

Medical Research in Bangladesh

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Science is ever changing. New concepts are coming and old concepts are replacing with that. Medical science is closely interrelated with scientific research. Today's truth in medical science may be tomorrow's big fault. So, medical personnel should be very much actively attached in upgrading their knowledge. Otherwise they will be in the generation gap and ultimately patients will be in danger. Actively involving with research and different research related activities would make them upgraded.

In Bangladesh, research activity is in very primitive stage¹. Here research involvement of a student starts actively during higher study. For post graduation, students need a research work in the form of dissertation or thesis. Supervisors have to guide them. But sometimes supervision of all their activities from literature search, protocol preparation, ethical issues, data collection, data analysis, report writing and publication are poor. Students think that they should do it only to pass the examination and supervisors think that why should they pay attention and time as it is non-profitable. Again when a student puts different related papers to the supervisor's table, it remains untouched for long time and returned back to the students with very few observations. Most of the times students make it prepared from professional people who used to do it as contract basis. During defending the thesis or dissertation it is overlooked and students pass and when they become the supervisor same things happens to the new students. A vicious circle continues.

Again most of the faculties in clinical site are clinicians. They used to consult the patients in the hospital for the working time. As we have populations of 180 million, all hospitals are burdened with patients. There is a huge patient burden. So, those clinicians keep them busy in the evening time for private practice. As they are poorly paid they need to compensate by doing private practice to fulfill their basic financial needs. So they become tired after dealing such an enormous patients in the hospitals and chamber and as a result they become unable to provide proper time to the research work or research activity. On the other hand faculties of basic subjects do not get non practicing allowance and as there are very little or no research grants and also there are no well equipped research laboratory for their departments, they are also not interested in doing research.

Situation of data analysis opportunities are also not good. Software knowledge of SPSS, EPI-INFO, STATA or R are very minimum among researchers of Bangladesh. Expert data analyst having knowledge of medical domain is scarce. As a result, students of PhD, MD/MS or FCPS face much difficulties. Current post graduate syllabus and programs are not enough to build a researcher with good knowledge of data handling in depth.

Publications are prerequisites in Bangladesh for the promotion of the medical faculties from assistant professor to professor. So those do not have publications become very much aggressive to have publication to have their promotion. This is taken by some people as opportunity to earn money and they used to prepare papers with fake data and make it published in predatory journals at home and abroad. Again sometimes there are political pressures to the editors to publish the paper in the journals. Also sometimes there are financial conflict with the writer and publisher.

Correct English language in final report writing is an important issue for publication in a good journal. But again in this point researchers feel problems. Lots of research works are rejected due to problems in language issues in foreign journals. We need to pay attention on that also.

On the other side, there are some devoted people who are trying to do some real research works in Bangladesh. But there is very few funding authority. Bangladesh Medical Research Council(BMRC) provides some funds for the research work but researcher who apply there, tell that there is lacking of transparency and honesty in providing research grant. They also tell that those who get the grant, find problems in getting that at different point of collection and they need to spilt the money with the officials. Some medical college and universities provide fund for the research but it is too small to note. Like Chattogram Maa-O-Shishu Hospital Medical College provides twenty to thirty thousand taka(250 USD) for an accepted protocol. Even than though these are very minimum amount but it is started and we can find positives from it.

There are some freelance researchers who work on infectious diseases like malaria, kalaazar, snake bites, viral hepatitis or some noncommunicable diseases like SLE, RA. They used to collect funds from abroad and their research works positively helping the young researchers to upgrade themselves. But these are scarce. In Bangladesh there is also a internationally standard research center ICDDR'B, which is working for research in diarrhea, cholera and other infectious and noninfectious diseases. Lots of experts from home and abroad work there.

Publication in scientific papers is also prevailing in a fearful situation. There are only one to two journals which are Pubmed affiliated. "Banglajol" supported by INASP, maintain the online publications of different medical and scientific journals in Bangladesh. But they do not work for quality control. They only maintain the website and publish the articles online. They try to qualify the journals by stars from one star to five star and very few journals have five star quality.

Different government and private medical colleges have their own journals. They used to publish the research work regularly. But very few of them have the Ethical Review Board (ERB) and quality assurance body and someone though have, their activity is not up to the mark.

Copy paste and plagiarism is prevailing very fearfully. Maximum journals are not in online and plagiarism check is not possible. So people used to do it frequently. Again ghost authors and authors who are not involved in the study are shown in the author list. This practice making some people lazy and they are thinking that ok we can manage the authorship somehow and my promotion will not be halted anyhow.

But how to overcome? We need to become more research minded. During postgraduate study doing thesis and dissertation should be completed in a honest way. All the pros and cons of research should be learnt in that early stage. Supervisors should play their part and they should provide time to make the student efficient. Authority should provide adequate financial support both for the students and for the supervisor. There should be an ERB and regulatory authority who will maintain the utmost quality to have the research work acceptable nationally and internationally.

Bangladesh spends 1.02% of its GDP in 2019 as health expenditure for the country which is a very poor in amount. This is a problem and so sometime though positive intension is there practically it may not be possible to provide adequate funds for the research². But presently conditions are improving. At different medical universities funding is being provided for research, peoples are attending different seminars and conferences and getting training from abroad. By that their thinking and views are upgrading. So to keep pace with the modern science we should be more research minded.

REFERENCES

1. Biswas RS, Biswas CR. Success and failure in medical research. *J SciSoc* 2016;43:106-7.
2. Islam A, Biswas T. Health System in Bangladesh: Challenges and Opportunities. *American Journal of Health Research*. 2014; 2(6): 366-374.