By Dr Wong Chiang Yin, SMA President

## A Little Bit of History

One of the ironies of life is that sometimes we become what we had beheld when we forget the lessons of history.

limited resources, the opportunity to further one's medical career and the right to specialise is taken for granted today. But it was not always so. In the past, you may be good, but that may not be enough in Singapore. This right to be considered for promotion and the opportunity to specialise was only obtained after much struggle by our predecessors, most of whom are now long forgotten.

I was reminded of how far we have come when I recently went on a short holiday in Ipoh. While there, I came across a book titled Doctors Extraordinaire by Dr Ho Tak Ming. Dr Ho graduated with MBBS from Singapore in 1970 and is a GP in Ipoh. The book contains stories of lives of extraordinary doctors who had practised in Malaysia. The history of medicine in Singapore is invariably deeply linked to that of Malaysia until the two went their separate ways, and so the book contained stories of many famous doctors and familiar names who have also contributed to the development of medicine in Singapore. It was a compelling book and I finished it before I returned to Singapore.

One chapter was on the legendary Dr Michael Emmanuel Thiruchelvam who was born in Ceylon in 1897 and became the first Asian specialist in Malaya. He studied in Kuala Lumpur and gained admission to the Singapore Medical School at the age of 15. However, he had to leave after a year due to his father's ill health. He qualified as a teacher and taught for five years and in the meantime, obtained a BA for English Literature and a BSc for Physics. In 1919, he re-entered the King Edward VII Medical School and won multiple medals and prizes while he was there. He graduated with a LMS in 1922. LMS stands for Licentiate in Medicine and Surgery and it is the predecessor to our current MBBS. There are still a few doctors in Singapore with LMS now – they are probably in their eighties. Our local medical school only conferred the MBBS in the fifties.

LMS holders had a tough time as the qualification was considered inferior to the British medical degrees. As such, all specialist posts were reserved for Europeans then. Asians with ambition were frowned upon. In addition, LMS holders were only allowed to obtain postgraduate qualifications such as LRCP and MRCS - degrees that were not considered as proper specialist qualifications. LMS holders were appointed as Assistant Medical Officers. Even those with extensive experience and postgraduate qualifications were appointed only as Deputy Medical Officers to assist the Medical Officers of European descent who may only have a basic medical degree.

Against such odds, Dr Thiruchelvam became the first local Malayan doctor to gain a specialist qualification in 1929, but only after much difficulty and a little guile. There



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was no paid study leave for Asians (unlike Europeans) and Dr Thiruchelvam had to accumulate his own leave and use his own savings to further his postgraduate study in Britain. In 1929, after obtaining his MRCS and LRCP, he then surreptitiously sat for the FRCS and passed it, thus becoming the first Asian specialist in Malaya. And even then, when he returned in 1930 to Malaya, he was appointed only as Deputy Medical Officer. From then until World War 2, he actively fought for the rights of local doctors, together with other pioneers such as Dr Chen Su Lan. After Malaya fell to the Japanese in World War 2, he was imprisoned in Changi Prison but was released when his captors realised he was the 'famous surgeon Chelvam'. He was appointed to both the Medical Councils of Singapore and Malaya after the war and helped to lay down the rules of ethics for the profession.

Let us now return to the present. I will not belabour the contents of the letter that SMA received from a medical student which the Editor had already written about in his column. (See pages 8 and 9.) The letter criticised the policy of allowing polytechnic graduates into our medical school and claimed that the public will lose respect for our local medical graduates because it now accepted polytechnic graduates. The 48th SMA Council does not think that our junior colleges have a monopoly on talent suitable for medical studies, despite the obvious fact that we have all gone through the 'A' Level route ourselves (although I must add that a few of us, myself included, did not come from an elite JC). The best of our polytechnics is certainly a rich pool of talent and the reputation of our local degree is definitely not tarnished because the school accepts the best polytechnic students. It is probably enriched by it. Polytechnic students deserve a chance to be a doctor like everyone else based on merit, just as our LMS predecessors deserved a chance to specialise and be promoted.

If I were a 19-year-old with 'A' Levels aspiring to be a doctor, I may not be too happy about this new policy to accept polytechnic students. After all, there is already so much competition amongst 'A' Level holders for so few places in Medicine. The odds have just gotten tougher with the inclusion of polytechnic applicants. I can understand their angst and anxiety. However,

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in terms of the long term well-being of our profession, admitting polytechnic graduates is not a bad thing as long as we continue to attract the best. And there is the advantage of diversity which helps to prevent group-think.

It would be truly ironic if after our predecessors had struggled successfully against unjust discrimination by our colonial masters, today's local medical school undergraduates and graduates now think that polytechnic students are always inferior to 'A' Level students. We then become what our LMS seniors had beheld.

On another note, I was reminded of another story about LMS which I heard almost 20 years ago while I was in National Service. After a friend of mine fell ill, his grandfather wrote a medical certificate for him to bring to the camp medical officer. He signed off as Dr XXX, LMS. (Older members of the profession will need no introduction to this late doctor, who graduated in 1929, and is a classmate of the late President BH Sheares and Dr ES Monteiro, as well as a very respected member of the community.) Unfortunately, the (presumably) young medical officer did not know what LMS meant and did not accept the medical certificate. Later on, a higher authority had to advise the medical officer concerned that LMS was (and still is, by the way) a recognised medical qualification in Singapore.

We should not forget our past too easily. ■