for retaining the hospital in the present site.

Mr. Noore Alam Siddiqui (Govt) termed the move as anti-people. The money needed for shifting the hospital, he said, should be utilised for its development at the present site. Mr. Siddiqui asserted that nowhere in the world such hospitals are situated away from the city. In advanced countries, even if transport is not a problem, such hospitals are situated in the centre of the city rather than being situated in the remote peripheral areas. He found no reason how we could expect better service with our primitive system of communication with train, boats and narrow roads between Tangail and Dacca. Mr. Siddiqui appreciated the services offered to the people by the existing P.G. Hospital but apprehended that in Tangail many people would be deprived.

of these services. Besides, the existing facilities in Kumudini Hospital he said, could not be enough for the P.G. Hospital. He quoted Dr. Qudrat-e-Khuda and said shifting of the institute would be an insult to such an organisation. Kumudini Hospital, Mr. Siddiqui asserted, was a national ideal inspiring for everybody. This should never be submerged under a Govt. institute.

A pandamonium prevailed in the House and almost all the members in the Government bench and others supported the move by Mr. Sarker and Noore Alam Siddiqui. It was maximum when Mr. Abdul Mannan, the Health Minister rose to speak. The Speaker had to give ruling several times yet the minister could hardly speak. He, however, concluded by saying that the decision of shifting the hospital was not yet final.

FIRST RE-UNION—1974

By 1974 there have been sufficient number of students qualifying from the institute and serving in various capacities in different parts of the country. It was felt they should once a year meet one another, exchange views and learn from scientific seminars, all about the recent developments in various fields of medicine, literatures on which may not be available to them in places where they are serving.

Towards the end of the year in a meeting of the professors a decision was made to hold the first re-union of the institute. The date was accordingly finalised beginning from December 8th to 11th. Various committees were formed namely the Reception Committee, Re-Union Committee, Seminar Committee, Organising Committee and Entertainment Committee.

MR. ABDUL MANNAN

Mr. Abdul Mannan, the Minister for Health and Family Planning was the Chief Guest. The inaugural session began on December, 8 at 8-30 a.m. with the recitation from the Holy

Quran followed by two minutes silence in memory of martyrs of the liberation movement. The minister called upon the medical practitioners of the country to come forward with better suggestions and co-operations with the Government "in implementing its health policies for greater interest of the nation and the people".

Speaking about the recent trend of doctors in Bangladesh to serve outside the country, the Health Minister said that only promulgation of laws by the Government could not solve problems and urged upon the doctors to adopt self convincing measures and to go ahead for a better future forgetting the past.

In this context he said that as a new nation it was necessary to send some medical practitioners to some of our friendly countries for mutual interest and as such applications were called for some limited posts of experienced doctors but the applications received from them were enormous, he added.

Mr. Abdul Mannan said that after liberation of the country a transition period was passing in social, economic, political and every other fields of national importance and expressed his hope that the day would come when the medical practitioners would like to stay in the country for the welfare of the nation and the people. He also said that appropriate measures would be taken to produce necessary manpower in the field of medical science according to the requirement of the country and added that chances for advanced training abroad would be given to the students of the Institute of Postgraduate Medicine and Research.

Dr. Gazi Abdul Haque speaking on behalf of the freshers demanded for deputation allowances and accommodation and other facilities for the students of the postgraduate institute.

Welcoming the minister I narrated the activities of the institute since its inception and explained the difficulties faced by the students and other junior doctors. The inaugural function was also addressed by Dr. Md. Sohrab Ali, Chairman of the Organising Committee and Dr. Ruhul Amin, Associate Professor of Orthopaedic Surgery, Rajshahi Medical College who presided over the function as an ex-student of the institute. Dr. Sobhan, Professor of Radiology offered vote of thanks.

The opening session was followed by a scientific session on health problems which was presided over by Dr. T. Hossain, Secretary, Health and Family Planning. The reunion festival continued for four days and had four separate scientific sessions which was participated by the eminent medical scientists from home and abroad.

A souvenir on the occasion was published. This contained the list of doctors qualified from the institute so far. The total number was 161.

SIR AVERY JONES & PROF. WOODRUFF

In July 1974, Sir Francis Avery Jones, a renowned Gastroenterologist and Professor A. W. Woodruff, President of the Royal Society of Tropical Medicine and Hygiene, London, visited the institute. Sir Francis Avery Jones conducted the FCPS examination in medicine representing the Royal College of Physicians of London. Both of them were impressed by the progress of the work and the achievement of the institute over the past few years. Their opinions are recorded below :

“Thank you for the honour of inviting me to act as examiner for the FCPS at the Postgraduate Institute at Dacca. This is a splendid ‘centre of excellence,’ helping to train the teachers of the future.

As doctors we are all 'citizens of the world' as well as nationals of our own country. I was glad indeed to have the opportunity of meeting my fellow world citizens in Bangladesh and be able to congratulate them on their good work. With so many difficulties to overcome they have a long road ahead of them".

Dt. 9. 7. 1974

Sir Francis Avery Jones
Central Middlesex and
St. Marks Hospital, London.

"I am very much impressed with the speed of work going on in this institute and with its quality. You are to be congratulated on what you have already done and built up. I am sure that you will go on from strength to strength. I wish you well in all your endeavours".

Dt. 20. 7. 1974

Prof. A.W. Woodruff
President, Royal Society of Tropical
Medicine and Hygiene, London.

SIR JOHN CROFTON—1975

Besides, Professor (now Sir) John Crofton reported about his visit to Dacca in Feb, 1975 in the Chronicle of the Royal College of Physicians of Edinburgh, July, 1975. This is reproduced below :

"I was particularly interested to visit Dacca, partly because of the tough years through which Bangladesh has passed and partly because the Postgraduate Institute there was initiated by Sir James Cameron, who retired a year early to undertake this task. I was very kindly met at the airport by Professor Nurul Islam and the other two Fellows in Dacca with full VIP treatment as everywhere. That evening, Professor Nurul Islam gave a dinner at his house for the twenty or so Fellows and Members in Dacca, and one who came

from 150 miles away. It was fascinating to hear what they were all doing ; all were in teaching institutions. All of us in the college will be glad to hear that the Postgraduate Institute, initiated by Sir James Cameron, has gone from strength to strength under the dynamic and extremely hard-working leadership of Professor Islam, who first worked in parallel with Sir James and then took over from him. Instead of waiting for beautiful new buildings Professor Islam had taken over a decaying hotel and out of it improvised a hospital and an institute with great success and with enthusiastic colleagues. I was delighted to find that most people, including the basic scientists, were doing research on subjects of real importance to Bangladesh. I met all the staff and we had a wide-ranging discussion about postgraduate training in Britain and Bangladesh. I gave a lecture in the institute, visited the Chest Institute and in the evening was dined by the Bangladesh Tuberculosis Association, a dinner attended by the Minister for Health and Minister for Information. I was very touchingly presented with a beautiful silver model of a river boat, the symbol of Bangladesh, with a very overflattering inscription. In the afternoon I laid a wreath on the National Memorial to the many killed in the recent war.

The next day, a Saturday, I was flown to Chittagong the main port, where I was met by a Fellow, visited the Medical College with its fine new hospital, had a discussion with the staff about undergraduate medical education and gave a lecture. I was accompanied by two colleagues from Dacca, unfortunately the President's father was ill and Dr. Islam could not accompany us. I was delightfully entertained by a Chittagong Member, Dr. Yusuf, and on Saturday afternoon was driven to Kaptai, a large and beautiful artificial lake winding in and out among jungle covered hills. We had a delightful two-hours sail on the lake, coming back in the sunset and under the stars, to see an important patient and spend the night in a very comfor-

table Government Rest house. On the Sunday morning we drove back to Chittagong via the new university, had lunch and caught the plane back to Dacca, where I had a busy evening, seeing patients, giving a lecture and being entertained to a very pleasant dinner by the members of the Bangladesh Chest and Heart Association (a scientific society), again honoured by the attendance of the Minister for Education and the Minister for Information.

Next morning I gave radio interview at 7-30 and flew off, via Calcutta to Madras.

DIPLOMA COURSE IN PSYCHIATRY—1975

Professor Nazimuddowla Chowdhury is the seniormost Psychiatrist in the country. He had long experience as Superintendent, Mental Hospital, Pabna, and joined us as Professor of Psychiatry in December, 1971. Through his initiative we decided to introduce a Diploma course in Psychiatry in the institute. The syllabus for the course was prepared and processed through the Postgraduate Faculty as usual. When the courses and curriculum were approved we decided to admit students. In the first batch, two students were admitted.

SITE FINALISED—1975

December, 1975 is an important landmark in the history of IPGMR. The controversy surrounding the existing site of the institute came to an end when the ECNEC under the Chairmanship of Major General Ziaur Rahman gave a final verdict about the present site of the institute. The idea of shifting the institute was thus ultimately dropped. The President well realised that an institute of this kind should be centrally located and as per as practicable should work in conjunction with other similar institutes avoiding duplication of finance and talent resources. He was also convinced that this was

high time that we should go vertically rather than horizontally with our new constructions, fully realising the limitation of the space compared to our needs. Soon after the finalization of the site we moved the appropriate authorities for additional land. A little over 5 acres of land were allotted for the purpose on the north western side of the main building adjacent to the residence of Nawab Hasan Askari known as 'Twin House.' Credit must go to Professor Md. Ibrahim who initiated the proposal for finalisation of the site and to the members of the ECNEC who supported the move.

SECOND RE-UNION—1976

The Second re-union of the institute was held from the 5th to the 7th February, 1976. Professor Md. Ibrahim, Member, Presidential Council of Advisers, incharge of Health, Population control and Family Planning presided over the function and Dr. M. A. Rashid, Member, Presidential Advisory Council and incharge of Ministry of Public Works and Urban Development, was the Chief Guest. Others who participated in the inaugural session were Dr. Farida Haq, an ex-student of Microbiology who delivered an address of welcome. I gave an outline of the activities of the institute while Dr. Sohrab Ali, the Chairman of the Organising Committee offered vote of thanks.

DR. FARIDA HAQ

In her address of welcome Dr. Farida Haq said, "It is a memorable occasion for me to have the opportunity of welcoming you in this august gathering on the occasion of our Second Re-union and Annual Scientific Seminar. I am not fully aware of my qualifications which have prompted the organisers to select me for this responsibility. I presume the International Women's Year has affected more forcefully than my qualification in arriving at this decision. Be it what it may, it is my responsibility and indeed a pleasure to

welcome you in our midst on this auspicious morning. Any student like myself would feel more happy than they can possibly express in seeing his or her teachers in such an occasion. Our Chief Guest being a member, if I may say so, of an allied speciality in these days of integration of medicine and engineering, has not only given new life to this Re-union, but also a tremendous impetus to a of us. Mr. President is my respected teacher. He is always with us and needs no welcome except for this special occasion.

As I welcome you all, ladies and gentlemen, from the dias it reminds me of the days of my student career in the Institute of Postgraduate Medicine in its earlier stage. There was not many to encourage us to take up Postgraduate studies at home, rather I should say majority would discourage us. For reasons which I cannot elaborate, I made a bold decision and having passed through the several stages of selection, entered the course for higher studies in my speciality. Those were the days when the Postgraduate had nothing except a small shelter in one corner of the Dacca Medical College Hospital and many borrowed departments and part-time teachers for various specialities. Facilities, one must frankly admit, were inadequate, but this was manifold compensated by sincerity and devotion of our teachers. I speak to-day from our own dias and I have the privilege of welcoming you in our own campus which passed through many challenges of shifts and breaks which were perhaps necessary to make us stable and strong. Over the last few years the achievement of this institute or I should rather say, my successors, have not been insignificant. Many of them have braved through the challenges of examination, which in the estimate of others, are of standard not below that in any advanced country in the West.

From my own experiences abroad, after attaining my postgraduate qualification at home, I can boldly say that I never felt small or diffident during the course of my advanced training abroad. This was a factor which greatly influenced my training and helped in my higher study abroad.

In spite of the significant progress my institute has made during the past few years, I must say we have a long way to go. If I recollect my days and see what is happening I have no hesitation that in future we shall have opportunity of welcoming you on similar occasions in a much more befitting manner.

May I especially welcome here my senior teachers and colleagues in this Re-union and the Seminar. May I once again sincerely welcome you on this happy occasion and thank you for encouraging us, respected President and honourable Chief Guest by your august presence. May I also welcome my colleagues and friends and not thank them as I consider it one of our duties and responsibilities to meet at least once a year on similar occasions".

DR. NASEEM AKHTAR CHOWDHURY

Speaking on behalf of the freshers Dr. Naseem Akhtar Chowdhury expressed great hope that with the help and proper guidance the newcomers would be able to prove upto the expectation of their respected teachers. She also pleaded for better facilities for accommodation and financial assistance for books, and printing of dissertations.

PROF. N. ISLAM

I had the privilege of addressing the gathering on the occasion in which I said ;

"It is a great pleasure for me to have the opportunity to speak to you something about our institute and its past,

present and the future. To many of you these are not in any way new and to our President this is much younger than his experience in the field of Postgraduate studies in the then West Pakistan both as a Professor and as a Director. To the chief guest this is the second occasion in our midst. Many of you might recall that he was our chief guest during one of our annual symposium.

For those who did not have the occasion to know us as much they wished, I should briefly mention some of the hallmarks in the growth and development of this institute. The institute came into existence in December, 1965. Late Sir James Cameron was the adviser to the Govt. (a post subsequently designated as Director and Professor) under British Overseas Technical Assistance Programme. It occupied small area of the old University Arts buildings and continued to thrive with borrowed facilities from Dacca Medical College and other institutions in Dacca. Most of the teachers were part-time. Laboratory and library facilities were meagre.

Inspite of these difficulties enthusiasm among my colleagues and students grew more and more. External examiners jointed us and expressed their great satisfaction on the performance of our students.

The Founder Fellows of the College of Physicians and Surgeons, my colleagues in DMCH, SSMC, IDCH, CRL, IPH and many others can proudly recall their contribution to-day. We recognise them and their contribution with deep appreciation.

The President of the inaugural function to-day is the proud President and one of the founders of an organisation which is responsible for the highest academic postgraduate qualifications in our country. This, infact, lays down the principles of Fellowship and Membership examinations (FCPS and MCPS), conducts examinations of an international standard so that we can rightly

claim to produce postgraduates of quality and not in quantity, postgraduates with practical hand rather than with letters.

Fellowships and Memberships apart, our institute also offers training for various diplomas of the University of Dacca. These are guided by the Faculty of Postgraduate Medical Sciences and Research of which I have the privilege of being the Dean.

To-day we conduct as many as 25 courses, all essential to serve the need of the country. The calender of events will depict the performance of this institute over the years. I hope you all will agree that it is no mean achievement. We have by now produced as many as 220 postgraduates of whom 80 are Fellows, 24 are Members of your great College, Mr. President.

After all these have been said, may I pose a question which our chief guest might have in his mind. Could we do better ? Perhaps we could. But we could not. We had several setbacks.

During 1971 we were allotted the abandoned hotel for conversion to the hospital. Each and everyone of us worked day and night to convert an uninhabitable abandoned hotel to a habitable one. Things were straightening up when we had the onslaught of war. The hospital was forcibly occupied on December, 13, 1971 by the Pak-army who had to vacate partly on the 16th morning after surrender.

The cloud partly cleared up immediately after liberation. The building which we are occupying now was donated to us by the Ministry of Health. A blood bank started functioning and construction for ENT and other departments continued.

To our utter surprise and dismay there came an announcement that the P. G. would be shifted to Mirzapur, 65 miles from the capital city. All of you are and our President is fully aware of this.

There could be very little progress inspite of the expert opinion by the engineers, the architect and even the distinguished foreign visitors that the Institute should be in the centre of the city, easily approachable. The facilities and space around according to them were sufficient. Inspite of that the situation remained standstill and we could not do anything. Thanks to God Almighty it is now settled that Postgraduate shall flourish around from where it stands to-day. Mr. President and our Chief guest, may we offer our sincere thanks to you and your colleagues in the Advisory Council for this bold impartial, and non political decision.

You will be glad to know that the land behind the existing premises has been acquired and in the near future the Basic Sciences building, the sixth floor in the main building, an additional floor of this building to accommodate an additional 80-100 beds will be completed. After all these have been said and done, I need not elaborate on the need for such an institute. Every nation must have a centre of excellence to offer training facilities, specialist services and continuing medical education.

Colonial rule made us experts of 'Letters' and not of experience. Let us hear from the horses mouth. In the words of Late Sir James Cameron (1966). "There has been some misconceptions of the place of the MRCP and similar qualifications in Medical training. These qualifications are taken comparatively early in the specialists training in Britain. They indicate potential for training to be a consultant and do not mean the holder is already fitted to be a consultant."

To quote Professor James Hutchison (1973). "If we take an objective look at what happens to the overseas doctors who come to this country in large numbers intent on acquiring the

MRCP (and other diplomas) we will find little reason for satisfaction. They may receive training in the same hospitals as our own graduates, but they are given the opportunity to hold clinical responsibilities in appropriate posts. While they may become more aware of the importance of good history taking and clinical examination, the right kind of doctor patient relationship, the mutual respect which should exist between nurses and doctor, value of the health visitor and the social worker, they concentrate more on the advances of 'Modern Medicine. They learn to discuss learnedly on such advanced matters as the diagnostic uses of radio nuclides and gamma cameras, chromosome abnormalities and antenatal diagnosis, neonatal screening for diseases which once detected, may cost £ 500 p.a. for their efficient management, renal dialysis, and the uses of radio-immunoassay in the measurement of blood levels of hormones and drugs. They note our liberal use of expensive facilities such as auto-analysers, cardiac laboratories, high voltage radio-therapy, and so on. The best amongst them will duly return to their own countries as the proud possessors of the MRCP, where they are promptly and mistakenly recognised as fully trained specialists."

We are to-day therefore performing a duty which should have been done long before by our predecessors. We do not blame them but we can be proud as initiators. The future shall certainly find out improvements with the experiences of our success and failures. Ours, however, is a chapter which cannot go unwritten in the history of Postgraduate Education in the country.

Mr. President and our chief guest, may I sincerely thank you for accepting our invitation and say that you are listed by us as one of the champions of a great cause namely the Postgraduate Medical Education in the country. Dr. Ibrahim

is one of us and Dr. Rashid has always been and shall be always, with us. We know them as persons, not by their positions but by their contribution. May Allah grant them long life to guide the nation in their respective spheres.

DR. M. A. RASHID

After my speech Dr. M. A. Rashid delivered his address as the Chief Guest. He said ;

“I am very happy to be present at the Second Re-union Festival and Annual Scientific Seminar of the Institute of Postgraduate Medicine and Research. It is a great advantage for a non-medical layman like me to come in contact with the learned members of the medical profession. It gives an opportunity to gaining acquaintance with these highly sought after specialists, which acquaintance can be exploited later getting relief during the illness of family members, relatives and neighbours from distant villages. To be invited as a Chief Guest in an occasion like this re-union is a great honour and I thank you for bestowing this honour on me. With great interest I have watched the growth of the medical profession in the area now constituting Bangladesh. Early in life, I had an ambition to study in the Calcutta Medical College which did not materialise and under pressure of circumstances I had to enter the Bengal Engineering College. So that except for what I now-a-days learn from “Apnar Dacktar” (meaning your doctor) lucidly presented by Dr. Badruddoza Chowdhury and his colleagues, my desire for medical education remains unfulfilled. This unsatisfied desire may have something to do with my interest in the progress of medical profession in the country. But the main reason for my interest lies in the fact that we, including self, family members and neighbours, quite often suffer from various ailments and look forward with fond hopes and fervent prayers to the

growth of the medical profession in the country which we believe can find for us remedy and relief in our illness and distress. This is true of most of our fellow citizens who because of inadequacy and sometimes lack of preventive measures become exposed to attacks of bacteria and viruses and who because of lack of inherent resistance due to malnutrition, fall easy prey to these attacks. For these reasons we look forward to the spread of the medical profession to the remote corners of the country for quick diagnosis of the ailment of the most distant villager and for administering all possible remedies and relief locally available. We anxiously wait for the time when the Thana Health Centres will have all necessary facilities for comprehensive medical examination for the local patients and for treatment of most of these patients. Early diagnosis will probably prevent complication of the disease so that not many cases will have to be referred to the specialists in the Institute of Postgraduate Medicine and Research.

We sincerely hope and pray that the Institute of Postgraduate Medicine and Research will continue to develop in size as well as excellence in the courses of instruction offered and also in the treatment of patients here. Its specialists have already earned reputation in their respective fields and we hope that they will continue in their devotion to duty and their zeal and enthusiasm in their research for discovering new and improved methods of cure. This country under the dynamic leadership of Dr. Md. Ibrahim, is currently engaged in tackling the number one problem namely the exorbitant growth of population in the country. I suggest to you that in this institute adequate steps be taken in training a number of specialists in the repair of the vas which was earlier severed but which need to be reconnected to meet the a special situation of the patient. When such facility becomes easily available then person undergoing vasectomy

do not run the risk of any irreparable loss. Then many more persons are likely to come forward for vasectomy which I personally consider to be the easiest, least expensive and surest form of birth control measure.

I have all along wondered with admiration at stock of almost infinite amount of patience that the doctors seem to possess. They have to spend most of their working time in the midst of misery and ailment and be nice and smiling to patients with all their irritation and peevishness under the distress of illness. The compensation for this sacrifice must be coming from divine sources to enable the doctors to go through the rigors of their profession with apparent satisfaction. I know that the pecuniary advantages can not be a satisfactory lure for the doctors in the country particularly those who seek job satisfaction, for, unhappily and paradoxically, the people who need the services of the doctors most, are the poorest. The irritation, peevishness and sometime non-cooperation of the patients coupled with their object poverty make the work of the doctor in this country very challenging. However, it is only on the challenging circumstances that the true mettle of person and the strength of his character can be revealed.

I have already taken much of your time. I thank you again for inviting me as the Chief Guest of this function. I wish you all happiness in your noble profession.

God bless you all. Bangladesh Zindabad,,.

PROF. MD. IBRAHIM

The presidential address was delivered by Professor Md. Ibrahim in which he said :

“It gives me great pleasure to be here amongst you this morning on the occasion of the Annual Scientific Seminar of the Institute of Postgraduate Medicine and Research. As

you all are aware, I have long been associated with Postgraduate studies and research. Before liberation I had the opportunity of serving as Director and Professor of Jinnah Postgraduate Medical Centre, Karachi and also as Chairman of the Medical Research Council and National Science Council. I have also been associated with this institute since its inception. Most of you may have found me either going round the wards or appearing before you as one of your examiners or discussing problems of medical studies and research with colleagues as the President of the College of Physicians and Surgeons. I must say, I have found this association very much rewarding and this is due to and I must thank you all for your co-operation and forbearance.

The scientific seminar and the re-union will provide you opportunities of meeting friends and colleagues and sharing and exchanging thoughts, ideas and experiences on various problems of health and medicine, which the country has been facing. Day to day advances in the field of international medicine is difficult to keep pace with. If you are not active, you are likely to be backdated and left behind. A backdated teacher is a great handicap to the progressive medicine. I would, therefore, urge upon you to utilise all the available informations and keep yourself equipped with the current and latest knowledge and thoughts in your discipline so that you may transmit them to your students or translate them into practice for benefit of your country. These seminars, conferences and get-togethers are very useful. I wish that these are held as often as possible, so that you may get opportunities of keeping yourself abreast of the latest thoughts and ideas in your respective fields of operation.

I have been watching with great pleasure the development of the Postgraduate Institute of Medicine and Research, which undoubtedly deserves our full support. I take pride in the fact

that more than two-thirds of the total postgraduate qualified doctors available in the country are your students. I would like to look forward to the day when you and your colleagues and students will spread out throughout the length and breadth of the country to offer service to millions of our countrymen who need your services.

We may not need superspecialists for the present but we must have well qualified doctors who can deal with various health problems and should be able to provide not only medicine for curing diseases, but also deal with the community health problems on a human level. A successful doctor today should be fully aware of our rural health problems and find out their solutions.

At this stage I cannot resist telling you about the challenge of population explosion in the country. We cannot afford to allow our population to grow at the present rate, only to face starvation, famine, and should I say, national destruction. Irrespective of your field of studies and the areas of work, I would urge upon you all to accept this challenge and the successful implementation of our population control measures. None of us should rest till ZPG-Zero Population Growth has been achieved and that as quickly as practicable.

Finally, I wish to tell you that your system of education and research activities should conform to the national requirements and priorities, but at the same time I remind you of your responsibility to preserve and promote the quality of universal medicine. Self-reliance and self-sufficiency should be your guiding principles and discipline your motto of life''.

DR. SOHRAB ALI

Finally, the vote of thanks was offered by Dr. Md. Sohrab Ali, an ex-student of Biochemistry of this institute. He described in a nutshell the facilities and difficulties which he experienced

during his course and heartily congratulated all those who have been constant sources of encouragement for the development of Postgraduate Medical Education in the country.

Special reference was made to Professor M. Ibrahim for his ungrudging help and cooperation.

REFRESHER COURSE—1976

According to the regulation of the College of Physicians and Surgeons of Bangladesh one can appear in MCPS examination in any subject five years after graduation. It does not specify the requirement of training. Experience has shown that this encourages a large number of general practitioners to sit for the said examination. Most of them are usually either from non-teaching institution or from private practice.

In the absence of facilities for learning about the recent advances in various fields of medicine these doctors inspite of their best efforts failed to keep pace with modern developments. Consequently the failure rate was alarmingly high. This was a deterrent factor for the prospective new entrants. Backed by this experience as well as by request from many of the possible candidates, the academic council of IPGMR decided to organise short-term refresher courses in various departments with as elaborate a programme as possible within the limited time schedule. It was decided to conduct the course for about two weeks, a period which could be covered by the Govt. servants by casual leave if deputation was not available. The first short training course for general practitioners and the MCPS examinees in various subjects was introduced in June, 1976. The result was encouraging and a sizeable number of candidates enrolled their names for the course. It has since been a regular feature. The timing of the course is adjusted with the date of the examinations which are fixed and held twice a year namely January and July.

NEW E.N.T. BLOCK—1976

By August, 1976 the new block on the top of the blood transfusion department was completed. This was meant for Ear, Nose and Throat department (ENT) which started functioning during this month. It consisted of a separate operation theatre, indoor beds, out patient arrangement and a special room for audiogram. Prof. Ali Afzal Khan continued to be incharge of the department. Additional facilities attracted more students for diploma (DLO) and membership examination (MCPS). In fact, majority MCPS students in all different branches consisted of army doctors who could not manage full time deputation as required for other diploma and fellowship courses.

CHALLENGE OF MEDICAL UNIVERSITY—1976

Earlier, on the 14th Sept, 1971 a seminar on Medical University was held at the IPGMR with Dr. M.A. Rashid, the then Vice-Chancellor of the Engineering University as the Chief Guest. I was a proponent of the Medical University and so were some of my friends. Dr. Rashid and a few others held different views. All however agreed on the autonomous status of the institutes. Developments during subsequent years and a serious study of the problems of the administration of the medical institutes changed our outlook completely. The idea of establishment of a Medical University thus died down.

During August, 1976, many of us were surprised to learn from a newspaper announcement by Col. M.M. Haq, Adviser for Health and Population Control, that there would be a Medical University. With great effort, we could come to learn that the proposed University would eliminate separate existence of IPGMR, College of Physicians and Surgeons of Bangladesh, Bangladesh Medical Council and Bangladesh Medical Research Council. The functions of these organisations

would be taken over by the Medical University. It is generally believed that Dr. K. A. Khaleque, Additional Secretary, Health and Dr. Quader Khan of the Institute of Epidemiology and Vector Control were entrusted with drawing out the scheme while a few others were directly or indirectly involved.

Soon after it came out in the press Dr. A. F. M. Yusuf, a member of the Bangladesh Medical Council from Chittagong was the first person to raise a voice of protest against the proposal for establishing the Medical University. The Ittefaq, one of the largest circulation Bengali Dailies, published his article under caption "Medical University—its justification". This stirred both the professionals and non-professionals. A series of articles and comments were subsequently published in almost all dailies. The Danik Bangla and Sangbad played significant role. It was felt by many that the idea behind the establishment of the Medical University was to abolish the IPGMR and the other institutions responsible for higher education in the country and to create only some posts like those of the Vice-Chancellor and the Registrar etc. So that some interested people could share the posts.

Col. Haq was so enthusiastic about it that one day in the Advisory council meeting he raised the issue under the miscellaneous agenda. The ECNEC approved the scheme on principle and asked for opinion of the Ministry of Education and Planning which were not earlier consulted according to normal procedure.

AN INTERVIEW WITH THE PRESIDENT—1976

By now it was evident that the Ministry would forge ahead the 'Medical University' Plan irrespective of the opinion of the experts of the profession.

I now decided to see the Hon'ble President and made a representation to him with some factual statements.

The Hon'ble President expressed desire to see me. Accordingly a time was fixed on one evening in his cantonment office.

I reached there in time. Lt. Col. Wali Ahmed, P. S. to the Hon'ble President led me to his room. I was very cordially greeted by the Hon'ble President and he ordered for tea.

I was then asked to give my views about the proposed Medical University. I explained in brief the role of various bodies controlling the medical education and research in the country namely ;

1. The Medical Faculty dealing with undergraduate courses.
2. The Faculty of Postgraduate Medical Sciences and Research dealing with various postgraduate medical courses.
3. Bangladesh College of Physician and Surgeons and
4. Bangladesh Medical Council.

I emphasized that all these organisations are autonomous and are represented by senior members of the profession, who can play their role without any interference from the administration. The power and jurisdiction of these bodies though at times overlap the duplication is avoided as many of the members in one happen to represent one or more others. Establishment of a Medical University could not improve on the academic aspect of medical education if it did not occur with the existing arrangement. After all the same group of persons would be responsible for the academic sphere under the name of the university. On the other hand their representation is likely to be reduced to the academic council of the university with some thirty or forty members only.

Monodisciplined University has never been a success but proved to be wasteful and academically unsound. In one or two places where such universities existed they were now

switching on to multidisciplinary universities, covering subjects like literature, science, biology etc. Even in our country it is now more and more felt that university of Engineering and that of Agriculture should open up other departments like general universities to economise the expenditure and to have a proportionate outcome.

The present difficulties in the medical education is the financial and administrative bottle-necks and at times, some high handedness which can be removed by decentralisation of administration and granting autonomous status to the teaching institutes. This, I pleaded, would be more functional and beneficial for all the institutes whereas centralised Medical University as proposed to be located in Dacca would only mean creation of some posts like those of a Vice-Chancellor, Controller of Examination, Registrar etc. In fact for all other institutes outside Dacca, this would mean only a shifting of secretariat from the present site to a new campus. I also humbly submitted before the Hon'ble President that I initiated the proposal of a Medical University long before and therefore could not but think of it from various angles. Having had the opportunity of studying the problem in detail and discovering the drawbacks as against the advantages I was now convinced that establishment of a Medical University would perpetuate problems, rather than bringing out solutions. Institutional autonomy with representative governing body, I pleaded, was the only answer to the present day problems. Finally I pleaded that if the Hon'ble President so desired a broad-based committee representing BCPS, BMRC, BMC, Medical Faculties, Universities, University Grants commission, Ministry of Health, Ministry of Planning, WHO and BMA could be constituted to examine the proposal dispassionately.

I was amazed to see the Hon'ble president quietly listening to me all the time. Finally he commented that my arguments

were convincing but the proposal of the Medical University was initiated by one medical man in the council (meaning Col. Haq) while the other medical man present in the meeting (meaning Professor Ibrahim) did not object. He however indicated that he was convinced and would give a new thought on the proposal.

By this time another gentleman reported for his scheduled interview. I begged leave of the Hon'ble President pleading once again for autonomy of the institutes as against a Medical University.

I came out and calculated from my watch that I was with the Hon'ble President for 35 minutes. It was indeed a very satisfying and cordial interview. I discovered in the Hon'ble President a great quality of listening to reasons dispassionately.

THE 3RD RE-UNION AND ANNUAL SCIENTIFIC SEMINAR—1977

The 3rd Reunion and the Annual Scientific Seminar of the institute was held on the 11th and 12th February, 1977. Mr. Justice A. Sattar, Special Assistant to the President and incharge of Law and Parliamentary Affairs, was the Chief Guest. Col M. M. Haq, Member, Presidential Advisory Council and incharge of Health, Labour and Social Welfare presided. Among others who addressed the meeting included Dr. Rashid-E-Mahboob, an ex-student of the institute. Dr. Sadiqa Tahera Khanam, a representative of the present student, myself and Professor M. A. Jalil, Chairman, reunion, committee.

In my address of welcome I gave a brief outline of the activities of the institute over the years, refuted the criticisms labelled against it and pleaded for research in various system of medicine. The full text is reproduced here :

PROF. N. ISLAM

“Once again, it is my proud privilege to welcome you all in our midst on the occasion of the Annual Scientific Seminar and the Third Re-union of the past and present students of the Institute of Postgraduate Medicine and Research.

As you can well understand, this is an annual feature of this institute with an admixture of social get together and scientific discussions. While it is our pleasure to see the happy re-union of the past and present students, we bear in mind our responsibility for maintaining the standard of professional competence in various fields. In doing so our honest endeavour has always been to educate ourselves about the recent advances in medical sciences over the years. Our scientific seminar will perhaps to some extent reflect our attitude in that direction. We have attempted to embrace grass root problems like population control and anaemia on the one hand and the advanced system of intensive coronary care and complex cases of chronic renal failure on the other. There again in the midst of the two extremes we have not forgotten one of the burning topics of the day—a problem which has been eating away our limited resources as well as health of the many, under the false pretence of ‘wonder drugs’. These are the most advertised unscientific and if I may say, fashionable medical products. A full session has therefore been devoted to drug abuse where our experienced colleagues and WHO consultants shall be participating, ready to answer any question on the utility of many of these ‘wonder drugs’ now available in the market.

Ladies and gentlemen, I am sure by now you are too anxious to know something of our Institute.

Over the years since inception the Institute has significantly contributed to the qualified medical manpower in the country.

Since we met last year, there has been an addition of 72 postgraduate qualified doctors in the country making a total

of 301 which you will find from the list published in this souvenir.

It is a matter of pride for all of us that our postgraduate qualified doctors to-day are spread all over the country as junior and senior consultants, associate professors and even professors (though of course some are at yet assistant surgeons on supy duty !). The nation to-day can take pride in the quality of our postgraduates who compare favourably well with any similar qualification in advanced countries. It is no mean achievement that we have here representatives of some countries where our boys are serving as consultants. In fact within a short time from now at least five of them shall be joining others in Libya.

Equally encouraging is to note that we frequently receive requests for admission of students from other countries. May I assure the Government if an avenue is opened this institute shall be glad to offer training facilities to them in various specialities very well comparable to similar postgraduate course elsewhere.

One cannot deny that without the postgraduate qualified doctors from this institute the health care of our country would have been facing critical situation. Three fourths of the total qualified postgraduates in the country are constituted by the products of this institute. Specialist services in nearly all the district and subdivisional hospitals are provided by our postgraduate doctors. More than 90 percent of the basic science teachers in various Medical Colleges of the country are qualified from this institute. Many clinical departments of all the Medical Colleges and some Medical Colleges almost entirely, are manned by our students.

I am glad to inform you that the institute has earned considerable reputation both at home and abroad. Research, we consider, is essential for the teachers and vital for the nation. It is our responsibility to conduct research with our own problems. It can never be borrowed to serve the

national need. A separate publication within a short time from now will clearly show how we could place our institute in the list of world research institutes.

All over the world to-day the focus of attention is to the vast majority of the people who live in the rural areas far away from modern facilities. Bangladesh can not live in isolation. We in the postgraduate undoubtedly share the feeling and are ready to shoulder the responsibility. It is unthinkable that our boys do not find pleasure in serving those who are simple, honest, sincere, grateful and above all know how to respect their doctors. If there is any exception in some odd places I would say these are geographical, local problems and does not reflect the attitude of our doctors.

Criticism has been made that our education is institutional and not problem orientated or rural biased. I would only modestly submit that this is not factual. In our programme we now suggest that our students should not only deal with problems confronting the country but also serve selected areas for sometime while collecting data for their dissertations or theses under the guidance of their senior teachers as and when necessary. A student of clinical pathology for example will be too glad to collect data from rural health centres simultaneously offering laboratory service to the area. Similarly a clinical student shall be in a position to serve while collecting materials regarding the incidence of cirrhosis or peptic ulcer etc. necessary for his dissertation. In fact the various dissertations and theses compiled so far will undoubtedly reflect our own problems and the revised system will add a rural populations.

While introducing various modifications in the course from time to time we have keenly felt the need for educating our general doctors and less privileged medical graduates.

For the last three years we have been running a refresher course of 2-3 weeks' duration in various subjects with a view to making our doctors upto-date in their professional skill and knowledge.

May I at this point assure our Chief Guest and the Adviser that while we preach and practise excellence we do not confine ourselves physically or mentally within the campus of the Institute. Of late, we have been seriously thinking of working out a formula for incorporating Community Medicine to produce field orientated community doctors and to conduct research on various related problems.

It is our pleasure to mention here that in our educational programme we have been generously helped by many of our colleagues as lecturers. May I particularly mention the names of Professors A. Basit and A. Q. M. B. Chowdhury who readily agreed to serve the Institute as Honorary Professors. Dr. Zaforullah Chowdhury has extended a helping hand for the extension of our teaching programme to Gana Shyasta Kendra which is so well known for rural health care.

May I at this stage emphasise that whatever has been achieved under the auspices of this Institute is through the ungrudging help and cooperation of my friends and colleagues of all other Institutes in and around Dacca viz. the IDCH, CMH, CRL, SSMC, and Dacca Medical College. Without their help and cooperation and above all their active participation, our teaching programme would not have been a success. Through the foresightedness of our Chief Martial Law Administrator Major General Ziaur Rahman the confusion about the site of the IPGMR is now removed and the present location has been finalized. Establishment of the Institute of Diabetic Research and Rehabilitation, to be subsequently named as The Institute of Metabolic and Endocrinal Diseases adjacent to the IPGMR is undoubtedly

a timely and judicious decision, This will go a long way in the growth and development of postgraduate medical education and research in the country without undue duplication and wastage of our financial and technical resources. I am sure Government will find in it a model for co-existence and co-operation with unique success with our limited resources-both financial and technical.

Both indigenous and homeopathic system of medicine has long been urging for due recognition. May I assure our Chief Guest as well as the President of to-day's function that we have no bias. In fact we sincerely feel that there should be exploration of applicability of these systems of medicine by comparative study with modern medicine in line with Peoples Republic of China. This institute shall eagerly conduct this research if facilities are provided.

In conclusion may I say that the Institute has played a significant role over the years inspite of many difficulties, drawbacks and strangulating challenges, because of the army of dedicated professional colleagues both inside and outside the campus.

With an administrative machinery committed to the health and welfare of the nation we have no doubt about our brighter and prosperous near future. Please let us serve the people. We are for them."

This was followed by the address by Dr. Rashid -e-Mahboob on behalf of the ex-student.

DR. RASHID-E-MAHBOOB

Mr. President and the honourable Chief Guest, respected teachers, guests and my dear colleagues ;

I express my gratitude to the organiser of the Third Re-union Festival and the Annual Scientific seminar for giving me this opportunity to speak. Please accept my congratulation

for keeping up the tradition in arranging this Annual Scientific Seminar and the Re-union. I sincerely feel proud to say that I was a student of this seat of learning. I underwent my course in this institute at a time when the country was not independent and the Institute had very little. In course of time we have become independent, now this country is mine and I am for this country. This institute has a great role to play in the national life. It has to bear the great responsibility of offering leadership in the health system of our country and I am proud to say that this is being done very well. Specialist services in the peripheral areas are being rendered by students of this institute and it would be right to say that they are upholding the prestige of this Institute. Teachers qualified from this institute are giving excellent services in all the Medical Colleges of the country.

I am proud that I had the opportunity of having my postgraduate studies from an institute which has established her position in the international field, through scientific research and publications. I derive immense pleasure when I find that many works from this Institute, inspite of physical as well as financial limitations, being incorporated in the international journals and text-books.

Equally in the practical field as a surgeon, I can unhesitatingly say that I never felt diffident even with my first case of complicated surgery after obtaining my Fellowship.

On behalf of the old students of this institute, I would like to assure honourable Member of the President's Advisory Council Col (Retired) M.M. Haq, of our help in establishing a people-oriented health service. My earnest request to you, Sir, please have faith in us and please do not ignore our sincere suggestions. You have started under-five clinics, specialist services and community health service in the rural

areas. We do not know how far you have succeeded or will succeed. There is no dearth of disease or patients in our country. The lack is of health workers, of facilities, medicines and other necessities for diagnosis and treatment. There is no lack of intention but we need to find out the best way to tackle this gigantic task. Our sincere request to the Honourable Member of the Advisory Council, please have faith in the old students of this institute and put their suggestions and capabilities to serve your aim. This will serve the people and help create better health of the country.

It does not dishearten me when I find many problems before us but I feel disappointed when I observe lack of effort to solve them. I have to mention with regret that more than two years have elapsed since I was posted, but none have been posted as consultant since then, though a large number of students have qualified subsequently and an equal number, if not more, posts are lying vacant. Many specialists are working as assistant surgeons, this I feel, is not the best way of utilizing their talents. It is my fervent hope that the govt. will give adequate consideration to the matter and remedy it.

It is only fair at this point as a loyal student of this institute to point out that over the years the number of students have increased considerably. But the facts stated by my colleague and a present student of the institute Dr. Sadiqa is certainly not very encouraging. Postgraduate scholarship offered for higher studies abroad have many facilities, for example transport, book allowance, study trips cost of equipments and thesis writing etc, Here in this institute Govt. remains satisfied in granting them only a deputation without ancillary facilities. It shocks me to hear that even the nominal amount of Taka five hundred which at times is even insufficient to purchase two books, is denied to the present students.

I hope this plain truth about the prevailing situation and the difficulties of the postgraduates shall be accepted as useful informations calling immediate attention and redressed by the authorities concerned. An institute which has attained international reputation, upholding the ethics and the prestige of the profession and an institute which is national by all definitions, I am sure shall have top priority and all considerations from the authorities concerned. I feel pretty optimistic when we find this happy combination of our honorable Chief Guest, who commands respect from all section of people and the President of to-day's function, who have the privilege of knowing the profession in various capacities and is unquestionably eager for the growth and development of this national institute.

I thank you most sincerely once again for giving me this opportunity of joining you in this annual function."

DR. SADIQA TAHERA KHANAM

Mr. President, Honible Chief Guest, my teachers and Colleagues in professions ;

It is a great privilege for me to be able to speak before this distinguished gathering. I gratefully acknowledge the deep feelings shown towards me by my colleagues in seleccting me to welcome you on behalf of the students to-day,

Having embraked on postgraduate studies at an age which my feminine nature forbids me to disclose, I am experiencing some very mixed and undescribable feelings. Institute of Postgraduate Medicine and Research is the venue of my first encounter with the teachers of my own country, I can say with confidence that it is not an unpleasant encounter. Each day I am inspired by my teachers and by the young faces of my classmates around me, shining bright

with enthusiasm. Every morning my heart is filled with new hopes as I can perceive a glimpse of the silver streak in the distant sky of Bangladesh,

I am also delighted to-day to see the large number of professional colleagues who were my predecessors in treading this tortuous road of higher learning. I compliment them for their accomplishment and hope that the coming two days will give us enough opportunities to learn from them the secrets of how to reach the other bank of the river "without tears".

Postgraduate studies is not a bed of roses, Sir, I am sure you will find almost all heads nodding when I say that the bed becomes 'thornier' and pricks harder when the students have to have other worries besides those of their extensive and exhausting studies. It will not be out of place if I avail this opportunity to high-light some of the more acutely felt problems of the students,

Sir, most of the degree courses in this institute extend for a period of two years. Doctors selected for these courses come from Government as well as private hospitals and also from general practice. It has been customary in the past, on the part of Government to depute the selected doctors for degree courses for a period of two years. However for reasons not known to us, the period of deputation for the students selected in 1976 was curtailed to one year. Sir' this gesture has created certain apprehensions in the minds of the students who will be grateful if the order is reviewed and practice of deputing doctors for a period of two years resumed.

Another difficulty faced by the students is the issue of book grant. Sir, medical science is advancing at tremendous pace and to be well equipped with the knowledge of these advances, the postgraduate students must possess and learn from authentic books. In the past, the government has been

kind enough to allocate a book grant of Ta. 500/-for each doctor deputed for studies. However we were not equally fortunate this year. That is to say that this year government doctors have not been able to receive the said book grant which is already meagre and needs enhancement in view of the ever-increasing prices of the medical books. An early solution of this matter will be greatly beneficial.

Addition of newer edition of books in sufficient numbers in the library, which at present does not possess all the books in numbers, enough to meet the needs of the students is also necessary and will help to solve the problem of books for the students,

Shortage of suitable accomodation is one more problem faced by the students coming from stations outside Dacca. Those students who come to undertake higher studies after sacrificing the comforts of their previous establishments, have to revert to hostel life. A group of them accommodated in dormitories within the campus of IPGMR and while another group is allocated the make shift facilities available at the Sher-e-Bangla Nagar. The distance of the institute and the hostel is obvious and the difficulties of these students for want of proper transport facilities in the metropolis, can be easily visualised. It is no wonder that frequently one finds these students miss their first lectures. Expansion of hostel facilities within the institute premises is urgently needed. Till such time as proper accommodation is available a regular transport service between the Institute and Shere-Bangla Nagar Hostel must be provided.

Sir, despite the limitations and difficulties faced by the institute in general, I am sure that my seniors, the old students of IPGMR must have noticed with delight many achievements of this Institute since they left. I can assure

that we are very much conscious of our responsibilities in continuing our endeavours for further progress.

Mr. President, your august presence here to-day has enhanced the prestige and pleasure of this yearly get-together. May I therefore thank you on behalf of the students for having consented to grace this occasion. As a member of the medical profession, and by virtue of your position, you are well aware of the problems of this Institute. We can therefore be rest assured that you will never fail to extend your sincerest help for this Institute whenever it is needed. Honourable Chief Guest; I take this opportunity to extend my thanks to you for sparing your precious time to be with us to-day.

Sir, your wide and long experience within the country as well as abroad makes it unnecessary to point out the dire necessity of such institutes as Institute of Postgraduate Medicine and Research for our country. I therefore hope that the happy combination of yourself as well as the president, will give all possible assistance for the progress of this Institute.

To many distinguished guests my thanks are not only for their presence here to-day but also for making our journey through this thorny road smoother and comfortable.

And finally for those whose footsteps we have followed I offer my thanks and assure them that we shall be looking forward for many many happy returns of the auspicious day."

After this the-reunion was inaugurated by Mr. Justice A. Sattar, Special Assistant to the Hon'ble President. In his speech he said ;

MR. JUSTICE A. SATTAR

Mr. Adviser, Director of the Institute of Postgraduate Medicine and Research, distinguished guests and my dear past and present students.

My presence in the institute of Postgraduate Medicine and Research is not new. Sometime back when I suffered a stroke I remained a few weeks under your medical care. I had lost my power of speech with no hope of recovery. But by Allah's mercy and by the remarkable treatment and care of Dr. Mannan and Dr. Nurul Islam my lost speech was restored. To-day I am amongst you again in a different capacity. I thank the organisers of the Re-union and Seminar to enable me to address you.

It is really a pleasure to know that about three-fourths of Postgraduate Doctors in the country are the products of this institute. From this it is obvious that the role of this Institute in the Health care of the People is immense. Besides, I understand that a good number of the Postgraduate of this Institute are serving abroad with distinction. This speaks well of the standard of our doctors. It must, however, be remembered that the money should not be the only consideration in this profession. Besides, the number of Postgraduates available for the teaching for the institutes and the different hospitals of the country is still far below the actual need of the country.

Increased attention is needed to organize people-oriented medicine by which I mean that facilities for medical care should be available at the door-steps of the people. For this, we need to provide maximum possible services at least up to the Sub-divisional level. In order to achieve this, a large number of doctors, technicians and nurses are required. But this huge requirement cannot be met by training specialists abroad at the cost of our hard-earned foreign currency. Even if we can it will take a good deal of time before this huge requirement is met. But regardless of that difficulty there

is yet another point. The disease pattern I gather, is different here and our boys and girls must learn to tackle their own peculiar problems in their own soil.

It is, therefore, necessary to expand the facilities of teaching more and more doctors and nurses at post-graduate level within the country. These doctors and nurses in turn will develop and expand people-oriented health care. For these particular reasons the Government is anxious to develop this institute within the shortest possible time. As a first step towards that, site has been permanently decided upon and additional land adjacent to the present complex has been purchased. So that the development and growth of this institute can go on without hindrance.

You know that 90% of our population live in the villages and it is absolutely essential that our doctors must be exposed to rural conditions and must be well conversant with the medical problems of the rural population. It is heartening to note that the Institute is playing a leading role in the development of community health care by incorporating Community Medicine in the faculty.

From our childhood, we have learnt that prevention is better than cure. Steps should be taken to prevent the preventable diseases and our doctors should leave no stone unturned to achieve this goal. Each doctor, nurse, paramedical person must not only be well acquainted with Community Medicine, they will, I hope, be friend and guide to the people. A person trusts his doctor to the extent that he confides to his doctor which he would not ordinarily divulge even to his closest relative or friend. I have no doubt that you will prove worthy of the trust reposed on you.

When I was young, many of the diseases did not have any specific medicine. Since the last World War, there have been tremendous advances in medicine. But this has also

brought problems. There are so many drugs, easily available that misuse of drugs is also becoming rampant. There is a saying that a good doctor treats a disease with a single medicine, while bad doctor treats a single disease with multiple medicines. To this, I wish to add, a good doctor uses a cheaper medicine whereas bad doctor uses costly medicine in place of cheaper one. I am therefore, glad that you have in the programme a session for discussion on abuse of drugs. The deliberations will surely be an eye-opener not only to doctors but also, I hope, to the general public.

Ours is a developing country. As in any other developing country, population control here is a burning problem. If we cannot control the unchecked growth of population, no amount of development can really eradicate our poverty. To slow down the population growth we must educate and motivate the people and make every fertile couple conscious of the dangerous implications of a large family. Doctors who command the greatest confidence of the people can easily motivate them to limit the size of their family.

In your programme, there will be a number of seminars and scientific discussions. We shall look forward to knowing the results of your scientific discussions and I am sure, in your deliberations you will be able to find ways and means to solve the innumerable medical problems. This type of scientific discussions will bring you closer together and everyone of you will feel enriched in knowledge. Education, particularly medical education is a never-ending process and one can keep pace with the advancement of knowledge only through such discussions. It is not possible for an individual to read all the books or journals. The concept of medical management is ever changing. What was in practice yesterday, may be obsolete to-day, and what is accepted as truth to-day, may be corrected to-morrow. Therefore, one need to keep himself abreast of such changes.

I am glad that this Institute is conscious of this big responsibility of teaching and guiding the medical profession in the country in line with other developing countries of the world. I have no doubt in mind that being one of your professions and with the experiences that he has, the Adviser will be doing his best for the improvement of your medical education in general and for the development of this National Institute in particular.

Ladies and gentlemen, I should once again emphasize that the present Government is fully conscious of its responsibility towards the large majority of our population living in rural areas. A detailed plan and programme have consequently been worked out in this field under the guidance of the Chief Martial Law Administrator Major-General Ziaur Rahman. Though conscious of these problems and responsibilities in remote areas, we are also conscious of the great need of some centres of excellence like this institute of yours.

In conclusion, I once again thank the organizers of the Seminar and wish them all success."

PANEL DISCUSSION ON ABUSE OF DRUGS—1977

This was one of the most interesting features during the third re-union of the Institute. The participants included Drs. N.H. Choulis and Mahmood El-Attal of WHO, Professors Kamaluddin Ahmed, A.Q.M.B. Chowdhury, S.A. Ashraf, M.A. Jalil, Col. A. Malik, Drs. M. A. Muttalib, M. B. Karim, Prof. A.K.M. Nazimuddowla Chowdhury and myself.

The panel discussion was largely attended and received wide coverage in the national dailies. Questions were invited before hand and given to the appropriate person in the panel for a reply. Wide range of drugs misused was covered. Emphasis was laid on the over use, misuse and indiscriminate use of anti-

biotics. A warning was voiced against the hazard of indiscriminate use of chloramphenicol and several examples of this drug induced aplastic anaemia with fatality were reported.

The whole group deprecated the abuse of vitamin preparations available in the market. They observed that local food products could supply all the vitamin requirement practically at no cost. Various vegetables which are available in plenty i. e. lal sak, kachu sak and palang sak could supply many vitamins should be used more commonly by the people rather than drawing away the foreign exchange of the country through import of vitamins.

ENDOSCOPIC FACILITIES—1977

During 1977 a Gastroduodenoscope and Colonoscope were received through the courtesy of the Govt. of Japan under technical assistance programme. Facilities for endoscopic examination were, therefore, utilised from July, 77.

In the meantime, Dr. A. K. Azad Khan one of our students was undergoing training in Oxford in Gastro-enterology under Dr. S. C. Truelove. He returned in Nov, 1977 and joined the institute. The endoscopic examinations were so long been conducted by Dr. M. N. Alam, an Associate Professor of Medicine and Dr. Mazharul Mannan of Shaheed Suhrawardy Hospital. Dr. Mannan had commonwealth award for gastro-enterology and worked with Sir Francis Avery Jones of Middlesex Hospital, London. With the joining of Dr. A. K. Azad Khan the facilities for doing endoscopic examination were broadened and this started attracting larger number of referrals.

CONSTRUCTION DELAYED—1977

Even though the IPGMR was more than a decade old, many challenges as recorded earlier upset the development programmes. The construction work was brought to a standstill

during the tenure of Col. M. M. Haque as an adviser. The cooperation from public works department and their wisdom for purchasing the construction materials earlier helped us a great deal in continuing the work already in progress. The rate was slowed down as there was definite instruction from the Ministry of Health to the works department to stop development programme of the institute. As the contract was already signed and the work was in progress the materials earlier purchased and money already placed at the disposal of the PWD the work of the 6th floor of the building could continue. The decision for constructing this additional floor was taken at the instance of the Late President, Sk. Mujibur Rahman. Out of the three engineering consultants two agreed. The original building was meant to be five storied. Myself and Prof. M. R. Khan, my Joint Director decided to meet Col. M. M. Haque, our adviser to seek his special permission to allow this construction to go on. On discussion it was evident that he was not very much opposed the idea of additional facilities for paediatric ward, nurses and doctors accommodation. He indicated to us that he had already instructed Dr. K. A. Khaleque, Additional Secretary, Health to inform the works department to go ahead with the ongoing work. But he did not.

Dr. Khaleque was very much opposed to the expansion programme of the Institute of Postgraduate Medicine and Research but would cleverly conceal his attitude and lay the whole blame on the adviser. We therefore requested the Adviser to instruct Mr. A. Rakib Khan, Joint Secretary Health to issue the instruction. This he did. The work could go on. This was completed by November, 1977.

SCHEME WITHDRAWN—1977

Soon after assumption of office of the Adviser for Health and Population Control Col. M. M. Haque withdrew the revised

scheme of the IPGMR complex, submitted to the ECNEC by the then Adviser Dr. Md. Ibrahim. The scheme had earlier been approved by the Planning Commission. Before Dr. Ibrahim could present the plan before ECNEC, his portfolio was changed and the Ministry of Health, Labour & Social Welfare was handed over to Col. M.M. Haque while Dr. Ibrahim retained only Population Control. Col. M.M. Haque soon after assumption of office withdrew the proposal for further examination. In spite of repeated written requests by me and Dr. M.R. Khan he did not re-examine it. As earlier stated he even stopped the on-going work. Besides to the surprise of many he declared that there would be a Medical University, which could very well do away with IPGMR, College of Physicians and Surgeons, Medical Council and the Medical Research Council.

Col. M. M. Haque even went so far as to say that the Proposed Medical University will start functioning soon. As the issue raised a storm in the profession as well as outside with statements and occasional counter statements it is better that the subject be covered under separate heading. When the controversy of this Medical University came to an end with the final indication from the President of the People's Republic of Bangladesh, it so happened that the responsibility of the Ministry of health was again handed over to Dr. Ibrahim who did not lose time in reproducing the scheme for IPGMR, before the ECNEC.

SCHEME FINALLY APPROVED—OCTOBER, 1977

October 10, 1977 is a red-letter day for the Institute when the ECNEC presided over Major General Ziaur Rehman, gave final clearance to the scheme involving 19 crores of taka and foreign exchange component of three crores. Myself and Dr. M. R. Khan, Joint Director had the privilege to be present

to the meeting of ECNEC along with Mr. M. K. Anwar, Secretary, Health and Dr. Ibrahim, Adviser incharge of Health and Population Control.

A question was raised by Mr. Mofizur Rahman, member Planning commission if the provision for fifty beds for Cardiology unit was necessary as there was already a proposal for establishing a Cardiovascular institute.

Mr. Jamaluddin Ahmed and Mr. S. M. Shafiul Azam both members of the Presidential Council of advisers pointed out that there should be a full-fledged national institute with all specialities as envisaged in the IPGMR plan. Establishment of seperate institute should be taken as extension of higher facilities for specialised patient care.

CONSULTANT ARCHITECT APPOINTED—1977

M/S Engineering Consultants & Associates Ltd. Dacca was appointed for consultancy service for preparation of Master Plan and detailed design for construction and extension of the Institute of Postgraduate Medicine and Research. In Nov. 1977 they were instructed to complete the preliminaries so that we could show this to the Hon'ble President before he lays the foundation stone.

NEW PAEDIATRICS UNIT—1978

Professsr A.Q.M.B. Chowdhury, Adviser Ministry of Health and Population Control. Mr. M. K. Anwar, Secretary Health and Dr. E. S. Han, WHO representative were among those who attended the milad mahfil conducted by Moulana Aminul Islam who Profusely referred to Islamic injuction for the service to the sufferng humanity. The opening ceremony was performed by Prof A. Q. M. B. Chowdhury who was earlier welcome and thanked by me on behalf of the staff and students of the institute for his help and co-operation.

The adviser assured all possible help. He emphasised on rural oriented paediatric medicine and desried to introduce various refresher courses for the doctors.

ADDITIONAL LAND ACQUIRED—1978

Katabon had about 6 acres of Khas land. This was on the north of the University campus lying on the southern side of the new Elephant Road and the western side of Dacca Museum. The Land Allocation Committee headed by Kazi Anwarul Hoque, the Adviser in charge, Local Govt. Rural Dev, Co-operative, Land Administration and Land Reform, allotted 5 acres of this land for the expansion of the IPGMR complex at the request of the Ministry of Health and Population Control.

Mr. M. K. Anwar, Secretary Health, Mr. A. Rakib Khan, Joint Secretary Health and Mr. Jamsheruddin, Secretary Land Record and Revenue extended whole hearted co-operation during the whole process of finalisation of allotment of the land.

HON'BLE PRESIDENT FOR FOUNDATION—1978

The academic council decided to request the President Major General Ziaur Rahman to lay the foundation stone of the IPGMR complex which could coincide with the fourth re-union of the Institute.

Accordingly a written request was made through the Adviser for Health and Population Control, Prof. B. Chowdhury. The following justifications were put forward.

1. The IPGMR is the highest national institute for Medical Sciences and Research.
2. This is the largest scheme involviug an expenditure of Taka 1952.33 lacs.

3. The foundation laying of such an institute is usually done by the Head of the State.
4. This is a national institute of international importance.

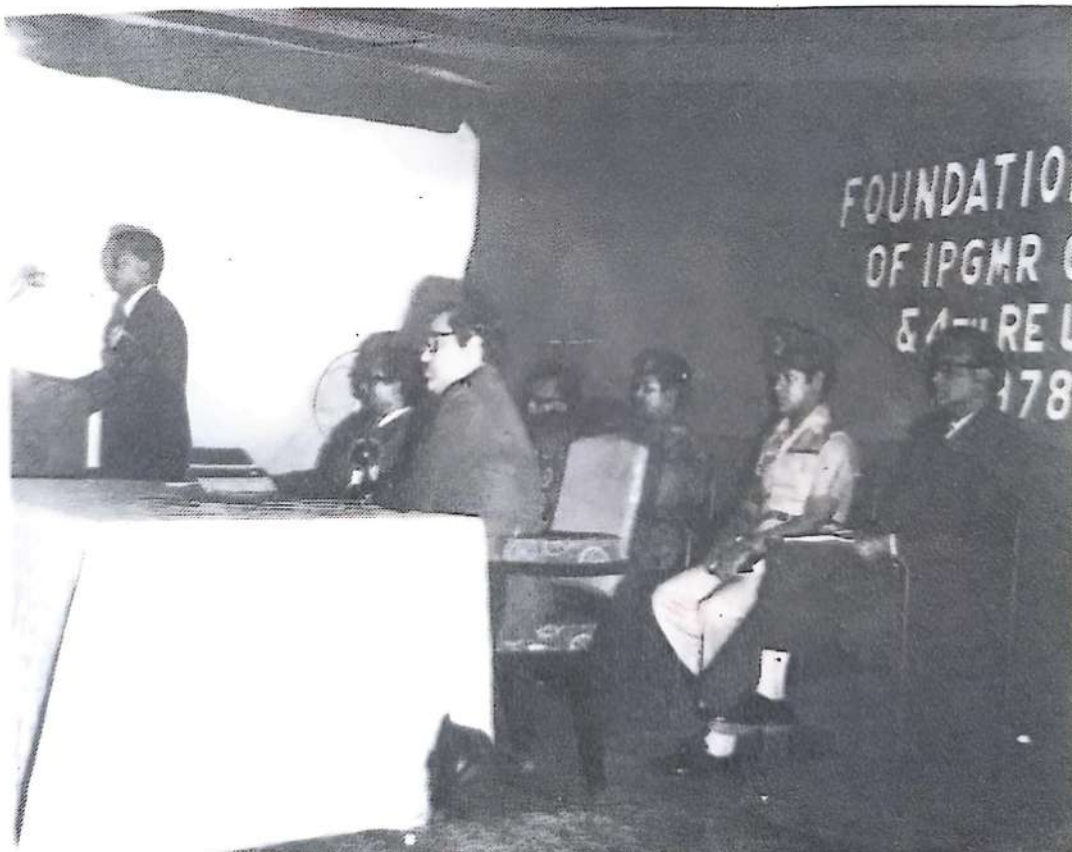
We were happy to learn that the Hon'ble President agreed to lay the foundation stone. Architects accordingly went ahead in consultation with Mr. Sharfuddin Ahmed Chowdhury, Superintending Engineer for the preliminary plan and site-selection for the foundation stone. It was agreed that this should be in the newly acquired area at Katabon on the roadside. When the Sub-divisional Engineer Mr. Sayeeduzzaman went to the proposed site along with Mr. Badiur Rahman, Administrative Officer, IPGMR, some unknown persons appeared on the spot and declared that the land would be utilised by the University for expansion of hostel accommodation. They said that the Vice-Chancellor Mr. Fazle Halim Chowdhury got an assurance from the President for the reallocation of the land to them. Incidentally, earlier a sum of Taka 400,000.00 had been paid by us towards the cost of the land and the possession was already handed over to us.

This is, therefore, came to us as a surprise. The Vice-Chancellor of the University had on several occasions met me and the Joint Director for his personal business but never indicated the need for the land by the University. Even though the last minute occurrence was disturbing and came to us as a surprise, we thought it was better to avoid controversy with the University especially when the Hon'ble President was going to lay the foundation stone.

On the north-western side of the main building we had in our possession about six acres of land surrounded by a boundary wall. This, we thought, would be ideal under the circumstances. Accordingly we instructed the engineers and



President Ziaur Rahman lays the foundation, Feb., 1978



President Ziaur Rahman addresses the doctors, Feb., 1978.

the architects to clean up the area for the foundation laying ceremony. Everything was set for the purpose overnight.

The President's Secretariat wanted clarification about the site. The Engineers and the Architect explained to Lt. Col. Oli Ahmed, Personal Secretary to the President. He was convinced of the suitability and security. Everything went on smoothly when quite unexpectedly I received a telephone call from Dr. M.R. Khan at about 10-30 p.m. on the night before the foundation laying ceremony scheduled to be held on February 6, 1978. He communicated to me that Dr. A.Q.M.B. Chowdhury, the Adviser for Health & Population Control wanted to talk to me but could not contact. He would be glad if I rang him up. I immediately rang up the Adviser. He told me that the Hon'ble President might be requested to cancel the programme as he (the adviser) had been informed from some source that there would be demonstration by the doctors before the Hon'ble President against the recommendations by the Pay and Services Commission. This was about the time when an Action Committee was formed by the Doctors, Engineers and Agriculturists for taking appropriate measures against discriminatory treatment of these technical groups by the Pay and Services Commission.

I emphatically dispelled such a possibility and said that if anything happened, the whole responsibility would be mine. I also contacted the Personal Secretary to the President immediately after. Lt. Col. Oli assured me that we could go ahead with the programme.

This naturally caused some anxiety and we eagerly waited for the next morning having everything set for the occasion.

The next morning the Hon'ble President was due to arrive at 8.30 a.m. and the guests to be as usual seated 15 minutes earlier. Everything went on smoothly. We were earlier informed

that the Hon'ble President would arrive at 9 a. m. instead of 8-30 a. m. and he arrived exactly at 9 a. m. and the function started.

The foundation laying ceremony was combined with the Fourth Re-union and Annual Scientific Seminar of the IPGMR. This offered a unique opportunity to our ex-students to join the function. As earlier stated the function started at 9 a. m. with the recitation from the Holy Quran by a student of the institute.

The address of welcome was read out by me as the Chairman of Reception Committee. This is reproduced below :

"Honourable President, Adviser for Health and Population Control, distinguished guests and my friends.

On behalf of the teachers and students of this institute and on my own behalf, I extend to you all a very warm welcome.

Re-union, Sir, is our usual annual feature for a social get together with scientific exchange of ideas and knowledge, for both the teachers and the students—past and present. It gives us an unique opportunity of learning from our previous mistakes and newer experiences.

This day has a historical significance in that we are here with our Honourable President who has shown keen interest in the growth and development of this Institute from the very beginning of his administration.

The eventful history of IPGMR with many challenges begotten of misunderstanding and perhaps apathy came to an end on the 27th December, 1975, when the council of Advisers under your Chairmanship Sir, dropped the proposal for shifting the IPGMR. The process of finalisation of the

revised scheme could not, however, be completed till 10th October, 1977-another land mark in the history of the institute.

Allotment of five acres of land at Katabon has removed the difficulty of limitation of space. This has been possible with all out support and help from the land allocation committee headed by Kazi Anwarul Hoque and subsequently by Mr. Enayetullah Khan.

May I at this stage Sir, record our appreciation for the foresightedness of Mr. S.M. Safiul Azam, Chief Secretary of the then East Pakistan and now the Adviser for Jute, who could well visualize the need for the institute and decided to handover an abandoned hotel which enabled us to have a modest beginning of this national institute.

We must also record our gratitude for the generous help of the Advisers for Health, Professor Ibrahim and subsequently Professor A. Q. M. B. Chowdhury who extended all possible help and co-operation for the development of this institute.

It is hardly over six weeks that Prof. Chowdhury, our Adviser for Health and Population Control performed the opening ceremony of the Paediatric Unit accomodating 56 patients.

Notwithstanding many challenges from the beginning, by now more than 3/4ths of the total Postgraduates are constituted by the students of this institute. Out of a total of 460 Postgraduate qualified doctors in the country 358 have been trained by us.

Most of the consultants all over the country are our students. There is hardly any institute in the country including medical colleges where our students do not occupy an important position or positions.

You may be proud Sir, that our students are now serving in friendly countries like Abu Dhabi, Iran, Kuwait, Libya, Malayasia, Saudi Arabia and Uganda with great appreciation from the respective countries.

In the field of research, the institute can claim to have made significant contribution over the years. A compilation of THESES, DISSERTATIONS AND PUBLICATIONS till 1976 will give an idea of our research activities relating to our health problems.

Quite a few of our works have been incorporated in the standard books of references and many have achieved international recognition,

By now the Institute has established reputation in countries far and near. Frequently we receive applications from foreign students for admission to various courses. The scheme provides for admission of 20-30 foreign students every year. We have already proposed to the ministry about our readiness for admitting these students for various postgraduate courses.

This is, therefore, a national institute with great responsibility for specialized health care, research and not the least advanced education in the field of medical sciences. This is an institution with international responsibilities. It is, therefore, most befitting in our estimate that the Head of the State would lay foundation stone of such a complex.

I may at this stage briefly mention some of the salient features of our curriculum. The Institute runs almost all necessary courses in basic medical sciences and in clinical subjects to cater primarily for the need of the country. The courses and curriculum are so devised that while persuing their studies a student is obliged to offer services to the country in conducting research for theses in M. Phil courses and writing out dissertations and case notes for clinical

subjects. Besides, the students of surgical sciences have to perform at least 100 operations each before they become eligible for final examination. This is an advancement over the educational system in many western countries.

In keeping with the future responsibilities of our trained doctors and our obligations and commitment for the nation community field practice has been incorporated in the curriculum of studies which we desire to extend beyond Gonoshasthya Kendra at Savar—a centre which serve at present to other suitable health centres where our students would spend some months for offering services while gaining experience collecting data for dissertation etc.

While we are fully conscious of our responsibilities for the teeming millions and the possible solution by extending health care to this people by para-medics, village doctors, bare-foot doctor, practitioner of indigenous system etc. we are one with those who rightly believe that every nation must have at least one centre of excellence rather than draining away our hard earned foreign exchange by sending complicated cases for sophisticated medical care and offering scholarship for Postgraduate training in foreign countries which are not always relevant to our needs. For the development of educational programme, for man power development and for specialized services the Institute owes a responsibility to the nation and the nation to the Institute. It is heartening that Government has taken it up with right earnest and we hope within a foreseeable future it will have the status it deserves.

Finally, may I sir, draw your kind attention to one of the challenges facing the profession to-day. Many of our trained teachers are now hesitant to come back home from abroad and many senior teachers are too eager to find an opportunity outside. Juniors are equally pessimistic about their future prospect. Unless something is done to remove

the long standing colonial discrepancies in the service cadre removing obstacles for having a good beginning with the prospect of attaining systematically the highest position in the national service, we apprehend, the quality of service shall deteriorate and the nation shall suffer. All that we have known about you, sir, makes us fully optimistic of your personal attention for removing these discrepancies.

Once again, I offer our sincere thanks and gratitude to the Hon'ble President for so kindly accepting our invitation and gracing the occasion and the Adviser for Health and Population Control for all his help and encouragements. Thank you all, ladies and gentlemen, for joining us on this auspicious occasion."

PROF. B. CHOWDHURY

This was followed by the address by Prof. A. Q. M. B. Chowdhury, Adviser in charge of Ministry of Health and Population Control who made an extempore speech in which he said we have to make our health services village oriented. He also stressed the need for expansion of preventive measures more for rural people.

Prof. Chowdhury regretted that the people in the villages were neglected in the past though bulk of the money for medical development come from the rural people.

He also referred to various programmes for expansion of medical facilities in the village. In conclusion the Adviser expressed hope that Postgraduate would not feel shy of rendering service to the vast majority of our people living in remote corners including villages.

This was followed by the address by the Chief Guest Hon'ble President.

MAJOR GENERAL ZIAUR RAHMAN

“Bismillahir Rahmanir Rahim

Esteemed Doctors and Gentlemen,

I feel very happy to have been able to be present at the Postgraduate Institute and to participate in your Re-union and lay the foundation of the new Hospital building.

The Govt. is determined to expand the facilities of medical treatment for the general public. All our efforts are made to materialise this objective by establishing new hospitals as well as improving the existing ones. The Postgraduate Institute being the highest seat of medical education in the country has a definite role to play in bringing the blessings of modern medical science within reach of the common man and the country expects that all doctors, teachers and experts connected with this Institute by their sincere and dedicated efforts will make important contributions in their field.

I am delighted to learn that three-fourths of the specialists now working in the country have received training at this Institute. Many graduates of this Institute made their mark in their respective fields in the Middle East and also in other countries. While I admire your efforts in effecting cure of the most stubborn of diseases by the application of the latest advances made by the medical science, I would also urge upon you the need for finding means of simplified and inexpensive treatment of many many ailments from which the people in the villages suffer.

Besides imparting high grade instruction and providing training in medicine it should also be the business of this Institute to organise Refresher Courses at various levels for our working doctors in order to enable them to keep abreast of the latest developments in their chosen fields. The objective of the Institute should not be confined only to

training out good Physicians. The Institute should seriously engage itself in carrying out Research in prevention and cure of diseases that are common in the country. The nation expects of you that, in keeping with other developing countries you will make significant contributions in the field of creative research. The Govt. will extend all possible help in this regard. Keeping in view present economic condition of our people it is imperative that the entire health system of the country should be recast, making health services inexpensive and easy of access to the common man.

I should like to remind you that it is the villages that produce the life blood of our nation. Unless the village is developed and the life of the village folk bettered it is not possible to bring about the overall uplift of the country. It is, therefore, essential that we should start thinking in terms of villages. The Govt. have taken in hand an extensive plan to train up an army of 'bare-foot doctors' to bring medical facilities within easy reach of the village people. You must extend the sphere of your activities beyond the confines of the cities and these should spread gradually into the country side.

In national interest doctors should, if only on short term basis, render service to the village folk. You should give serious thought to the need for reorientation of the medical courses as well as the training system so that doctors are motivated to choose the village as their sphere of activities rather than the urban areas.

The Para-medics and the nurses have a vital role in any mass-oriented health system. Doctors also cannot adequately cope with the medical needs of the large population of this country. Properly qualified para-medics in increasing number are also needed. This Institute, I am confident, will do whatever it can in training the para-medics. I should also

like to call your attention to the problem of population explosion. You are all aware of what an alarming dimension this problem is before us. The success of our developmental efforts will largely depend on how effectively we can control this population explosion.

We hope that this Institute will not lose sight of this problem, concerned as it is with the general development of the medical system. Efforts should also be made to strengthen the preventive side. Rapid improvement in the health system though highly desirable is impeded by an appalling lack of hygienic knowledge and a corresponding absence of adequate and effective measures.

I firmly believe that your untiring efforts will go a long way in eradicating from our country all preventable diseases.

At present large number of drugs are being manufactured in our country. It is to be hoped that with the increase in their production and use, dependence on imported drugs and medicines will gradually diminish. I am quite sure drug manufacturers will welcome opinions and suggestions, regarding quality and efficacy of indigenous origin from members of the medical profession. You are in a position, through your efforts, to make our pharmaceutical industry viable and self sufficient.

My Government shall render all possible assistance in developing the Postgraduate. Necessary orders have been issued to the departments concerned to take in hand the work of constructions on priority basis. Our people will now naturally expect that you will rededicate yourselves to the service of the suffering humanity with a greater measure of sincerity and devotion.

Khuda Hafiz,
Bangladesh Zindabad"

(Translated from original Bengali by Professor Mohammad Ali, Head of the deptt. of English, University of Chittagong)

PROF. M. ZAMAN

The vote of thanks was offered by Prof. M. Zaman, Professor of Surgery, in which he said that this was a historic occasion for the Institute, the only one of its kind in the country which had in the past, experienced many challenges and difficulties. He reassured the Hon'ble President and the Adviser for Health and Population Control that the teachers and the students of this Institute would leave no stone unturned for upholding the prestige of the profession and maintaining the standard of education and research in the country.

FOUNDATION LAID—1978

After the inaugural ceremony was over, the Hon'ble President proceeded to the site for laying the foundation stone accompanied by a selected group of persons including his personal staff.

A PLEASANT SURPRISE

After this was completed, he expressed his desire to visit my office which came to me as a pleasant surprise. As he proceeded to my room, crowds in the corridor of the hospital gradually swelled up to have a look at their President. The Hon'ble President, myself and Prof. M. R. Khan sat side by side. He wanted to know some details about our difficulties for possible solution. We emphasised on the need for removing some bottlenecks in the administration by granting autonomy to the Institutes including IPGMR. We could very well discover his willingness to accept the proposal if it were initiated by the Ministry. Towards the end of the discussion the Adviser for health joined us and appeared to have agreed to the idea on principle. The President during his brief stay in my room emphasised the need for

health education programme by the doctors for the benefit of the people at all levels. We promised to organise such seminar and exhibition.

SEMINAR ON HEALTH EDUCATION & EXHIBITION—1978

In accordance with the desire of the Hon'ble President we decided that something should be done for health education of the public through Health Education and Exhibition. In the meantime National Council of Science and Technology decided to observe 'Science week' throughout the country. It was recommended that health exhibition wherever possible should be organised along with Science Fair. As a member of the Executive Committee of the National Council of Science and Technology, I was granted a sum of money for the purpose. After a discussion with the teachers of various departments it was decided that the Exhibition should be arranged in the auditorium of the South annexe building from 19th to 24th March, 1978. Various departments and some relevant organisation like Cholera Research Laboratory, NATAB, Health Education Bureau were requested to participate. They were all allotted space within the auditorium still under construction for erecting individual stall. The response was satisfactory. Departments of Public Health and Community Medicine, Clinical Pathology, Microbiology, Biochemistry and Nutrition, Blood Transfusion and Serology, Obstetrics and Gynaecology, Psychiatry, Radiotherapy, Cardiology, Paediatrics and Dentistry participated.

Professor A.Q.M.B. Chowdhury, Adviser for Health and Population control Inaugurated the exhibition. In his speech he expressed great satisfaction at the participation of the institute for such an exhibition which he hoped would be able to create awareness in a large number of public about their health.

In my address of welcome I said that this exhibition is an example of participation of the highest qualified people of the country for the benefit of common men. Teachers and the students of this institute, I said, are willing to offer their services to people at all walks of life, urban or rural, rich or poor, provided they are given opportunity and minimum facilities.

The exhibition lasted for 6 days and attracted big crowds daily.

Papers of general interest were presented during the exhibition by various experts. These are edited by me and published in a book form under the title "SHAYASTHA SAMBONDHEY KICHU KATHA" meaning something about health.

At the conclusion prizes were declared for the best exhibitors. The Deptt. of Microbiology under the guidance of Professor K. M. Rahman received the first prize while the NATAB secured the second prize.

A RECEPTION AND A FAREWELL—1978

During the first week of July 1978, the examinations were held as usual. This included various FCPS Primary and Final, MCPS, M. Phil and diploma examinations held under auspices of the College of Physicians and Surgeons of Bangladesh and the University of Dacca. The results were declared as usual on the day of completion of examination. Meantime, the students in various courses were placed on deputation and reported for joining the course. We 'therefore' decided to arrange a function for reception to freshers and farewell to the outgoing ones. Mr. Justice A. Sattar, the Hon'ble Vice President, Peoples' Republic of Bangladesh agreed to be the Chief guest and Prof. A.Q.M. Badruddoza Chowdhury, Hon'ble Minister for Health and Population Control consented to

preside over the function. Among others who spoke on the occasion included myself, Prof. M. R. Khan, Dr. Mujibur Rahman, Dr. Shamsuzzaman Chowdhury and Prof. S.A. Sobhan.

PROF. N. ISLAM

In my address of welcome I said,

“This is once again a proud privilege for me to welcome you this morning.

May I, Sir, on this important occasion recall some of the salient features of this institute from the beginning. We had the first batch of students admitted in this institute, located elsewhere, in 1966. Total number of students were 33 and the first batch came out after examination in 1968. At that time we had 7 different courses run by the institute. To-day we have more than 25 different courses run by the institute covering various specialities and I may say almost all the specialities that are needed for the country. By now we have produced about 400 postgraduate qualified doctors whereas the total number of postgraduate qualified doctors in the country is around 500. Many of our qualified doctors are now working as ambassadors of good will in friendly countries. Quite a few of our students are to-day occupying highest position in their respective departments, a good number are Professors. Many departments are manned by our ex-students.

This is a research institute and research is considered as an integral part of postgraduate study. It is a departure from the traditional western system of medical education which kept us confined to books and theoretical knowledge in many parts. Over the years our students have significantly contributed in the field of research in the country. Number of theses in M.Phil course and dissertations for clinical courses as accumulated in the library of the institute and that

of the College of Physicians and Surgeons of Bangladesh will bear ample testimony.

The history of the institute is not all that rosy from the beginning till to-day. We had bitter challenges of shifting of the institute at one time and that of its abolition at another. It is interesting and historically significant that the institute which began functioning in 1966 had to pass through many challenges. It is the only last year at the Advisory Council the site of Postgraduate Institute was finalised. It is only a few months before that we had the unique fortune of having the Head of the State, as our Chief Guest to lay the foundation stone for the main hospital building. We, therefore, to-day in 1978 can firmly say that Postgraduate has come to stay where it is. I am happy, sir, that both our chief guest as well as the head of the state have no other way but to pass by the side of the postgraduate and in doing so in the morning and evening they have to look at least twice to the development of the institute. It is a good fortune for us that it draws attention and we have occasions to utilize this opportunity of pushing our work through difficulties and various administrative bottlenecks involving more than one department.

While describing some of the difficulties, the successes and encouragements about the institute, I may mention some difficulties faced by our students. Difficulties are faced by students almost universally in all places but difficulties here, I believe are minimum and a little attention could perhaps remove many of them. These are, by way of accommodation, I do not emphasize very much at this stage because we hope that within near future we shall be able to accommodate our students in this very building. Some of the facilities which used to be offered to the student for some reason or other were withdrawn two

years back and have not subsequently been revived. I would request you to sanction Tk. 2000—3000 for each student for the preparation of thesis and dissertation.

After qualification not all of them get suitable posting. There has been some examples of discrimination in posting of the doctors in some places but I would request you sir, that when a doctor is qualified there should be an incentive for them, if no posting is available immediately. For example 2-3 increments can be given, as exists in many other countries. But in the Health Ministry I am sure there are posts available in sufficient numbers yet it may require some time for processing and in doing so I believe this can be solved out in posting them in time and also giving them some encouragement in some form or other.

As you are aware, Sir, many of the friendly countries are pressing hard for our qualified doctors, for employment in their respective countries. It is the Govt. policy to decide how many of doctors we can spare but certainly this is an opening for our doctors who have their national responsibilities as well. As a compromise between the two, I would say that there should be no frustration among those who are qualified and the friendly relationship between Bangladesh and foreign countries should continue to grow. We have to find out a compromise by giving suitable posting to our doctors and allowing them to go where and when possible, without adversely affecting the health services of the country.

Certainly we welcome those who are qualified from abroad. A distinction has to be made between those qualified from home and those from abroad. I personally believe that those who are qualified from home are unquestionably loyal and sacrificing group of people who, forgetting the facilities and lustres of abroad get themselves admitted into this institute, with two aims i. e. to serve the nation

and to have some opportunity to go abroad. In doing so, I would say Sir, preference must be given to home products and I believe our home products are in no way inferior. I personally believe that they are superior. It is not my contention alone. We, as a tradition bring examiners from outside Bangladesh and every year we do so. This year, also we had examiner from U.K. a person of no less eminence than Dr. S. C. Truelove of Nuffield Department of Clinical Medicine, University of Oxford. According to him the standard of our Postgraduate examination is "excellent". This is encouraging and is some thing unique and we can be proud of.

DR. MUJIBUR RAHMAN

Dr. Mujibur Rahman, speaking on behalf of the outgoing students, said that he would never forget the affectionate guidance which he received from his teachers during the course. He now realises how well he has done by taking up the course for advanced studies.

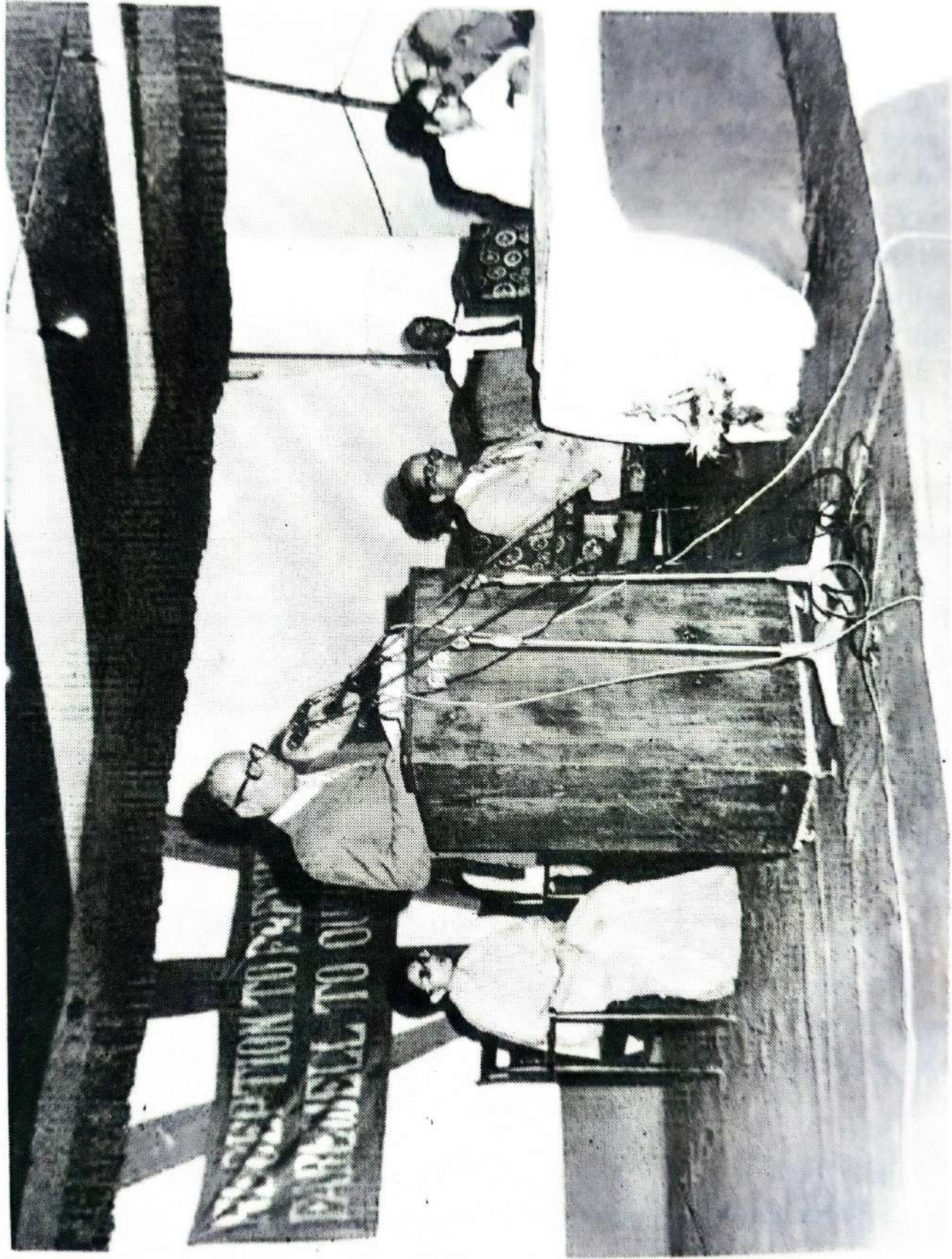
DR. MD. SHAMSUZZAMAN CHOWDHURY

Speaking on behalf of the freshers Dr. Shamsuzzaman Chowdhury expressed great hope for the future.

MR. JUSTICE A. SATTAR

The Vice President in his inaugural address greatly appreciated the achievements of the institute over the years and congratulated the authorities of the Institute for the same. He said,,

"I am indeed very happy to be able to join you this morning to welcome the freshers and to bid farewell to the out-going students. It is always a pleasant experience on my part to be with you specially when so many young doctors are greeted on the eve of starting a career so vitally linked with the health of the nation.



Mr. Justice A. Sattar addresses doctors
At reception to freshers and farewell to outgoing, July., 1978.

The overriding importance of health services in the overall progress of the country cannot be over-emphasised. The government headed by our president Ziaur Rahman is keen to expand and organise health services more efficiently for the benefit of our people, the vast majority of whom live in rural areas. The task is a challenging one which indeed calls for a lot of hard work and dedication on the part of our doctors in particular. For better management of our health services, the specialists job are of great significance. I hope the new specialists who are now to join their career will to a considerable extent meet this urgent need of the country and raise the medicare for our people as well.

Despite heavy odds, I am glad to know that the institute has been able to maintain its schedule of teaching and examination, a factor so important in the field of education. You all will agree with me that in the field of education the quality and standard has to be guarded zealously under all circumstances. I congratulate the authorities of the institute for the academic excellence they have attained over the years. I would urge upon those who have passed out to be vigilant to maintain the good name of their academic performance and also of their noble profession.

In the society, the doctors by virtue of their very profession has indeed a vital responsibility to shoulder. I hope and pray that the outgoing doctors will prove equal to the responsibilities awaiting them.

I wish the incoming students a very fruitful training course in the institute and the outgoing students an effective career in meeting the need of our ailing humanity.

Khuda Hafez
Bangladesh Zindabad"

Professor A.Q.M.B. Chowdhury then delivered his presidential address in which he said that having an academic link with the institute as an Honorary Professor he would share the achievements and congratulate himself. He said :

PROFESSOR A.Q.M.B. CHOWDHURY

Chief Guest, Professor Islam, my colleagues and young friends. At the outset I congratulate all of you who have qualified from this institute this year and joined various postgraduate courses during the current session. I do not want to forget to congratulate the teachers who have helped students to obtain distinction of becoming postgraduate qualified doctors of the country and certainly credit must be given to IPGMR for utilising best the facilities for elevating number of postgraduate doctors. I congratulate all from the core of my heart.

There is a second reason for my being happy. Let us not forget that I am professionally an Honorary Professor of Medicine of this Institute. I have the privilege of congratulating myself.

I would like also to welcome all my young friends, young graduate doctors who in the language of our doctors came to this institute 'keeping a great hope in mind'. I can assure you that the people of the country as well as the Govt. have greater hopes on you, so that in time to come you can relieve the ailment of the sufferings of our people at large.

The support to the IPGMR by the Govt. has been increased manifold during recent time as you have already heard from your director, Professor Islam.

I must make it very clear to all concerned that it is within the last few months that IPGMR has got a new plot of land, has got institution foundation laid by the President

of the country. This has never happened with any other medical institute of the country.

This shows clearly how much significance we attach to the growth and development of this great National Institute of Postgraduate Medicine and Research for its due role. As you all know 19 crores taka has been allotted for this project and I must say this is a good amount considering the amount we can spend for the health sector. At the same time I have the great responsibility and duty to remind the members of my profession that the problems must be assessed in totality, completeness. There shall not be isolated analysis of health problem from any single corner.

One cannot possibly forget the basic facts that the level of health service of the country is at the lowest. One cannot deny that although we have 10,000 doctors approximately in this country, 90% are in cities, bigger places and towns and sub-divisional towns. One has to agree that 10% of doctors are located in areas where 90% of people or 90% of patients live in our country.

We must give a serious thought and that is why future health policy of Govt. has very distinct emphasis. We know that the future policy of the country in the field of health shall be on rural basis so that it can serve the people, the neglected people also.

It should be need-based to place your service where need is maximum. For example, for prevention of malnutrition. We never focussed it properly that 10 million children of our country suffer from malnutrition by any standard and of these 16-20% are grossly malnourished. Unfortunately these people live mostly in places where we have failed ourselves. This is not the fault of the doctors alone. This is the fault of the machinery which is running the Govt.

All of us know that the prevention is many times better than cure. I site a simple example, to prevent Smallpox, Typhoid, Cholera, it does not cost much, but to treat a patient of Cholera or Typhoid or Smallpox involves an expenditure by which you can prevent probably 1000 patients. So it is a great loss to the country. That is why our future plan includes setting up of a balance between preventive and curative medicine.

Finally, I would emphasise that the IPGMR has a vital role to play in focussing the national need and I have no doubt from our past experiences that it will successfully share the great national responsibility.

PROFESSOR S.A. SOBHAN

Professor S.A. Sobhan offered vote of thanks. He said that medicare, both preventive and curative have to be taken at the door steps of the mass. To execute this programme ministry may be taken as the brain whereas the Medical Institutions may be taken as the Heart which will supply nourishment to the Medicare Programme. Therefore the role of Medical Institutions must not be under estimated.

He assured the Hon'ble Minister and the Chief guest of the sincere efforts by the IPGMR.

CONCLUDING DINNER

The function concluded by a dinner at night in which Prof. M.A. Matin, Minister of State for Health and Population Control was the Chief Guest.

PROFESSOR M.A. MATIN

Prof. Matin in his after-dinner speech said that he would never forget his association with the IPGMR from the beginning. The Institute, he said, offered him opportunity to learn many things and he could frequently participate in developmental

work. It was therefore only natural for him to see the Institute prosper. He expressed great confidence in the administration as well as the student and hoped that they would play their role and contribute to the health care and research in the country significantly.

PREVENTIVE SIDE SEPARATED—1978

The scheme for NIPSOM received administrative approval in 1975, but remained unimplemented till Prof. A. K. M. Kafiluddin, Professor of Epidemiology, IPGMR joined as the Director of the Institute in Oct. 1977. The remaining three officers of the preventive side namely Drs. Sarafat Ali, Associate Professor, Occupational Health ; W. Zaman, Associate Professor, Public Health Administration and A.R. Khan, Assistant Professor, Entomology also joined NIPSOM. 'At present the Institute is functioning in the old Para Medical Institute hostel building which offers very poor physical facilities. The Institute has no laboratory or library of its own.'

Soon after joining NIPSOM Dr. Kafiluddin wanted to introduce DPH and DTM&H course in that Institute contrary to his earlier opinion. These two courses were earlier abolished by the University on the recommendation of the Faculty of Postgraduate Medical Sciences and Research. DCM (Diploma in Community Medicine) was introduced instead. A demand was also made for creation of a Faculty of Preventive and Social Medicine. The Academic Council of the Dacca University at the request of the NIPSOM authorities gave temporary recognition to the Institute in 1978 for an initial period of two years. It did not agree to the proposal for a separate faculty and clearly stated that the Institute shall be academically under the control of the Faculty of Postgraduate Medical Sciences and Research. Besides the matter relating to the courses was referred to the Faculty of Postgraduate Medical

Sciences and Research 'for review with reference to its earlier decision regarding abolition of DPH and DTM&H courses'.

Knowledgable circles feel that creation of a separate faculty would have been detrimental to the standard and uniformity of Postgraduate qualifications. It is also felt that the DPH qualified doctors already produced in the country are not yet fully employed. The course may therefore have an auto-death like the DTM&H course which could not attract any student during the past two years.

ADDITIONAL LAND ACQUIRED—1978

Soon after the plot of land at Katabon was lost to the University of Dacca we started looking for additional space adjacent to the present site of the IPGMR. Mr. Nurul Huda Chowdhury, ADC (Development) Dacca had been sentimentally attached to the Institute. He took pains in finding out some vacant land on the western side of Sakura. Mr. Abul Faraz Khan, Town Planner and Mr. A. H. Nurul Islam, Chairman, DIT, extended all help and co-operation in procuring this plot of land measuring four acres. Dr. A. R. Khan, Superintendent, IPGMR, Prof. Nazimuddowla Chowdhury, Col. A.M. Chowdhury, Project Director and Mr. Badiur Rahman, Administrative Officer, all contributed their share.

The institute has now about 15 acres of land for its development. The GOTA (Gazetted Officers Training Academy) has a proposal to shift in which case it will be added to the institute. When we indicated this need to the Hon'ble President during the foundation laying ceremony he very kindly agreed to the proposal.

LATEST TRANSFER—1978

As we are about to come out of the press the services of Prof. M. R. Khan, Joint Director and Professor of Paediatrics is

placed at the disposal of the Management Committee of the Shishu Hospital for appointment as Director of the Hospital. Prof. Kamaluddin Ahmed, Professor of Pharmacology replaces Prof. Khan as the Joint Director and Dr. Maleka Khatoon takes over the charge of the Paediatric Unit. In Professor Khan we lost an experienced Joint Director closely connected with the institute for many years, with great contribution for the development while in Professor Kamal we have an able successor having close link with the institute from the beginning.

TRADITIONAL MEDICINE : A NEW VENTURE—1978

During mid-August, 1978 Professor A.Q.M. Badruddoza Chowdhury, Hon'ble Minister for Health and Population Control, Government of Bangladesh expressed the desire that we should conduct some research on Traditional Medicine which he said was very much in line with my thought as well as his. Incidentally we both had been advocating this for quite sometime-through press and media.

We both agreed that it would be started immediately and as a first step we could take up the problem of Rheumatoid Arthritis for comparative study. Accordingly provision has been made for 10 beds as an initial step.

THE FUTURE

The criticism on the location of the institute and the limitation of the space can no more hold good. The Institute to-day has by its side another sister organisation namely Institute of Diabetic Research and Rehabilitation. Situated on the east this is proposed to have physical link with the IPGMR. The two together can hopefully set example for judicious utilisation of our talent and resources. On the southern side is the National Museum. This is an Institute

with academic environment and cannot be anything but inspiring for the neighbours.

The limitation of space which the earlier critics wanted to magnify is no more a problem. We can now visualise adequate expansion of the Institute with not less than fifteen acres of land. Over the years the scientific contributions made by the institute is nothing less than significant. The publications in international journals as well as in the BMRC Bulletin indicates the extent of research activities in the institute. With the facilities provided under the scheme the activity shall undoubtedly multiply.

The geographic link between the East and the West which Bangladesh establishes can academically be strengthened by this institute. The days should not be far off when we can attract students from all parts of the east and many of the West.

When the challenging past could not be an effective impediment in the development of Postgraduate Medical Education in the country, the facilities now provided cannot bring anything but prosperity. The IPGMR is destined to play a vital role.

APPENDIX

THE P.G. REMOVAL ISSUE

(1)

Published in the Daily Ittefaq on 21-5-74

An acute controversy has arisen over the Government decision to shift the country's leading Medical Institute, namely the P. G. Hospital, from Dacca to Mirzapur and for Government to take over Medical complex at Mirzapur, Tangail. According to the supporters of the move to shift the P. G. Hospital elsewhere, its present location in what was formerly the Shahbag Hotel greatly interferes with its functioning as a research institute due to its being situated right on a mainroad with its attendant traffic noises and that of flying overhead of planes. Besides, it was further argued, that Shahbag site has no room for expansion.

On the other hand, those who held the opposite view considered that this latest decision was taken without much thought. Such people think that if the P. G. Hospital is removed to another site many citizens of the country will not only be deprived of the benefits of more sophisticated treatment but also medical students will not have the opportunity to handle many modern scientific instruments because such instruments are not to be found elsewhere in the country. Moreover, patients in critical condition will have to go to relatively greatly inaccessible Tangail than finding their treatment in Dacca which is a much easier access. All this will render the condition of critical patients still more critical. Further, teachers and students will be deprived of the proximity of the leading libraries like the central library, British Council

and the USIS. Moreover, the P. G. Hospital in its present location namely the Shahbag hotel premises also has enough ground for further expansion and in the modern age advantage may also be taken for the P. G. Hospital to expand vertically. What is more, Government has recently set apart eight acres of land for the expansion of the P. G. Hospital. Than again to reconvert an already converted hotel back to its original position would involve useless expenditure, which amount may be more profitably utilized for the improvement of the partly built eleven storied Elysium hotel as a hotel. Such a move would solve the problem of the unemployed employees of the former Shahbag hotel as well.

It is also argued by those who hold such view that the taking over by Govt. of the already well running Kumudini Welfare Trust hospital at Mirzapur thus making it over to the tender mercies of Govt. employees is not at all a move in the right direction. Countrywise construction of a new hospital is more desirable. Besides, patients, doctors and the students of the Kumudini Welfare Trust Hospital and the student inmates of the Bharateswari Homes have strongly criticized this decision. In their view the move to shift P. G. Hospital to Mirzapur will be ruin to both the P.G. Hospital and the Mirzapur Hospital which are twin public service Institute.

The educated and informed opinion in medical circle on this matter is, nowhere in the world is a P. G. Hospital outside a city. Such an institution through treatment of varieties of patients and research on different branches of medicine creates experienced physicians and such an arrangement can only bear fruit when a postgraduate Institute gets the cooperation of different organisation or Institutions of a central metropolis.

(2)

Published in the Daily Ittefaq on 22-5-74

Over the issue of the removal of Postgraduate Medical Institution & hospital from Dacca to Tangail, Dr. Nurul Islam, Director of the same in a statement on Monday in interview said "You see, I am a Doctor, the nursing of patients and research into medicine is my religion. Therefore, it is not possible for me to interfere in outside controversy".

On being asked if any inconvenience would be caused or not by the removal of the P.G. from Dacca to Tangail Dr. Islam said, "the problem is not personal but relates to community as a whole. Therefore, I welcome whatever is for the general benefit and generally acceptable."

In reply to another question Dr. Islam said, 'out of a total of 247 postgraduate doctors in the country as many as 136 have passed out from the P.G. hospital.' But he added this number is substantially less than the demand for such type of physicians. The reason is that by the criteria of educational standard and research in foreign country more of qualified doctors are required for each student.

Asked if treatment and research in the P.G. Hospital was relatively more dependant on other institution, he replied in the affirmative. And it was for this very reason, he said that in other countries P.G. Hospitals have been established in the Chief City.

Questioned under what circumstances it would be wise to remove the P.G. Hospital from Dacca he declined to say anything.

Views of Patients under treatment in the Mirazpur Hospital

Meanwhile, Dayal Chandra Saha, Shukkur Mahmood, Mohammed Abdur Rahman, Susantta Kumar Dutta and quite a number of other inmates of the Mirzapur hospital have

expressed their resentment over the Government decision. They said that they were poor people who were getting all kinds of facilities in the hospital along with treatment. And it was on this account that they, from their sick bed, would appeal to Government not to make this charitable hospital into a haunt of the rich, let this hospital continue to be used for the selfsame purpose for which it was established by its great founder, namely the service of the poor.

The Women Students of the Bharateswari Homes

In a written statement about thirty students of the above mentioned charitable institution have called upon Government not to convert it into a Government hospital.

“We the nearly eight hundred daughters coming from lower middle class homes are not only studying in this institution but also getting all the facilities and comfort from the Kumudini hospital. If this hospital be converted into a Government one not only will the invisible financial help we are getting by way of treatment stop but our studies will also cease. Moreover, our relatives all are enjoying the facilities of this hospital. Therefore, it will be our earnest plea to the Government to reconsider its decision to remove the P.G. Hospital from Dacca.”

The Views of the Guardians of the Students of the Home

Strong protests have also been expressed by them. In their statement they said “that if this decision be enforced the importance of Bharateswari homes will suffer. Accordingly our appeal to Government would be to reconsider the decision.”

These apart, teachers of the Bharateshwari homes have also in a written statement protested against the decision and likewise requested the reconsideration of the proposal.

MEDICAL UNIVERSITY—ITS JUSTIFICATION ?

A.F.M. YUSUF, MBBS, DTM&H, MRCP, FCPS.

Member, Bangladesh Medical Council

Govt. of Bangladesh has decided to establish a Medical University. If my memory serves me right the idea was first mooted in the early sixties. Since then periodical discussions and debates failed to produce any concrete proposal because the subject was highly controversial. But suddenly it came out in the press that the Government has already taken the decision to establish a Medical University in the country. Since then, the Government has sought the opinion of the medical profession on the constitution and the administrative set up of such an institution. I feel that there is scope for further discussion on the subject before we embark on such a costly venture.

Countries like USA, UK, Germany, France, Japan and USSR, Peoples Republic of China, who are the leaders of modern medicine in the world, do not have a separate monodisciplined Medical University. Why then, a poor developing country like ours should go for such a costly experimental project, must be justified to the people before they are asked to bear the inevitable financial burden.

It has been said that to bring about overall improvement of medical education, both under graduate and postgraduate, all the Medical Colleges of the country including the Dental College, Nursing Institute and the Institute of Postgraduate medicine will be brought under its administrative and academic control to facilitate their uniformity of growth and development. Outwardly this sounds a plausible idea but is unlikely to stand the test of reason if we dispassionately analyse the existing practice.

In this connection it is relevant to examine the present set up and to try to find where the fault lies. In the existing

set up three authorities are responsible for the medical education, namely :

1. Bangladesh Medical Council
2. Universities
3. Government

The Bangladesh Medical Council decides the standard of medical education by approving the curricula and qualifications and standards of teachers in different subjects. They also are responsible for inspecting the institutions, the method and standard of professional examinations to recognise and approve the institutions to ensure that their professional teaching, training and examination are upto the standard set by the council whereupon the diploma & degrees conferred by these institutions through the respective Universities so that such degrees may be recognised for the purpose of registration. The statutory function of this body is to accord registration to the qualified medical practitioners and all other functions are in effect advisory.

The Universities on the other hand through their respective faculties of medicine adapt the course and curricula in accordance with the principles laid down by the medical council and hold the professional examinations and confer the degrees and diplomas. It is pertinent to point out that the faculties of medicine are composed of medical teachers only and the University academic council, syndicate or senate do not interfere with their function except giving routine approval according to University regulations.

The Government is solely responsible for the administrative and financial management of all the medical institutions and co-ordinate the functions of council and the Universities. Appointment, promotion and transfer, administration of the medical institutions and their attached hospitals, appointment of hospital staff, planning and development of those institutions are

the sole responsibilities of the Government managed through the Ministry of Health and its directorate.

Postgraduate education and training is provided by the Institute of Postgraduate Medicine and Research. The course and curricula are decided by the College of Physicians and Surgeons of Bangladesh and the Faculty of Postgraduate Medicine of University of Dacca who grant different degrees and diplomas on the examination conducted by IPGMR. But the overall management, both administrative and financial of the IPGMR and attached hospitals remain the sole responsibility of the Government.

Consequently it is evident that there is no interference from outside in the determination of course, examination and conferring of degrees and diplomas. Under the present set up although the academic control is vested in the Universities there is no interference from the non-medicals and non-professionals.

Then where lies the fault which is sought to be remedied by the establishment of a medical University ?

In my opinion the first major defect is the absence of whole time clinical professors in the medical colleges. At present the professors of clinical subjects are part time in the true sense. Major part of their times are devoted to their own private practice. Probably their employee, the Government has given them this facility in view of the fact that they cannot be compensated adequately by their salaries and also the absence of fringe benefits and power and status enjoyed by other ranks in different services.

Secondly, the hospitals attached to medical colleges and IPGMR are being utility hospitals rather than teaching hospitals resulting in admission of cases not conducive to teaching and training. Besides, the chronic shortage of teachers and staff, teaching facilities, want of equipments, shortage of medicines, inadequacy of laboratories, library, accomodation

for students and staff and host of other deficiencies are well known and accepted facts. In the past, medical colleges were opened in places like Barisal and Rangpur on political consideration rather than expediency resulting in lamentable shortage of staff even in the established institutions.

If we want to open a Medical University to-day, we shall have to depend on the available manpower and resources and have to draw on the resources of these institutes which are far from self sufficient.

Will the magic name of Medical University be sufficient to fulfil our aspirations by the same available people who have failed to run the medical colleges for the reasons enumerated above? The answer must be an emphatic "No".

If we analyse the factors discussed above, we find that the failure to discharge the responsibilities vested in the Government which in turn is dictated by an outmoded, impractical arrogant bureaucracy running an over centralised administrative set up, is the root cause of our present failure.

Under the circumstances, if we want to establish a Medical University, we must ensure the fundamental change which will bring a fully autonomous body into existence with the full powers to hire and fire and transfer its staff under its own service condition. The medical institutions and the attached hospitals must be brought under its full administrative control. Since this University will be established at Dacca, an expensive and large administrative set up has to be brought into being to bring under its fold 8 medical colleges scattered all over the country. In effect the defects and complications of one centralised administration now run by the Government will merely pass on the proposed university administration without solving any problem.

In the light of above, It is our considered opinion that medical education and training can be satisfactorily conducted

under the existing academic control of the universities through their respective medical faculties.

The inherent weakness of the Government controlled administration discussed above can be solved by turning the medical institutions and attached hospitals into fully autonomous bodies under the control of a Board of Management. These management board will be composed of representatives of teaching staff, public representatives, Government representatives, representatives of medical and legal professions, representatives of chamber of commerce, journalists and if necessary medical students. These bodies will appoint whole time professors for their respective institutions according to their needs to head the related Departments. Under their control the management board will appoint some part time teachers who will be designated as Consultants/Specialists. The head of the institution will be rotatory from amongst the full time professors. There will be no transfer from one board of management to another board unless the teachers resign from their institutions. This will do away with all the complications and corruptions surrounding the transfer of teachers. The Government role will be providing funds for the capital, revenue and development budget of these institutions and arrange for necessary audit. The basis of grant may be determined by a body somewhat on the line of University grants commission. We firmly believe that granting full autonomy to these institutions can bring about successful medical education policy.

The above policy should also apply to the Institute of Post-Graduate Medicine and Research. There is no point in duplicating the functions of College of Physicians and Surgeons for awarding postgraduate degrees and diplomas by creating a separate university—leaving aside the factory of additional cost that it will entail. One pertinent question that may be raised

is about the maintenance of uniformity of standard of education among the different autonomous medical institutions. The problem can be easily solved without incurring additional expenditure if a Central Examining Authority is formed to conduct the professional examinations consisting of representatives of medical faculties of different universities, representatives of College of Physicians and Surgeons and the representative from medical council. This authority will conduct the examination centrally maintaining an uniform standard.

It will not be irrelevant to mention another fact which is vitally important for the improvement of medical education. In the coming years the Government is planning to increase the scope of health care and public health substantially through its rural health centre schemes and Integrated Rural Development Programme. If the big hospitals are handed over to the autonomous medical colleges, the Government of necessity will have to increase the number of beds in the subdivisional and district hospitals for the basic health care and the emphasis on preventive medicine will tell upon the resources of the Ministry of Health. In this perspective I would request the planners and specialists to consider whether it would be more expedient to hand over the responsibility of medical education to the Ministry of Education. It must be pointed out that all other technical educational institutions of our country are run by the Ministry of Education as it is run in other advanced countries like UK, USA, In addition to medical education. I think this proposal merits serious consideration.

In conclusion

1. We do not find any justification for establishing a monodisciplined Medical University incurring so much expenditure without ensuring corresponding benefit.

2. For the overall improvement of the standard of medical education all the medical colleges including the IPGMR should be made autonomous with full financial and administrative control appointing full time professors and under the academic control of existing universities through the respective medical faculties.
3. The uniformity of standard should be maintained by a Central Examining Authority.

Finally, I would appeal to the good sense of all concerned to examine the issue without any bias or emotion. Let us not add to the tangled web of many problems which are eating our vitals. Indeed this issue is so important that it merits a national debate to be organised by the Government.

(Published in the Daily Ittefaq on 9.9.76)

MESSAGES

V. T. H. Gunaratne, Regional Director, WHO

July, 1972

Dear Dr. Islam,

It was indeed a great pleasure and privilege to be received by you on my visit to the Institute of Post-Graduate Medicine and to discuss with you its activities.

Though my visit was unavoidably brief, I have no hesitation in telling you that I carried away with me an excellent impression of both the present and potential value of the Institute. You and your colleagues have every reason to be proud of the inspiration you have provided in its formative years and I am sure others will increasingly have reason to be grateful to you as the benefits of its teaching spread in ever-widening circles.

With my best wishes for continuing success.

Yours sincerely,
V. T. H. Gunaratne,
FRCP, DPH
Regional Director, WHO

Moulana Abdul Hamid Khan Bhashani

I have been admitted twice in the P. G. Hospital for treatment of various ailments. During my stay I had the opportunity of experiencing the sincere services rendered by the doctors, nurses and other staffs of the hospital equally to all patients both rich and poor. I pray to Almighty Allah for the prosperity of this hospital. I would specially request the Govt. of Bangladesh for making overall improvement of the hospital as early as possible. This will be of great benefit to the 75 million people of Bangladesh.

Abdul Hamid Khan Bhashani
12.3.73

**President Abu Sadat Mohammad Sayem
on the occasion of Second re-union 1975-76**

I am glad to learn that Institute of Postgraduate Medicine and Research is going to hold the Annual Scientific Seminar.

I hope this seminar will find out ways and means for over all improvement of health care, so that this comes within easy reach of the people.

I wish the seminar a success.

Abu Sadat Mohammad Sayem
President,
People's Republic of Bangladesh

**Major General Ziaur Rahman
on the occasion of 3rd re-union 1976-77**

I am very happy to learn that the Institute of Post-Graduate Medicine and Research, Dacca is holding its Annual Scientific Seminar and re-union on the 11th and 12th February, 1977.

The Institute has undoubtedly a vital role to play for the growth and development of Postgraduate Medical Education in the country. I hope while offering Postgraduate medical qualifications and conducting research works our doctors shall keep in mind the need and resources of the country. Our system of medical education has to be developed in keeping with our problems and our researches are to be primarily directed towards the solution of these problems.

I hope this sort of happy re-union with scientific discussions will bring out easy, economic and effective method of treatment within the reach of vast majority of our population.

I wish the conference every success.

Major-General Ziaur Rahman
Chief of the Army Staff

Rear Admiral M. H. Khan

I am extremely happy to know that the Third Re-union Festival and Annual Scientific Seminar of the Institute of Post-Graduate Medicine and Research is being held on 11th and 12th of this month.

The Institute has already built up a good tradition in providing better and modern medical treatment to patients and imparting advanced professional training to the doctors.

I hope the ensuing Seminar will enable our doctors to exchange their experiences and their deliberations will lead to the improvement and expansion of medical facilities in the country.

I wish the Re-Union and the Seminar all success.

Rear Admiral M.H. Khan
Chief of the Naval Staff &
Deputy Chief Martial Law Administrator

Air Vice Marshal A. G. Mahmud

I am happy to learn that Institute of Postgraduate Medicine and Research Bangladesh is holding its Annual Scientific Seminar and the Third Re-union on the 11th and 12th February, 1977.

The Institute, since its inception has made a significant contribution in the field of Medical Education and Research in Bangladesh. I am confident that the present seminar and Re-union will be an appropriate forum in which the experts in the profession can profitably exchange their views and deliberations will go a long way to find out solution for the suffering humanity of our nation.

I wish the Seminar and the Re-union a grand success.

Air Vice Marshal A. G. Mahmud
Deputy Chief Martial Law Administrator
Chief of Air Staff

Dr. M. Ibrahim
on the occasion of 3rd re-union 1976-77

It gives me great pleasure to learn that the Institute of Postgraduate Medicine and Research is holding its Annual Scientific Seminar and the Third Re-union on 11th & 12th February, 1977.

The Institute has been responsible for producing teachers of various disciplines through persistent efforts of well organised courses, both for case work and research dissertations based on rich local clinical materials. This national Institute, I sincerely feel, will in course of time fulfil the unmet need of the country, in the field of health manpower.

The organization of seminars is an integral part of Postgraduate Education and I am confident that this annual seminar will reflect, as in previous years, the new and continuing advances in medicine during its deliberations.

I wish the re-union and the seminar all success.

Dr. M. Ibrahim
President,
College of Physicians & Surgeons
of Bangladesh

EXAMINER'S REPORT

The theoretical standard of the candidates, as judged by the paper that I marked, was entirely satisfactory.

The clinical examination was well arranged and a good variety of important clinical problems was presented by the patients who were the subjects. The standard of clinical knowledge was good and was evidence of excellent post-graduate training.

The practical examination would be improved, in my opinion, if it included not only X-rays and ECGs but also pathological and biochemical reports, and blood films and bone - marrow smears of common and important conditions such as iron-deficiency anaemia, various types of leukaemia, etc.

The viva-voce examination appeared to be entirely satisfactory and the standard of the candidates was good.

I consider that the case reports should not be an integral part of the Final Examination but should be approved by the Professors of Medicine at any time during the post-graduate students course. On reading the case reports, I gained an excellent opinion of the variety of clinical conditions seen by the postgraduate students and I found the standard of presentation to be excellent.

S. C. TRUELOVE
Nuffield Deptt. of Medicine
University of Oxford

OUR POSTGRADUATE QUALIFIED DOCTORS

FCPS (MEDICINE)

1968

1. Dr. Mohd. Nasiruddin
2. „ Abdur Rouf Bhuiyan
3. „ Muhammad Ishaque
4. „ Md. Anowerul Islam

1969

5. Dr. Md. Tahir
6. „ Md. Mahbub Kamal Chowdhury
7. „ Abu Zafar Mohammad Mujibul Haque

1970

8. Dr. Abdul Karim Mollah
9. „ Abul Kalam Azad Khan
10. „ Shamsuddin Ahmed
11. „ Md. Sanaullah
12. „ Mrs. Hajera Mahtab
13. „ Roqun Uddin Ahmed Choudhury
14. „ A. F. M. Siddiquir Rahman

1971

15. Dr. A. K. S. M. Mahmudul Haq
16. „ Md. Mozharul Mannan

1972

17. Dr. Md. Aftabuzzaman
18. „ A. K. M. Mosleh Uddin

1973

19. Dr. Md. Sadequzzaman
20. „ Alamgir Mohiuddin Kabir
21. „ Md. Abdul Latif
22. „ Md. Nasimuddin

1974

23. Dr. Md. Shahidullah
24. „ Md. Nuruzzaman
25. „ Md. Azizul Islam
26. „ K. M. H. S. Serajul Haque
27. „ Md. Harun-er-Rashid
28. „ Md. Nausher Ali
29. „ Muhammad Shamsul Alam

1975

30. Dr. Firdous Ara Julaikhatul Janan
31. „ Mahmud Hasan
(Ashab Gold medalist)*
32. „ Md. Jalaluddin
33. „ Probhakar Purkayastha
34. „ Md. Taibur Rahman

1976

35. Dr. Md. Fazlul Hoque
36. „ Tofayel Ahmed
37. „ Mohammad Abdul Latif Mian
38. „ Mohammad Shahid Uddin Ahmed
39. „ Md. Abdul Latif Miah
40. „ Ranajit Kumar Shaha

1977

41. Dr. Md. Abdul Ghani
42. „ Md. Sofiullah
43. „ Md. Abdul Mobin Khan

1978

44. Dr. Abduz Zaher
45. „ Md. Zahangir Kabir
46. „ Mujibur Rahman
47. „ Mohammad Azizur Rahman

* A Gold medal instituted by Prof. N. Islam, Director, IPGMR to commemorate his brother Md. Ashab

FCPS (PAEDIATRICS)

1972

1. Dr. Md. Nurul Islam

1974

2. Dr. Md. Abdul Hamid Sheikh
3. „ Md. Fazlul Haque Nazir

1976

4. Dr. Nazmun Nahar

1977

5. Dr. Md. Hamidur Rahman

1978

6. Dr. Chowdhury Badruddin Mahmood

FCPS (SURGERY)

1968

1. Dr. Md. Ruhul Amin

1969

2. Dr. A.H. M. Ahsanullah
3. „ Md. Muazzam Hossain
4. „ Md. Shahidullah

1970

5. Dr. Abul Khair Badrudduza
6. „ Mahmudul Hasan Jamaly
7. „ Md. Humayun Kabir

1971

8. Dr. Shamsuddin Ahmed
9. „ M. Nabi Alam Khan

1972

10. Dr. Abu Nasar Md. Atai Rabbi
11. „ Md. Hyder Ali Talukder

1973

12. Dr. Md. Abdul Hadi
13. „ Md. Salek Talukder
14. „ Md. Samaruddin Ahmed
15. „ Md. Abdul Awal
16. „ Md. Arshed Ali

1974

17. Dr. Abdus Shakur
18. „ Rashid-e Mahbub
19. „ Dewan Eklmur Raza Choudhury
20. „ Md. Abdur Rashid
21. „ Luthfar Rahman Choudhury

1975

22. Dr. Sitara Mirza
23. „ Syed Luqueman Ali
24. „ Md. Shelim Bhuiyan

1976

25. Dr. Md. Haruner Rashid
26. „ Md. Maqbul Hossain
27. „ Md. Delwar Hossain
28. „ (Lt. Col.) M. Rafiqul Bari

1977

29. Dr. A. K. M. Rezaul Islam
30. „ Abdul Bari
31. „ A. K. Md. Abdul Hakim Akan
32. „ Mohammad Mofizul Islam
33. „ Sitangshu Bikash Barua

FCPS(OBS & GYN)

1968

1. Dr. Md. Abdul Bayes Bhuiyan

1969

2. Dr. A. K. M. Anwarul Azim

1973

3. Dr. Mrs. Jahanara Begum

1974

4. Dr. Monowara Amina Begum

1975

5. Dr. Mrs. Sultana Jahan
6. „ A. K. M. Shahabuddin

1978

7. Dr. Rowson Ara Khanam
8. „ Latifa Shamsuddin

FCPS (OPHTHALMOLOGY)

1969

1. Dr. Md. Fazlul Haque

1973

2. Dr. A. K. M. Korshed Alam Choudhury

1974

3. Dr. Ruhul Amin

1975

4. Dr. Saleh Uddin

1977

5. Dr. Abul Kashem Mohammad Serajuddowla

1978

6. Dr. Md. Abdul Halim Khan

MCPS (MEDICINE)

1. Dr. (Col.) Abdur Rashid
2. „ (Lt. Col.) Hamidur Rahman
3. „ (Lt. Col.) Mohd. Mozammel Hossain
4. „ (Major) A. K. M. Shaffullah Khan
5. „ (Capt.) Nazrul Islam
6. „ (Major) Mahtabul Islam

1969

7. Dr. Abdul Quayum Siddique

1973

8. Dr. Abu Zafar Md. Hyder

1974

9. Dr. (Lt. Col.) Abdul Muzaffar Khan
10. „ Md. Nuruzzaman

1975

11. Dr. Joarder Abdur Rashid
12. „ (Major) Anwar Hossain

1976

13. Dr. Md. Ghulam Rabbani
14. „ A. N. M. Nazrul Islam
15. „ Ziauddin Ahmed
16. „ Muhammad Mujibur Rahman

1977

17. Dr. Kazi Abdul Halim
18. „ Md. Musharaf Hussain
19. „ Ahmed Motiullah Azmi

1978

20. Dr. A. K. M. Azizur Rahman
21. „ Makhduma Nargis
22. „ Md. Abdul Moyeed Siddiquei
23. „ A. K. M. Azizur Rahman

MCPS (PAEDIATRICS)

1975

1. Dr. Basu Dev Shaha

1976

2. Dr. Muhammad Forhad Ali Mian

1977

3. Dr. Monowara Khanum
4. „ Mrs. Sultana Khanum
5. „ Md. Safiur Rahman

1978

6. Dr. A.K.M. Abdul Hafiz

MCPS(SURGERY)

1975

1. Dr. A. S. Md. Habibur Rahman

1976

2. Dr. Akhtaruzzaman
3. „ M. Sharif Ahmed
4. „ Waheedul Islam
5. „ A. K. M. Mahbubur Rahman
6. „ (Major) Humayun Kabir Md. Gholam Mortoza

1977

7. Dr. Md. Nazmul Islam
8. „ Md. Anwarul Haq

1978

9. Dr. (Major) M. Badar Ahmed
10. „ Abul Hasnat Hafizuddin Ahmed

MCPS (OBS & GYN)

1976

1. Dr. Md. Delwar Uddin
2. „ Mrs. Noorjahan Begum
3. „ Asia Akhtar Khatun

1977

4. Dr. Jalal Ahmed
5. „ Jahanara Begum
6. „ Niranjan Mitra
7. „ Sultana Wahed Choudhury

1978

8. Dr. Mahmuda Begum
9. „ Syeda Farhath Akhtar
10. „ Halida Hanum Akhtar
11. „ Begum Humaira Khanum
12. „ Bela Begum

MCPS (OPHTHALMOLOGY)

1975

1. Dr. Saifuddin Mohammad Emdadul Islam

1976

2. Dr. Rokeya Begum

1977

3. Dr. Mallik Abdul Wahed

1978

4. Dr. Quamrul Alam

MCPS (RADIOLOGY)

1. Dr. (Col.) Ahmed Fazlul Halim
2. „ (Lt.Col.) Mohd. Loquman Molla
3. „ (Lt.Col.) Shahabuddin Ahmed

4. Dr. (Col.) A.M. Chowdhury
5. „ (Lt. Col.) S.M. Khalilur Rahman
6. „ (Major) Shah Ashraf Hossain

1976

7. Dr. (Capt.) Muhammad Abu Bakar Siddiquee

1978

8. Dr. Md. Abdul Mazid Siddiqui

MCPS (RADIOTHERAPY)

1978

1. Dr. Md. Abdul Majid

MCPS (ANAESTHESIOLOGY)

1. Dr. (Col.) Abdur Rahman
2. „ (Lt. Col.) Abul Hossain
3. „ (Major) Quazi Delwar Hossain

1970

4. Dr. Md. Shafiqur Rasul

1976

5. Dr. Md. Khalilur Rahman
6. „ (Capt.) Md. Amzad Hussain

1977

7. Dr. Abdur Rahim

1978

8. Dr. Mohamamd Matiur Rahman

MCPS (ENT DISEASES)

1970

1. Dr. A. T. M. Abdul Jabbar

1971

2. Dr. Mohammad Hossain

1973

3. Dr. Chowdhury Mosharef Hossain

1974

4. Dr. Sk. M. Kamaluddin Ahmed
5. „ Mirza Akmal Hossain

1975

6. Dr. Md. Asadul Haq Khan

1976

7. Dr. Md. Hamidur Rashid Chowdhury
8. „ Pranab Kumar Aich

1977

9. Dr. Mohammed Nazmul Ahsan
10. „ Md. Habibur Rahman
11. „ Lalit Kumar Datta

MCPS (CLINICAL PATHOLOGY)

1. Dr. (Major) Abdul Wahab

1973

2. Dr. Md. Ahmed Kabir

1975

3. Dr. (Major) Md. Abul Quasem Chowdhury

1976

4. Dr. (Major) A. S. M. Matiur Rahman

MSc/M Phil (ANATOMY)

1968

1. Dr. M. H. Mullick

1972

2. Dr. Dwijendra Chandra Dey

1973

3. Dr. Subarna Rakshit
4. „ Md. Abdul Hai Fakir
5. „ Md. Shahidullah

1975

6. Dr. Haruna-ar-Rashid

1977

7. Dr. Gulshan Ara

1978

8. Dr. Md. Waliul Bari

MSc/MPhil (PHYSIOLOGY)

1969

1. Dr. Mosharraf Hossain Mollah

1971

2. Dr. Atia Banu

1974

3. Dr. Md. Muslim Uddin Kabiraj
4. „ A. B. M. Ahsan Ullah

1978

5. Dr. Majbun Ara Begum

MPhil (PHARMACOLOGY)

1972

1. Dr. Pradip Ranjan Sen Gupta

1973

2. Dr. A. T. M. Mobarak Ali

1974

3. Dr. A.K.M. Nurul Anwar

1975

4. Dr. Md. Abdul Maleque

1977

5. Dr. Md. Nurul Islam

MSc/MPhil (PATHOLOGY)

1968

1. Dr. A. T. M. Fazlur Rashid
2. „ Sheikh Manirul Haque

1971

3. Dr. Farrouque Anawarul Azim
4. „ Syed Abu Taher

1973

5. Dr. A. J. E. Nahar Rahman

1974

6. Dr. Golam Kibrla
7. „ Abdul Mannan Sikder

1977

8. Dr. Md. Masudur Rahman
Talukder

9. Dr. Kamalendu Biswas
10. „ Hamida Begum
11. „ Amanullah

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12. Dr. Md. Munirul Alam
13. „ Fouzia Akhtar Banu

MSc/MPhil (MICROBIOLOGY)

1968

1. Dr. Md. Nazrul Islam
2. „ Farida Huq

1969

3. Dr. Abu Ahmed
4. „ S. K. Ruhul Hassin

1971

5. Dr. Sayed Anwar-ul Alam

1973

6. Dr. Nurun Nahar Begum

1974

7. Dr. Tehmina Hussain

1976

8. Dr. Shaikh Mohammad Abdur Razzaque

M Sc/MPhil (BIOCHEMISTRY)

1968

1. Dr. Md. Abdul Jalil Miah

1973

2. Dr. Md. Suhrab Ali

1974

3. Dr. Md. Abdul Majid

1975

4. Dr. Subhagata Choudhury

1978

5. Dr. Abdul Kadir Khan

MS (ORTHOPAEDICS)

1976

1. Dr. Md. Salek Talukder
2. „ Md. Abdus Samad Sheikh
3. „ Md. Manzurul Islam
4. „ Md. Faruk Reza Aulad

1978

5. Dr. Md. Mokhter Kamal Chowdhury

DMRD

1970

1. Dr. Md. Siddiqui Islam
2. „ N. M. Murshiduzzaman

1972

3. Dr. Waliur Rahman
4. „ Abdur Razzaque
5. „ Md. Habibur Rahman
6. „ Ashfaquddin Ahmed

7. „ A. S. Q. M. Sadeque
8. „ Md. Abdul Hai
9. „ Md. Moqubul Hossain
10. „ A. S. Sharfuddin Ahmed
11. „ Siper Ahmed

1973

12. Dr. Md. Abdul Khaleque
13. „ Md. Muzaffarul Islam Mondal
14. „ Md. Mozammel Hoque

1974

15. Dr. Md. Abdur Razzaque
16. „ A. T. M. Yusuf
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18. „ Md. Kamaruzzaman

1975

19. Dr. A. H. M. Mahmud Kabir
20. „ Md. Abul Bashar

1976

21. Dr. Abdul Matin Khan
22. „ Md. Shafiqul Islam
23. „ Md. Ghulam Murshed Alam
24. „ Syed Mizanur Rahman
25. „ Nalini Ranjan Datta
26. „ Md. Eakub Ali Sharif

1977

27. Dr. (Major) Muhammad Abu Bakar Siddiquee
28. „ Syed Abdul Matin
29. „ A. K. M. Shamsuddin

1978

30. Dr. Md. Abdul Hakim Miah
31. „ Shah Zakir Hossein

32. Dr. Md. Musharaf Hossain
33. „ A. F. M. Mozharul Islam

DMRT

1969

1. Dr. A. M. Zafar Sadeque
2. „ Md. Abdur Rahim

1970

3. Dr. Peter Macfield
4. „ Samir Kumar Sarma

1972

5. Dr. Syed Masihul Hasan
6. „ Md. Abdul Hai
7. „ Md. Amir Hossain
8. „ Quazi Ataharuddin Ahmed
9. „ Nazrul Islam Miah
10. „ Abdur Rab Bhuiyan
11. „ Fazle-e-Elahi

1974

12. Dr. Abdul Ghanl

DO

1973

1. Dr. Syed Modasser Ali
2. „ Md. Anwarul Islam

1974

3. Dr. Md. Nurul islam
4. „ A.S.M. Azharul Islam

1975

5. Dr. Md. Abdul Muttalib
6. „ Md. Moshahab Hossain

1976

7. Dr. Rokeya Begum

1977

8. Dr. Md. Nurul Ambia Chowdhury
9. Dr. Md. Harun-or-Rashid

1978

10. Dr. Fazlur Rahman

DLO

1972

1. Dr. Md. Rakibur Reza
2. „ Mohd. Hossain
3. „ Q.K.M. Nazmul Huda

1973

4. Dr. A.K.M. Shahabuddin

1975

5. Dr. Masudur Rahman Khan

1976

6. Dr. Ranjit Kumar Bhowmic
7. „ Alauddin Ahmed
8. „ Mohd. Solaiman

DA

1975

1. Dr. Fukhrun Nisa
2. „ Dilip Kumar Das

1977

3. Dr. Habibun Nessa Khanam

1978

4. Dr. Md. Abdul Halim Mia
5. „ Sujit Kumar Bhadra
6. „ Noor Jahan Khanam

DGO

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1. Dr. Dilafroz Rahman

1976

2. Dr. Suraiya Rahman

1977

3. Dr. Lailun Nahar Basunia

1978

4. Dr. Anwara Khatun

DPH

1973

1. Dr. Md. Abdul Khaleque Miah

1974

2. Dr. Md. Anwar Hossain
3. „ Jahan Ara Begum
4. „ Raisa Begum
5. „ Shah Mohd. Keramat Ali

1975

6. Dr. M. Salimullah
7. „ Md. Abdul Hakim Miah
8. „ A.K.M. Anwaruddin Bhuiyan

1976

9. Dr. Syed Altafur Rahman

- | | |
|---------------------------------------|------------------------------------|
| 10. Dr. Md. Abdul Khalepue Barbhuiyan | 6. Dr. Hem Narsingh Shakya (Nepal) |
| 11. „ Haripoda Ghosh | |
| 12. „ Md. Mohiuddin Ahmed | 1976 |
| 13. „ Khairul Basher | 7. Dr. Azizul Karim |
| 14. „ Abu Ahmed Khan | 8. „ Ahmed Matiullah Azmi |
| 15. „ Shafique Uddin Ahmed | |
| 16. „ Ali Ahmed | 1977 |
| 17. „ Md. Shamsul Haque | 9. Dr. A. F. Maqbul Ahmed |
| 18. „ Md. Sanaullah | 10. „ Md. Shafiuddin |

1977

19. Dr. Md. Falahuzzman Khan
10. „ Bertin Guda
21. „ Iftekaruddin Ahme
22. „ Matiullah
23. „ A. H. Md. Azizul Islam Chowdhury
24. „ Subrata Chakma
25. „ Md. Moklesur Rahman

1978

26. Dr. Md. Shahjada Chowdhury
27. „ Mahmudur Rahman
28. „ Mamunur Rashid
29. „ Md. Zakariya Hussain
30. „ Khairun Nahar

DTM&H

1972

1. Dr. Gauri Sankar Datta
2. „ Niherendu Talukdar

1973

3. Dr. Md. Habibur Rahman
4. „ Shishir Kumar Mozumder

1974

5. Dr. Md. Mosharraf Hossain

DBS&T

1974

1. Dr. Mosharraf Hossain
2. „ Md. Abdul Kader
3. „ A. S. M. Sultan

1975

4. Dr. Abu Zayed Mohd. Abdullah

1976

5. Dr. Nurul Islam Khan
6. „ Md. Taslimuddin
7. „ Chandra Kanta Nandi

1978

8. Dr. Rejina Akhtar
9. „ Hosne Ara Begum
10. „ Muhammad Ansarul Islam

DCH

1974

1. Dr. Basu Dev Shaha

1975

2. Dr. Abdur Rob

1977

3. Dr. Md. Abdul Hannan Miah

1978

4. Dr. Balg Abdullah Al-Masood
5. „ Abdul Gaffar Chowdhury

DTCD

1974

1. Dr. Abu Mohd. Fazlul Kabir
2. „ A.S.M. Jainul Haque
3. „ Ataur Rahman Chowdhury
4. „ Sanhanendu Bikash Datta

1975

5. Dr. A. K. M. Rahimuddin Bhuiyan
6. „ Abu Mohd. Imanuzzaman
7. „ Md. Khorshedul Alam
8. „ Malik Abdullah Harun

1977

9. Dr. Md. Taheruddin
10. „ Soherab Ali

DD/DDV

1970

1. Dr. Salehuddin Ahmed
2. „ Hasan Mohd. Khan

1971

3. Dr. Abdul Wadud
4. „ A. S. Mofrehuddin

1972

5. Dr. A.H.M. Mainuddin
6. „ A.Z.M. Maidul Islam

1973

7. Dr. Md. Shafiqur Rahman
8. „ Md. Moshin

1974

9. Dr. A.K.M. Shahidul Islam
10. „ Md. Abdul Awal

975

11. Dr. Md. Mozammel Huq
12. „ J.B. Md. Zafar Sadeque
13. „ Md. Nurul Hussain

1976

14. Dr. Salehuddin Ahmed
15. „ Md. Mojibul Hoque
16. „ Niranjana Kumar Paul

1977

17. Dr. Chowdhury Mohd. Abdul Majid

1978

18. Dr. Abu Muzaffar Abdulah-ei Muhaimin

D. ORTHO

1976

1. Dr. Aminul Hasan
2. „ Khandaker Shahidul Azim
3. „ Md. Abdul Hannan

1977

4. Dr. Ayjaz Ahmed Khan

LIST OF TEACHING STAFF

PROFESSORS

N. Islam, MB(Cal), TDD(Wales), FRCP(Edin), FCPS(Pk), FCCP(USA)
FRCP (Lond), Director and Professor of Medicine.

M. R. Khan MBBS(Cal), DTM&H(Eng), DCH(Lond), FRCP(Edin) FCPS,
Joint Director & Professor of Paediatrics(till 8.8.78)

K. Ahmad, MBBS(Dac), PhD(Glas), FCPS(Pk), Joint Director and Professor of
Pharmacology from 8.8.78

S. A. Ashraf, MBBS(Cal), MS(Cal), FRCS(Edin), FRCS(Eng),
FCPS(Bd), Cardio-Vascular Surgery.

M. A. Bari, MBBS(Cal), MSc(Kar), PhD(Indiana), FCPS(Bd), Anatomy.

S. G. M. Chowdhury, MBBS(Dac), MRCP(Lond), MRCP(Glas)
FCPS (Bd), Medicine.

T. A. Chowdhury, MBBS(Dac), FRCS(Edin), FRCOG(Lond), FCPS(Bd),
Obstetrics & Gynaecology.

A. K. M. Nazimuddowla Chowdhury, MBBS(Dac), DPM(Lond),
MRC Psych(UK), FCPS(Bd), Psychiatry.

A. M. Shamsul Huda, MBBS(Dac), M.Sc.(Kar), PhD(Lond), FCPS(Bd),
Biochemistry & Nutrition.

K. M. Nazrul Islam, MBBS(Dac), MPhil(Kar), FCPS(Bd), Pathology.

M. A. Jalil, MB(Cal), DO(Lond), FRCS(Lond), FCPS(Bd),
Ophthalmology.

A. A. Khan, MB(Cal), DLO(Lond), FRCS(Edin), FRCS(Glas),
FCPS(Bd), ENT Diseases.

M. Kasimuddin, MSc(Dac), PhD(Liverpool), MBBS (Dac),
Biochemistry.

Maleka Khatoon, MBBS(Dac), DCH(Dub. Univ.), MRCP(Glas), MRCP(Lond),
Paediatrics. ai.

M. A. Mannan, MBBS(Dac), MRCP(Glas), FCPS(Bd),
Neurology.

K. M. Rahman, MBBS (Dac), MSc(Kar), PhD(Indiana), FCPS(Bd),
Microbiology.

M. Rahman, MBBS(Dac), PhD(Lond), FCPS(Bd), Blood Transfusion.

S. A. Sobhan, BSc, MB(Cal), DMRD(Lond), FCPS(Pk), FCCP, Radiology.

M. Zaman, MBBS(Dac), FRCS(Edin), FCPS(Bd), Surgery.

M. N. Zaman MBBS(Dac), MSc (Kar), PhD (Manchester) FCPS(Bd), Physiology

ASSOCIATE PROFESSORS

Rashiduddin Ahmed, MBBS(Dac), FRCS(Eng), Neuro-Surgery.

M.N. Alam, MBBS(Dac), MRCP(UK), Medicine.

A.H.M. Ahsanullah, MBBS(Dac), FCPS(Dac), Neuro-Surgery.

A. K. Azad Khan, MBBS(Dac), FCPS (Pk), DPhil(Oxf), Medicine.

S.N. Samad Chowdhury, MBBS(Dac), DA(Lond), Anaesthesiology.

A.S.M. Ilias Hussain, MBBS(Dac), TDD(Pb), D. Phys. Med. RCP Lond, RCS (Eng), Physical Medicine.

Md. Nazrul Islam, MBBS(Dac), MSc(Dac), PhD(Eng), Virology.

Hasan Md. Khan, MBBS(Dac), DD(Dac), Speciality Trained(West Germany), Dermatology.

M.A. Khasru, MBBS(Dac), DBact(Lond), Microbiology.

Shahla Khatun, MBBS(Dac), MRCOG (Lond), Gynaecology & Obstetrics.

M. Abdul Quder, MBBS (Dac), MRCP(Lond), DCH(Glas) DTM&H(Eng) Paediatrics

Muksuder Rahman, MBBS(Dac), DMRD(Pb), DMRD (Lond), Radiology.

Matiur Rahman, MBBS(Dac), MRCP(UK), Nephrology

M A. Rashid, MBBS(Dac), MRCPPath(UK), Haematology.

Abu Zafar, MBBS(Dac), MRCP(UK), Cardiology.

ASSISTANT PROFESSORS

Md. Suhrab Ali, MBBS (Dac), M. Phil (Dac), Biochemistry.

F.A. Azim, MBBS(Dac), MPhil(Dac), DCP.D.Path(UK), Cytology

Nurun Nahar Begum, MBBS (Dac), MPhil(Dac), Trained in Mycology (UK), Mycology.

Subhagata Chowdhury, MBBS (Dac), MPhil (Dac), Biochemistry.

M.A. Ghani, MBBS (Dac), FCPS (Bd) Medicine (Resident Physician).

S.K. Ruhul Hossain, MBBS(Dac), MPhil (Dac), Clinical Pathology.

Md. Mafizul Islam, MBBS (Dac), FCPS (Bd), Surgery (Resident Surgeon).

Firdous Ara J. Janan, MBBS (Dac), FCPS(Bd), Medicine.

Hajera Mahtab, MBChB, DTM&H, FCPS (Bd)

(Now on deputation to Diabetic Association, Bangladesh)

Sitara Mirza, MBBS(Dac), FCPS(Bd), Surgery.

Nazmun Nahar, MBBS(Dac), FCPS (Bd), Paediatrics.

M.A. Rouf, MBBS (Dac), DBact (Japan), Bacteriology.

M.A. Wadud, MBBS (Dac), PhD (Moscow), Dermatology.

HONORARY PROFESSORS

A Basit, MBBS(Dac) PhD (Lond) FCPS (Bd), FCCP (USA)

A.Q.M. Badruddoza Chowdhury, MBBS (Dac) TDD(Wales) FRCP (Ed).

M.A. Matin, M BB: (Dac) FRCS, DO (Lond) FCPS (Bd)

ON DEPUTATION ABROAD (ENGLAND) FOR ADVANCED STUDIES

Ashfaqueuddin Ahmad, MBBS(Dac), DMRD(Dac)

Asst. Prof. Radiology.

A.K.M. Nurul Anwar, MBBS(Dac), MPhil (Dac)

Asst. Prof. Pharmacology.

Mahmud Hasan, MBBS(Raj), FCPS(Bd).

Asst. Prof. Medicine.

A.J.E. Nahar Rahman, MBBS(Dac), MPhil (Dac)

Asst. Prof. Pathology.

FACULTY OF POSTGRADUATE MEDICAL SCIENCES & RESEARCH

Dean-Prof. N. Islam

- | | | | |
|-----|------------------------------------|--|-------|
| 1. | Prof. M. A. Bari | Professor of Anatomy | IPGMR |
| 2. | „ M. N. Zaman | „ „ Physiology | „ |
| 3. | „ K. Ahmad | „ „ Pharmacology | „ |
| 4. | „ K. M. Nazrul Islam | „ „ Pathology | „ |
| 5. | „ K. M. Rahman | „ „ Microbiology | „ |
| 6. | „ A. M. Shamsul Huda | „ „ Biochemisty & Nutrition, | IPGMR |
| 7. | „ S. G. M. Chowdhury | „ „ Medicine | IPGMR |
| 8. | „ T. A. Chowdhury | „ „ Obs & Gyn | „ |
| 9. | „ S. A. Sobhan | „ „ Radiology | „ |
| 10. | „ S. F. Huq | „ „ Radiotherapy | DMC |
| 11. | „ M. Zaman | „ „ Surgery | IPGMR |
| 12. | „ M. R. Khan | „ „ Paediatric | „ |
| | | (Now Director, Shisu Hospital) | |
| 13. | „ M. A. Jalil | „ „ Ophthalmology | „ |
| 14. | „ A. A. Khan | „ „ ENT diseases | „ |
| 15. | „ A. K. M. Nazimuddowla Chowdhury, | Professor of Psychiatry, | IPGMR |
| 16. | Dr. Hasan Md. Khan, | Associate Professor of Dermatology | „ |
| 17. | Prof. A. Q. M. Nurul Huq, | Director, IDCH | |
| 18. | „ Mujibur Rahman, | Professor of Blood Transfusion & Serology | „ |
| 19. | „ R. J. Garst, | Honorary Professor, Orthopaedic Hospital | |
| 20. | „ A. K. M. Kafiluddin, | Professor of Epidemiology, IPGMR | |
| | | (Now Director, NIPSOM) | |
| 21. | „ A. Quasem, | Dean of the Faculty of Medicine, D.U. | |
| 22. | „ Abul Hossain, | Principal, SSMC | |
| 23. | „ M.N. Ali, | Principal, MMC. | |
| 24. | „ M. Momtazur Rahman, | Principal, BMC | |
| 25. | „ S. N. Nabi, | Chairman of the Faculty of Chemistry, D.U. | |
| 26. | „ Aminul Islam, | Dean, Faculty of Biological Sciences, D.U. | |
| 27. | Brig. M. R. Chowdhury, | Commanding, AFIP and BT. | |
| 28. | Prof. A. Q. M. B. Chowdhury, | Hon. Prof. Medicine, IPGMR | |
| 29. | „ M. A. Matin, | Hon. Prof. Ophthalmology, IPGMR | |

IPGMR ADMINISTRATIVE STAFF

DIRECTORS

Sir James D. S. Cameron—5th Dec. 1965 to 8th Mar. 1968
Prof. N. Islam—9th Mar. 1968 to...

JOINT DIRECTORS

Prof. N. Islam—5th Dec. '65 to 8th Mar. '68
Prof. M.R. Khan—14th May 1972 to 7th Aug. '78
Prof. K. Ahmad—8th Aug. '78 to...

SUPERINTENDENTS

Mr. M. A. R. shid—1st Oct., 1971 to 4th April, 1972
Mr. A.R. Khan—5th April, 1972 to...

SECRETARIES

ACADEMIC

Mr. M.A. Farah
9th Feb. 1966 to 12th Nov., 77
Mr. A T M Ghulam Rahman
31st May, 1977 to...

HOSPITAL

Mr. M.S. Alam
5th Aug. 1974 to...

ADMINISTRATIVE OFFICER

Mr. B. Rahman—2nd Mar. 1972 to...

ASST. ACCOUNTS OFFICER

Mr. M. A. Majid Khan—2nd Mar. '72 to...

LIBRARIANS

Mr. Zakiuddin Ahmed—March 1972 to Aug. 1974
Mr. M. Jasimuddin—2nd March, 1972 to...

PUBLICATIONS FROM IPGMR

1. Symposium on Post-graduate Medical Education in Pakistan.
—Prof. N. Islam (Editor)
2. Symposium on Medicine 1969—Prof. N. Islam (Editor)
3. Symposium on Industrial Medicine & Rural Health.
—Prof. N. Islam & J. F. Rogiers
4. Post-graduate manual.
5. Theses, Dissertations and Publications
6. Medical Diagnosis & Treatment—Prof. N. Islam
7. Shyastho Sambondhey Kichu Katha—Prof. N. Islam (Editor)

PROGRESS AT A GLANCE

INITIAL		PRESENT
1. Institute located in Dacca University. Arts Building adjoining Dacca Medical college.		Located in its own buildings.
2. Budget—	Tk. 29,00,00	Tk. 95,46,942
3. Full-time teaching staff	10	52
Professor	3	20
Asso. Prof.	7	15
Assistant Prof.	nil	17
4. Number of hospital beds	30	300
5. Course of study	8	30
6. Library		
Books	296 Copies	12,000 Copies
Journals	33 titles	5,000 bound volumes.
		125 titles subscribed.
7. Number of students	33	171
8. Theses	0	35
Dissertations	0	108
Publications	6	106
9. Clinical meeting	0	132
10. Symposium/Seminar	2	52
11. Total No. of Doctors with Postgraduate Qualification	0	396
12. Initial development Scheme		Present development scheme
	Tk. 34,00,000	Tk. 19,52,33,000

PROGRESS OF EXPANSION

(till Sept. 1978)

1. Additional Floor on Main Building :

Complete with accomodation for nurses, doctors and guest rooms. Temporarily Paediatric ward & student nurse have been accomodated.

2. Basic Sciences Building (9 storied)

Almost ready for use. Accomodate Anatomy, Physiology, Pharmacology, Biochemistry, Pathology, Microbiology, Mycology and Virology.

3. South Annexe Building (7 storied)

Construction likely to be completed on 31-1-79

This building comprises Library, Lecture rooms, Residential accomodation for 150 students, Auditorium. Audio-visual deptt., Central Blood Transfusion Service.

4. Residential accomodation for class iii employees (11 storied)

Construction work in progress to accomodate 44 families.

5. Main Hospital Building (11 storied)

Foundation stone already laid.

Construction to begin by mid-October, 1978 to accomodate 600 hospital beds.

6. Construction of class IV Staff Quarter will be started soon to accomodate 66 families.

7. Preliminary sketch plan for Nurses dormitory has been prepared and submitted to PWD.

8. Construction of Doctors Quarter will be taken up during next financial year (1979-80).

POST GRADUATE PATIENTS' WELFARE SOCIETY

This Society was established on the 2nd November, 1972 and was registered on 19th Sept. 1973. Prof. Nurul Islam, Mrs. Anisa Khatun and Mrs. Rokeya Khatun were the sponsors of the Society.

Office bearer and Members of the Executive committee :

	Frist	Present
President :	Prof. Nurul Islam	Prof. Nurul Islam
Vice President :	„ M. A. Matin „ A. Malik	„ N. D. Chowdhury „ A. Malik
General Secretary :	Mrs. Anisa Khatun	Mrs. Anisa Khatun
Joint Secretary :	Mrs. Rokeya Khatun	Mrs. Mavis Sultana
Treasurer. :	Prof. N. D. Chowdhury	Dr. Ahsanullah
Members :	Dr. A. R. Khan Prof. M. R. Khan Prof. Mojibul Huq Dr. Azizur Rahman Dr. A. Quashem Miss E. B. Chowdhury	Dr. A. R. Khan Prof. M. R. Khan Prof. T.A. Chowdhury Prof. M. A. Matin Mrs. Rahmatun Nessa Mrs. Nurun Nahar

Co-opted members :

Mrs. Rahima Khatun
Miss E. B. Chowdhury

Total Number of Patients Helped by the Society till 1977

1. Medicine	...	...	588
2. Blood	...	...	254
3. Passage Fare	...	...	41
4. Clothes	...	...	1120
5. Food	...	...	210
6. Spectacles	...	...	27
7. Crutch	...	...	4

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