## THE JOURNEY OVER THE YEARS

# The Journal Grows: Dr. OP Ghai as Editor from 1973-75

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In his first Editorial, Prof. OP Ghai who took over as Editor in January 1973 noted with satisfaction that 'The *Journal* ranks as one of the foremost ... in India with high academic standards and regular publication. The journal is now financially viable in this period of rising costs and diminishing revenues. Credit for this achievement, to a large measure, is due to the confidence reposed by the members of the Academy in the Editor [1]. He asserted that 'A medical journal is not only a repository of articles for archives, but is also a living medium for communication of information of practical use to the readers. Journal of the professional society reflects the image of the organization through the quality of scientific contributions by the members.'

He urged prospective authors to ensure 'Improved standards and higher levels of excellence .... and in promoting the objectives of the Indian Academy of Pediatrics. My challenge is to make the Journal a *piece de resistance* for the young pediatric residents who will be the members of the Academy in a few years and for practitioners who seek the newest information on pediatric problems, which comprise two-thirds of their practice' [1].

While these thoughts were scribed in an era when there was hardly any talk on impact factor or related indices, it is satisfying that *Indian Pediatrics* today consistently ranks amongst the highest national and regional medical journals with large readership. This accomplishment has chiefly been possible due to the commitment of successive Editors who have worked with as much passion, as their predecessors.

Dr Ghai further suggested that 'Considering the social need of the country, the *Journal* solicits more articles on applied and operational research on delivery of health care to children. These will receive high priority in publication' [1]. The Editor adhered to this policy and a number of publications during his term focused on this important domain. He also appealed to 'contributors to exercise due care in submitting manuscripts. Typographic mistakes should be checked, standard abbreviations

should be used for names of journals and illustrations should be of high quality, capable of good reproduction.' These considerations are valid even today, as members of the Journal Committee spend tireless hours in their effort to improve the content and style of manuscripts submitted to the *Journal*.

One of the first articles in 1973 presents health statistics of the country, with a then population of almost 547 million and infant mortality rate of 140 per 1000 [2]. States like Kerala and Haryana were notable for their lower infant mortality, below 80 per 1000 live births. Our neighbor, Sri Lanka (then Ceylon), already had a rate of 48 in 1967! The same issue carries recommendations of a 'Workshop on Care of Under Five' and meeting their health needs through special clinics [3]. An accompanying Editorial, entitled 'Health planning for children' maintains that 'Progress can be measured only with a clear concept of goals. When translated in terms of child health and welfare, these are not measured by the number of hospital beds for children, outpatient attendance or pediatricians trained, but the health experiences of the children. We should have aimed at a clear reduction of morbidity and mortality in children ..... and for improvement in nutrition and general health' [4]. The high rates of neonatal, infant and child mortality in the country, with marked regional disparities continue to concern pediatricians and health planners even in the 21st century. The current infant mortality rate in India is similar to what Sri Lanka had achieved 4 decades ago.

The Presidential Address by Dr. RS Dayal, at the Annual Conference of the Academy in Trivandrum in 1973, focused on topics that he felt required immediate attention, chiefly the need for an adequate and structured undergraduate Pediatrics curriculum, and enhancing the care of children through School Health Services. He also emphasized the need for operational and disease oriented research [5], views that were echoed by the next President, Dr. BD Patel in Kanpur, who mooted the need for 'action-orientation based programs' and importance of

mass health education [6]. The views of the Government of India regarding health needs for children were addressed in detail by Sh. VC Shukla, then Minister of State for Planning, in the Shantilal Sheth oration during the Annual Meeting in Manipal in 1975 [7].

A number of articles, including by Prof. KK Kaul from Jabalpur, address the importance of imparting quality undergraduate and postgraduate training in Pediatrics [8-11]. These articles call attention to the needs of adequate clinical experience in Pediatrics, case-based learning and the benefits of formative and summative assessment. Articles from pediatricians from countries in south and south-east Asia [12] expressed similar views. Later, a special article by OP Ghai highlighted the pedagogic objectives and specific learning outcomes for postgraduate training in Pediatrics [13]. These articles undoubtedly shaped the evolution of current curriculums, and publication of related resource material, including the IAP Textbook of Pediatrics.

A special January 1975 issue featured the proceedings on three Workshops organized in 1972 by the Nutrition Sub-committee of the Indian Academy of Pediatrics, under the stewardship of PM Shah. The recommendations of the first Workshop on 'Infant foods industry and pediatricians' seem rather anachronistic given the current official relationship of the Academy with the infant food industry, but nevertheless worth reading [14]. The second Workshop addressed the 'Ecology and management of protein calorie malnutrition' including extensive discussions on assessment and grading, epidemiology and management [15]. The final Workshop on 'Care of the under fives' emphasized the aims, activities and benefits of focused and comprehensive care provided by special clinics, a concept pursued in varying measures by subsequent health planners [16]. A monograph on proceedings of these Nutrition Workshops was available for Rs. 10!

Apart from articles on basic health care in the community, there is equal emphasis on the need for ensuring models of high quality hospital care for children with serious illnesses. An editorial underscores that 'academic excellence and optimal care are not exclusive. On the contrary, they are interlinked and interdependent' [17]. The need and requirements for pediatric intensive care units and strategies for neonatal resuscitation [18] was highlighted.

Indian Pediatrics featured a number of excellent, state-of-the art reviews written by eminent physicians and researchers. Of note are reviews on 'Tuberculin test' [19] and 'Mortality due to tuberculosis' [20] by Raj Narain, 'Challenges in diagnosis of rheumatic activity' by

Subimal B Roy [21], 'Central nervous system tuberculosis' by PM Udani [22, 23] and 'Nutritional anemia' by Tripathi [24]. A series of articles, by AK Bhattacharya from the School of Tropical Medicine in Calcutta, on 'Kwashiorkor and marasmus' discuss issues pertaining to etiology and assessment [25], pathological, biochemical and metabolic studies [26], and its management and outcome [27]. Two important articles describe the utility of the abridged Bayley Scale of Infant Development in Indian children [28] and their application to patients with neurological disorders [29]. While these articles were published 4 decades ago, they still are an important educational resource for postgraduate students and researchers.

Reflecting an increasing realization to reduce neonatal morbidity and mortality, a large number of articles address various facets related to care of sick neonates. Research papers on birth weight, intrauterine growth curves of singletons and nomenclature of newborns [30-32] and physical and neurological criteria for gestation assessment [33] continue to be cited even today. Important causes of neonatal morbidity and mortality in the country [34], incidence and etiology of hyperbilirubinemia [35-37], profile of hypoglycemia [38] and infantile obstructive cholangiopathy are discussed with considerable clarity. The *Journal* cites the often referred to poem by Prof. ON Bhakoo on 'Cry of a premature baby' [39] that is reproduced in its entirety below.

### Cry of a Premature Baby

I came too early, I came too light
From the warm womb, to the cold room
Struggling for breath, dying to survive
Hungry for food, to keep the brain alive
The invisible enemy, threatens through you
And the yellow pigment, ever ready to cripple
Lungs too stiff, to get oxygen to blood
If only you care, I need special care
Brain bleeds with strain, blood channels too fragile
Be gentle, be kind, be warm for a while
By your thoughtful care, given this start
I may be Winston Churchill, I may be Bonaparte!

The content of research papers published in journals of academic societies usually reflects contemporary issues that are of relevance to its membership. Invited reviews, on focused topics, have an educational purpose and are directed towards the general readership. Journals also provide a forum for discussion among its readers. During 1973-75, the *Journal* fulfilled its mandate on issues that were significant at that time. The number of submitted manuscripts had increased, inevitably resulting

in rejection rates close to 50%. In his farewell Editorial, Dr. Ghai while expressing satisfaction at the growth of the *Journal*, thanked members of the Academy for reposing confidence in him, the reviewers for their time in evaluating and revising manuscripts 'for the sheer love of science' and welcomed his successor, Dr. Satya Gupta [40].

Indian Pediatrics had done well in its childhood and adolescence was round the corner!

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