### **International Journal of Current Advanced Research**

ISSN: O: 2319-6475, ISSN: P: 2319-6505, Impact Factor: 6.614

Available Online at www.journalijcar.org

Volume 8; Issue 12 (D); December 2019; Page No.20806-20809

DOI: http://dx.doi.org/10.24327/ijcar.2019.20809.4074



# A CRITICAL APPRAISAL FOR EFFICACY OF BDS-MBBS BRIDGE COURSE -A QUESTIONARE BASED STUDY

### Dr Mundoor Manjunath Dayakar, Dr Prakash Pai G and Dr Vidya G Nair

Department of Periodontology, Kvg Dental College and Hospitals, Sullia, Karnataka-574327

#### ARTICLE INFO

#### Article History:

Received 6<sup>th</sup> September, 2019 Received in revised form 15<sup>th</sup> October, 2019 Accepted 12<sup>th</sup> November, 2019 Published online 28<sup>th</sup> December, 2019

#### Key words:

AYUSH, BDS-MBBS Bridge course, Doctor-population ratio

#### ABSTRACT

**Ojectives:** DCI (Dental Council of India) has initiated a proposal for BDS-MBBS bridge course which allows the BDS graduates to become full-fledged MBBS Doctors. This study was doneto understand the opinion of both dentaland medical professionals on the implementation of BDS –MBBS bridge course and their effectiveness in improving the general health status of the population.

**Methods:** This was a Questionnaire-based study carried out among dental and medical professionals including interns, general dental and medical practitioners and dental and medical specialists. The number of participants in the survey was 120.

**Results:** Among the 120 participants, maximum number of study participants were not in favour of the bds-mbbs bridge course. 72% of the participants strongly disagreed to BDS-MBBS bridge course while only 28% were in favour of the bridge course.

**Conclusion:** These results suggest that the governing bodies should consider both positive and negative impacts of this BDS-MBBS bridge course before proceeding to the implementation of this course.

Copyright©2019 **Dr Mundoor Manjunath Dayakar, Dr Prakash Pai G and Dr Vidya G Nair.** This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

### INTRODUCTION

National Institution for Transforming India (NITI Aayog) has proposed BDS to MBBS Bridge course as a leap towards demolishing the scarcity of general physicians in rural India .This is described as a step towards reforming the medical education standards prevailing in our country. The successful completion of the course would allow Dentists to practice family medicine. This move is based on the argument that the dental courses in the country follow the same training and curriculum as the MBBS courses for the first two years.<sup>1</sup>

Merits and demerits of such a bridge course must be well scrutinized before implementing this big impact on health care system, especially in rural areas. Along with that the educational standards of both BDS and MBBS Degree course in dental and medical colleges must be also compared.

According to the statistics, provided by Medical Council of India, there are a total 10,41,395 allopathic doctors registered with the State Medical Councils/Medical Council of India as on 30th September, 2017. It gives a doctor-population ratio of 1:1596 as per current population estimate of 1.33 billion. However, WHO norms prescribes that there should be 1 doctor amongst the population of 1,000.It is important to understand the prime cause of the shortage for doctors.

\*Corresponding author: **Dr Vidya G Nair** Department of Periodontology, Kvg Dental College and Hospitals, Sullia, Karnataka-574327 In our country with 63,250 MBBS graduates coming out of 494 medical colleges every year, and still we are unable to provide with adequate medical services in rural parts of India.<sup>2</sup> We will have to think whether this scarcity of doctors are due to non-availability of Doctors or inability of patients to meet the medical expenses, which ultimately leads to decreased health status of the rural Population. In such case, by mere increase in number of general physicians will not help in solving the crisis .Moreover the cost of medical expenses must be addressed, so that population from various socioeconomic status can bear it. Aim of the study is to doa critical appraisal for efficacy of BDS-MBBS bridge course.

### **MATERIALS AND METHODS**

It is a questionnaire-based cross-sectional study. Study tool is a validated questionnaire containing 19 questions to evaluate the need for BDS-MBBS bridge course. The present study were conducted among 120 people including dental and medical students including interns,general dental and medical practitioners and dental and medical specialists ,using a structured electronic and printed questionnaire .

- ✓ Soft copies were submitted to respondents via email.
- ✓ Soft copies were posted online on dedicated groups of dental and medical practitioners

Evaluation of the knowledge and awareness were done after receiving the responses. Obtained result were statistically analysed. Statistical analysis were be carried out using SPSS version 21 with significance level set at <0.05.

### **RESULTS**

The data collected were divided into six groups. Six groups are as follows:-MBBS students including interns(GROUP A),BDS students including interns(GROUP B),Medical (MD/MS) specialists (GROUP C), Dental (MDS) specialists (GROUP D),General Practitioners (MBBS) (GROUP E), General Practitioners (BDS) (GROUP F)

**Table 1** shows the percentage of participants in each group who are in favour of BDS-MBBS bridge course.

Groups	Number of Participants	Percentage of participants in favour of BDS-MBBS Bridge course in each Group
Group A: MBBS students including interns	20	10%
Group B: BDS students including interns	20	40%
Group C: Medical (MD/MS) specialists	20	10%
Group D Dental(MDS) specialists	20	30%
Group E General Practitioners (MBBS)	20	20%
Group F: General Practitioners(BDS)	20	30%

Majority of the participants in all the groups have come across the news of BDS-MBBS Bridge course through internet and are with the opinion that increasing the government jobs in medical field would help in decreasing the shortage of doctors in India. Almost all the contributors in this study considers improvement of health of the society by preventive measures like taking action against adultrations and providing health education as the best option to decrease the shortage of doctors in rural India.

The idea of considering reduction in tax and subsidies for medical equipments and materials, for the benefit of the general health over increasing thenumber of doctors were supported by bulk of the participants in this study. Majority of the respondants in all groups were aware of the ideal doctor: population ratio (1:1000) prescribed by WHO and also agrees with this doctor:population ratio. In this this survey, although a high percentage of respondants in all groups considers BDS-MBBS bridge course helpful to maintain ideal doctor-population ratio, the propability of giving qualified quacks to the society has also been put forward.

Majority of the participants in group A,C and E are with the opinion that the dental courses in the country do not follow the same training and curriculum as the MBBS course for the first two years. They also considers that this BDS –MBBS bridge course would increase the unemployment rate among MBBS graduates and do not consider the bridge course graduates as equally qualified as MBBS doctors.

Majority of the participants of group B,D and F are with the opinion that both BDS and MBBS courses have similar syllabus and curriculum in the first two years and are in the favour that this bridge course would decrease unemployment rate among dentists. Meanwhile they also considers pursuing postgraduation as the best option after BDS degree.

#### DISCUSSION

The main aim of this study was to do a critical appraisal for efficacy of BDS-MBBS bridge course and scrutinizing the perception of educational standards rudimentary for a general physician.

In this study a total of 120 responses were received and a complete set of response for 19 questions were registered by 120 participants. Dental and medical students were the highest partcipants in study followed by general practioners in dental and medical field and specialists in dental and medical field. DOCTOR: POPULATION RATIO

The WHO has prescribed a doctor: population ratio of 1:1000. In India the Doctor population ratio is 1:1674. Total population of India is 1.37 billion. The population growth rate for 2019 is projected at 1.08%.68.86% of India Lives in rural areas and 31.14% lives in urban areas.

#### **AYUSH**

The Ministry of Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy, abbreviated as AYUSH, is a governmental body in India purposed with developing, education and research in the field of alternative medicines including ayurveda, yoga, unani, naturopathy, siddha and homoeopathy. There are 6,86319Ayush practitioners in the country out of which 4,46051 are ASU doctors.

Table 2 shows data regarding the total number of colleges in India for each wing in AYUSH and also total number of doctors produced per year and total number of physicians practicing in India in each of the respective branches.<sup>3</sup>

These statistics give us the proof that there is no shortage in production of qualified doctors in India, but the ability to navigate the medical services to the people in need is not efficiently monitored .This efficacy of BDS-MBBS bridge course efficiency would depend on the infrastructure and clinical materials(patients) provided by the Instituitions offering this course .<sup>4</sup>

Even though this bridge course would help in attaining ideal doctor population ratio, it can lead to production of qualified quacks, which can lead to malpractices in Medical field.Improving the overall health of the society by preventive measures like taking action against adulterations, providing Health Education etc. would help to improve health status in India. Along with that considerable reduction in tax and subsidies for medical equipments and materials will benefit the general public than increase in number of Doctors.<sup>5</sup>

**Table 2** [data collected from ayush.gov.in/MinistryofAyush-infrastructure-state wise statistics]

	Total number of colleges in india	Total number of doctors produced per year	Total number of physcisians practicing in india
AYURVEDA	394	15,000	4,19,217
UNANI	52	1500	48,196
SIDDHA	10	400	8,528
NATUROPATHY	19	350	2,220
HOMEOPATHY	240	20,000	2,93,307
MBBS	412	50,000	9,88,922

### **CONCLUSION**

The idea of BDS –MBBS bridge course which aims at providing a lateral entry for BDS graduates to MBBS and become general physicians have received both positive and negative feedbacks .The educational standards and training methods adopted by institutions in India must be validated and scrutinized before coming into a conclusion regarding the BDS-MBBS bridge course.

### Appendix

#### **Questionnare**

Please select one of the following that best describes your practice background.

#### Students including internship

- 1. Dental
- 2. Medical

### General practitioners

- 1. Dental
- 2. Medical
- 3. Specialists
- 4. Dental
- 5. Medical

## Have you ever come across the news of "BDS-MBBS bridge course"?

- 1. Yes
- 2. No

### What is your source of information?

- 1. Conference/Symposium/Seminar
- 2. internet
- 3. Books
- 4. Journals
- 5. Media

### Do u think the dental courses in the country follow the same training and curriculum as the MBBS courses for the first two years.

- a. Yes
- b. No

# Will BDS TO MBBS Bridge course decrease the scarcity of doctors in rural India

- a Yes
- b. No

Can this bridge course graduates be considered equally qualified as MBBS doctors.

- a. Yes
- b. No

### What is the best option after BDS degree

- a. Practice as general dentist
- b. Pursue postgraduation
- c. Enter BDS to MBBS bridge course

## Do you think this bridge course will increase the unemployment rate among MBBSgraduates

- a. Yes
- b. No

# Which among these can be considered a best option to decrease shortage of doctors in India

- a. Increase MBBS seats
- b. Improve the overall health of the society by preventive measures like

## taking action against adultrations ,providing Health Education etc.

a. BDS to MBBS bridge course

## What could be the reason for patients not opting for getting medical treatment

- a. Non-availabilty of doctors
- b. Inability to bear the cost of medical treatment
- c. Ignorance towards maintenance of health.

## Do you think the ideal doctor: population ratio (1:1000) which is prescribed by WHO is applicable in India

- a. Yes-Ideally we need one Doctor for 1000 population
- No- For every 1000 population we do not need one doctor

## Do you agree with this doctor:population ratio prescribed by WHO

- a. YES
- b. NO

## Do you think in this doctor:populationratio,they have considered existing AYUSH doctors

- a. Yes
- b. No

## Do you think the doctor:population ratio is sufficient in India

- a. Yes-We have as many doctors as required for Indian population.
- b. No- We have acute shortage of doctors for Indian population.
- c. No-We have excess doctors considering AYUSH Doctors who provide basic health care.

## Do you think this BDS-MBBS bridge course will help in maintaining idealdoctor:population ratio.

- a. Yes
- b No

# Do you think this bridge course will decrease unemployment among BDS graduates.

- a. Yes
- b. No

## Do you think this BDS-MBBS bridge course will produce qualified quacks and malpractices in Medical field.

- a. Yes
- b No

# Do you think we have enough infrastructure and clinical materials (patients) to provide Bridge course

- a. Yes, there is sufficient infrastructure and clinical materials
- b. No, there is acute shortage of clinical materials (patients) and infrastructure in existing medical instituitions.

Do you think considerable reduction in tax and subsidies for medical equipments and materials will benefit the General public than increase in number of Doctors.

- a. Yes
- b. No

#### References

- Bds to mbbs bridge course: nitiaayog proposes allowing dental surgeons to practice family medicine. Available at https://www.timesnownews.com/education/article/bdsto-mbbs-bridge-course-niti-aayog-proposes-allowingdental-surgeons-to-practice-family-medicine/404011 [cited 2019 Nov 20].
- Increasing of UG and PG Medicalseats .Available at https://pib.gov.in/newsite/ Print Release.aspx?relid=177559
- ayush.gov.in/ Ministry of Ayush-infrastructure-state wise statistics.

- 4. IMA opposes gov's proposal to allow dentists practice modern medicine. Available at https://www.livemint.com/science/health/ima-opposes-gov-s-proposal-to-allow-dentists-practice-modern-medicine-1555927760430.html [cited 2019 June 11]
- Bridge Course to nowhere-impending crisis in Medical Education. Availabeat http://www.mangaloretoday.com/opinion/Bridgecourse-to-nowhere-impending-crisis-in-medicaleducation.html. [cited 2018 Dec 03]
- 6. Malik VK, Nundy S. The need for a 'bridge course'is here and now!. Current Medicine Research and Practice. 2018 Jul 1;8(4):127-8.
- Potnuru B. Aggregate availability of doctors in India: 2014–2030. Indian journal of public health. 2017 Jul 1;61(3):182.
- 8. Soon, dentists can practise as general physicians after bridge course. Available athttp://www.newindianexpress.com/nation/2019/apr/2 3/soon-dentists-can-practice-mbbs-after-bridge-course-1967762.html

#### How to cite this article:

Dr Mundoor Manjunath Dayakar, Dr Prakash Pai G and Dr Vidya G Nair (2019) 'A Critical Appraisal for Efficacy of Bds-Mbbs Bridge Course -a Questionare Based Study', *International Journal of Current Advanced Research*, 08(12), pp. 20806-20809. DOI: http://dx.doi.org/10.24327/ijcar.2019.20809.4074

\*\*\*\*\*