The end of this year will mark the beginning of the third decade of the existence of the physician assistant (PA) profession in India. With just three graduates in 1994, the profession has now grown to nearly 1,300 PAs, with another 1,200 pursuing the program. However, the PA profession is not yet licensed in India.

THE BEGINNING
Contrasting the experience in other countries, the PA profession in India started as an experiment in a private, tertiary cardiovascular facility in Chennai, Tamil Nadu state. PAs who graduated from that program moved along with the cardiologists and surgeons who left the mother institute to start their own facilities. PA graduates had an edge over medical graduates in these centers because of their more extensive exposure to cardiovascular medicine; medical graduates receive just 2 weeks of clinical posting in cardiovascular medicine at medical school. PAs were a ready-to-use healthcare workforce. Medical graduates were and still are a floating population: The turnover of doctors at the junior level in hospitals is very high as they move on to fulfill their academic advancement. It was only natural that employers preferred PAs over medical graduates.

ADVANCEMENT
By the efforts of the Indian Association of Physician Assistants (IAPA) and by word of mouth by PA employers, the popularity of the PA profession spread slowly. Today, 47 institutes offer PA programs in India in collaboration with 10 universities. A few medical facilities also offer inhouse programs (diploma programs); the prerequisite is experience in patient care as a nurse or any allied healthcare professional.

Today, PAs work not only in cardiology and cardiac surgery but also in other disciplines including general medicine, general surgery, trauma care, orthopedics, obstetrics and gynecology, oncology, and emergency medicine. They have a wide range of duties: obtaining patient medical history; assessing patients’ clinical conditions; ordering and interpreting diagnostic tests; managing continuity of care in hospitalized patients; counseling patients on disease, disease management, and medications; providing health education; and preparing case histories, discharge summaries, and death summaries. In surgery, PAs work as first and second assistants. They work in conjunction with intensivists in ICUs. PAs also are greatly involved in clinical research and other scholarly activities.

PAs have the potential to compensate for the shortfall of primary care doctors, especially in rural areas.

CHALLENGES
As the government has not officially recognized the profession, medical facilities that start a PA program are free to develop their own curriculum to best suit their local needs. Unlike medical and nursing schools, PA programs have no standardized program curriculum. The IAPA believes that government intervention by licensing PAs might solve these crucial issues.

HOPE
The Tamil Nadu Dr. MGR Medical University in Chennai is the only government medical university in the country offering a PA program. The university is the apex body of the state of Tamil Nadu for medical and related education, granting affiliations to institutions and offering degrees. In 2011, the university instituted a 3-year graduate PA program. Nearly 25 private healthcare institutions in the state have affiliated with this university, showing the growing popularity of and need for PAs. Although PAs do mainstream medical and clinical work, the university’s placement of the program under the category of “allied health sciences” is a bit disappointing.
Physician assistants in India: Triumphs and tribulations

Forty-six of the 47 medical facilities with PA programs are in India’s four southernmost states (Andhra Pradesh, Karnataka, Kerala, and Tamil Nadu). More than 50% of medical and nursing colleges also are located in these four states. The PA profession by and large has not been taken seriously in the northern states other than West Bengal, where a PA program was established in a branch hospital of a Karnataka-based healthcare institute.

Unlike medical and nursing schools in India, PA programs have no standardized program curriculum.

The PA profession has been tested by time. PAs have the potential to compensate for the shortfall of primary care doctors, especially in rural areas. The government of India, as a remedy for the shortfall of doctors in rural areas, is proposing a 3-year baccalaureate program in community health. Though many professional bodies oppose this idea, it is likely to be implemented in the 2014-2015 academic year. Another type of healthcare professional, the rural medical assistant, who has 3 years of medical training, is being tested in the central Indian state of Chhattisgarh.

The collective appeal to the government of India from PAs and their proponents is to emulate the model set by the state government of Tamil Nadu, introduce PA programs in medical colleges across the country, and pass legislation licensing their practice. PAs are waiting for this with hope!

REFERENCES