

Respiratory therapy in India

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Medical education in general and practice of medicine in particular in India has been under the strong influence of the British until the sixties. Thousands of physicians and surgeons have traveled to the United Kingdom to get trained and return with impressive fellowships and memberships of the Royal colleges of London, Edinburgh, Ireland etc. These innumerable British qualified doctors had their influence on the way the Intensive Care Units were managed in India. Intensive care units (ICUs) and ventilators were managed by anaesthesiologists, while respiratory physicians predominantly managed patients suffering from lung diseases in their offices as out patients and admitted the 'not- so-critically-ill' patients in their wards.

Things changed in the seventies, when interaction between the medical faculty of United States of America (USA) and the young doctors in India increased with many board certified pulmonologists (notice the nomenclature) lecturing in the Indian conferences. In fact, some of them eventually returned back to India to practice ICU medicine in many of the private and corporate hospitals which were steadily increasing in number in many of the metro cities. As a result, pulmonologists with USA background started taking interest in Intensive Care and mechanical ventilators in many hospitals.

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It is interesting to note that regardless of who controlled the ICUs and ventilators, be it pulmonologists or anaesthesiologists, both felt a need for respiratory therapists. As a result, several centres in India started respiratory therapy schools in the late nineties. Not surprisingly the leaders who started these schools were either anaesthesiologists or pulmonologists.

The earliest full-fledged respiratory therapy course was started at Manipal College of Allied Health Sciences, Manipal. One of the anaesthesiologists, Dr Ramkumar Venkateswaran was sent to spend a year at Loma Linda University, California to observe respiratory therapy course. He came back and started this four-year degree course (three years of course study and one year internship) in September 1995. The syllabus was based on the American respiratory therapy course and similar to what was delivered at Loma Linda University.

It is gratifying to note that the American Association of Respiratory Care (AARC) has been playing a silent and yet significant role in giving a shape to the respiratory therapy scene in India. One of the influencing factors was the visits to USA by selected physicians for the fellowship programme initiated by the AARC. Total of 12 Indian physicians have participated in the fellowship programme in the past 20 years. They were exposed to the profession of respiratory care to the fullest in three weeks of the fellowship. Few of these physicians, especially Dr Vijai Kumar from Hyderabad, Dr DJ Christopher from Vellore and Dr Vijayalakshmi Thanasekaraan from Chennai were motivated to start working on establishing the profession in India after their return

How to cite this article: Ratnavelu VK. Respiratory therapy in India. *Ind J Resp Care* 2012;1:8-10.

from AARC fellowship. Thus, Christian Medical College, Vellore; Sri Ramachandra Medical College, Chennai; Nizam's Institute of Medical Sciences, Hyderabad; MediCiti Hospital, Hyderabad - all from southern India were the earliest centres to start Respiratory Therapy courses (circa 1996). Now more schools have sprung up in Kochi, Bangalore and Pune.

Although the syllabus of all these courses is uncannily very similar, the nomenclature, duration and entry level qualifications of the courses are unfortunately different. Currently different centres are running their courses with different nomenclatures. Some are known as Respiratory Technologist course spanning 4 years and some others are known as Respiratory Technician course and are just a 2 year Course. Manipal College of Allied Health Sciences, Manipal University, Manipal, Karnataka state now offers not only the degree course but also offers postgraduation (MScRT) in two subspecialties (adult respiratory care and paediatric/neonatal respiratory care) and doctorate (PhD) in respiratory therapy. This is the longest running programme in India (16 years). The Nizam Institute of Medical Sciences in Hyderabad, Andhra Pradesh offers a certificate programme. The Christian Medical College, Vellore, Tamil Nadu offers undergraduate certificate programme and a post graduate certificate programme. Symbiosis Institute of Health Sciences, Symbiosis International University in Pune, India offers a BSRT programme. Sri Ramchandra Medical College in Chennai, Tamil Nadu has a BSRT programme. Amrita Institute of Medical Sciences, in Kochi, Kerala also offers a BSRT programme.

Visiting senior respiratory therapists such as John Saul from the Ben Taub General Hospital, USA, Arunakanth Duvvury from Houston, Texas, USA have taken time up to one month at a time to teach respiratory therapists at Hyderabad. Vijay Deshpande, a very senior respiratory therapist from Georgia University has been on the faculty panel of many critical care conferences in India. He made it a point to meet up with young respiratory therapists of India, encouraging them, teaching them and

giving them valuable suggestions on how to improve respiratory therapy in India. Apart from academic content, interaction with such people provided the much needed boost to the morale of respiratory therapists in India.

In general acceptance and support for the respiratory therapists from anaesthesiologists, cardiologists and intensivists in the major teaching and corporate hospitals left much to be desired. The freshly graduated respiratory therapists, however, received the much needed patronage from the anaesthetists and pulmonologists who were actively involved in their training, but these institutes were less than half a dozen in the country and by far too small a number to create a revolution.

The respiratory therapists who qualified during the nineties are all well employed and settled down in good positions. Salaries are a big disappointment for the respiratory therapists in India. Barring the few thought leaders who are running the RT training courses, recognition from other hospitals and specialist doctors is lacking. As a result major private and corporate hospitals are wary of employing them, chiefly because the hospital administrators are unaware of the capabilities of respiratory therapists.

With the intention of bringing all the centres involved in RT training in the country, Dr Vijai Kumar had contacted all the opinion leaders in the specialty and officially formed Indian Association of Respiratory Care (IARC) in 2006 on the lines of AARC. The agenda was simple and had just 3 goals. One, to bring all RTs on to a single platform two, to create an awareness among Pulmonologists, cardiologists, intensivists and hospital administrators about Respiratory Therapy and their vital role in the ICUs, and third to bring about certain uniformity of syllabus and nomenclature among the various centres involved in the training of respiratory therapists. In last four years, after formation of the IARC, the organisation was able to successfully organise 4 national conventions at Vellore, Chennai, Manipal and Hyderabad. The convention in 2010 was part of the national convention of the Indian Society of

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Critical Care Medicine (ISCCM) the apex body for intensivists of India. The fifth national conference of respiratory therapists was held at Manipal in November 2011.

The following physicians from India have been AARC International Fellows: Radhika Dhanpal, MD, Bangalore (1990), Vijai Kumar, MD, Hyderabad (1992), Brijendra Kumar Rao, MD, New Delhi (1993), Suninder Singh Arora, MD, New Delhi (1996), Sandhya Talekar, MD, Pune (1999), Rajesh Mane, MD, Belgaum (2000), Kedar Toraskar, MD, Mumbai (2002), Arvind Bhome, MD, Pune (2002), Vikram Sarbhai, MD, New Delhi (2003), Devasahayam Christopher, MD, Vellore (2005), Vijay Thanasekaraan, MD, Chennai (2006), Mohan Thekkinkattil, MD, Coimbatore (2007).

Vijay Deshpande, the senior and experienced respiratory therapist from Atlanta, Georgia has been frantically touring the length and breadth of India last 2 years to understand the current situation and unite the thought leaders. It is just a matter of time and efforts of all these well meaning leaders will bring the glory that Respiratory Therapy in India deserves.

As Swami Vivekananda said “All good things have to pass through three stages; stage of ridicule, stage of opposition and finally stage of acceptance”.