



Letter to the Editor

The downside of orthopedic subspecialisation

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Dear Sir,

This is regarding the increasing trend of subspecialisation in orthopaedics. Subspecialisation is affecting the training and attention of postgraduate students in learning all aspects of orthopaedics. The students these days are more interested in learning those topics which are likely to give more monetary benefits. Non-operative treatment of fractures is getting neglected. Surgical treatment is being offered many times in lieu of non-surgical modality not because it gives better results but because it fetches more money to the hospital. Unnecessary surgeries are being done in many big hospitals. Lucrative fields like joint replacement, spine surgery, and arthroscopy fields are getting more orthopaedics practitioners over geriatric orthopaedics, hand surgery, foot & ankle surgery or paediatric surgery.¹ This trend is making orthopaedic specialists incomplete in their knowledge and training. Orthopedicians' Master's training (M.S.Ortho) is otherwise also insufficient due to partial exposure to general surgery aspects of bladder injury, chest & lung injury and reconstructive surgery. Moreover, research and academic interest is declining, with many opting for shortcuts over evidence-based practice. Clinical judgement is also getting compromised due to over-dependence on imaging and

technology. All these deficiencies and improper trends are giving a bad name and fame to many of us. Management of a disease or trauma offered by us should be scientific, correct and suitable for the patient. Necessary charges of course, are must but it must be justifiable and optimum. These aspects need to be given a thought by orthopedicians of the country and policy makers. Role of corporate hospitals and pharmaceutical houses need thorough investigation and remedy to save doctors. It is high time the medical community stands together to uphold the ethical and holistic practice of orthopaedics, ensuring patient welfare is not overshadowed by profit motives or institutional pressures.

References

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