

RESEARCH, PUBLICATION AND YOUNG DOCTORS

The role models for medical students and young doctors in a developing country like Nepal are still busy clinicians. The reason is pretty understandable. There is substantially low income, almost negligible incentive to academic and research activities, virtually no need of strong curriculum vitae (CV) for the job as well as academic applications even though few institutes have come up with this criteria but haven't played a decisive role during their final decision. In recent years some of our young doctors have been interested for research and publication but lack of proper guidance and career motivation things haven't changed much. Above all developing countries from Asia and Africa are currently suffering from the upsurge of emigration of medical graduates to developed countries^{1,2,3} and Nepal hasn't been the exception.

In the shadow of our major problems like increasing brain drain and need of uplifting medical journalism, there are some basic-sciences as well as clinical researches being carried out on regular basis in Nepal. Most of these sophisticated researches are funded by foreign aid and Nepalese medical journal usually do not get those type of research articles and are hence published elsewhere. There are various things that hinder such research not considering for publication in Nepalese medical journals like lack of wider circulation, low impact factors and more.

However, authors have to believe Nepalese medical journals and side by side these journals have to raise their standard. Medical journalism is something that we are still limited to honorary job, as a matter of interest and volunteerism instead of considering medical journal publication as a separate entity. We have no doubt that it will soon be as a part and parcel of academic excellence and teaching-learning process. Above all, the problem

identification, solution options and implementing protocols have to be developed by ourselves for our problems.

JNMA has the history of more than 45 years of publication.⁴ Now, the time has come to review our work. How many research article published in Nepalese medical journal have changed the way of clinical practice? Where is the fault? Is it the journal management or Nepalese doctors do not go for such researches? A common system has to develop so that any research article published in the journal change the way we care for our patient.

Most of the research articles published in Nepalese medical journal are conducted in our set up. Therefore discussing, implementing and applying those finding in day to day life and patient care with involvement academic activity will definitely boost the researchers to explore new dimension of research activities.

Merely publishing article in the journal doesn't make sense if the message from that article is not conveyed and implemented well. To achieve some of this goals Nepalese medical journal have to raise their standard and authors are encouraged to support us by writing such article that change the way we practice medicine in Nepal.

It can't be a simple gesture or an initiation to have three medical journals to be indexed in Medline for the field of medical research and publication from Nepal. Seniors with some energies, enthusiasm and experience have teamed up with smart enough young doctors to materialize this. We need to keep it up. There are still much more left to be done for the journal management.

We cannot deny the fact of involvement of information

technology in Medicine.⁵ Very few young doctors are coming up with knowledge of medical IT and beside this many young need proper orientation, guidance and opportunities especially about academic involvement and clinical researches and publication. Nepal health research council is doing such things for years. What if we encourage our young doctors' right from their medical school?

As numbers of medical schools are increasing with even more number of Nepalese graduating from Nepal and abroad, we hope some of them would be interested in research, publication and academic medicine at large.

1. Mullan F. The metrics of the physician brain drain. *N Engl J Med* 2005;353:1810-8.
2. Zarocostas J. Poor countries lose 15% of their skilled staff to rich countries. UN report says, *BMJ* 2007 Jul 21;335(7611):119
3. Pang T, Lansang MA, Haines A. Brain drain and health professionals. *BMJ* 2002 Mar 2;324(7336):499-500.
4. *Journal of the Nepal Medical Association*, 1963 Vol. 1, No. 1
5. Magar A. Computer and Medicine. *KUMJ* 2003 Vol.1, No.3, Issue 3, p222-224.

REFERENCES