

## Address by Dean, Faculty of Medicine, National University of Singapore at the Opening Ceremony of the 39th Singapore-Malaysia Congress of Medicine

JEL Wong, *MBBS, FRCP (Edin), FAMS*

- Guest of Honour, Mr Khaw Boon Wan, Minister for Health and Mrs Khaw
- Dr Mohamad Maliki Osman, Parliamentary Secretary for Health & Community Development, Youth and Sports & Mdm Sadiyah Bte Shahal
- Mr Moses Lee, Permanent Secretary, Ministry of Health & Mrs Lee
- Prof K Satku, Director of Medical Services, Ministry of Health and Mrs Satku
- Prof Chew Chong Lin, Chief Dental Officer, Ministry of Health and Mrs Chew
- Prof Dato' Mrs S T Kew, President of Congress and Master, Academy of Medicine, Malaysia
- Prof Low Cheng Hock, Master, Academy of Medicine, Singapore
- Presidents of Fraternal Overseas Colleges/Academies
- Distinguished Guests
- Colleagues, Ladies and Gentlemen

We are gathered here today for a historic meeting of the Singapore and Malaysian medical communities. Today, we commemorate 100 years of medical education in our 2 countries. This is something magnificent and worthy of us to pause and take stock: of our history, where are we now, and what the future portends for us.

Medical education in the Peninsula started 100 years ago, not because the colonial government at that time thought that it was needed, but because a group of local citizens thought that it was important. Thus, we owe our heritage to the public led by one Mr Tan Jiak Kim, who persuaded the colonial government and raised the funds to make this a reality. So what should we be reminded of as we gather here to celebrate 100 years of medicine in Singapore and Malaysia?

Firstly, that we are here to serve the public – young and old, rich and poor, powerful and meek, of all social, economic, religious and ethnic backgrounds. This is even more so when we remember that in both our countries, it is the taxpayer who heavily subsidises our world-class education. We must give back to society what it has given us.

Secondly, that the people who deliver health care are our system's most important resource. Train them well, and we

will be able to manage patients effectively. Effective teaching requires strong and robust mentorship. All of us are here today because someone older than us took the time, effort and often personal sacrifice to teach and inspire us, so we in turn must do the same for our younger colleagues and the students in our Universities.

We must break down the barriers between the public and private sectors and work as one community of professionals. I was greatly heartened by the turnout and enthusiasm of colleagues when my Vice Deans and I went to two of Singapore's biggest private hospitals, Mt Elizabeth and Gleneagles, to share with them our vision of medical education. We are planning to visit the other private hospitals soon. I am also heartened at the way the private sector responded when we asked for representation on our curriculum and medical student selection committees. All of these done at their own time and expense.

Thirdly, we must do better as a profession. We cannot be proud that it takes 17 years between discovery and availability of new drugs for our patients; that it costs at least US\$800 million to develop a new drug, with many of our patients unable to afford it by the time it is released; that only 30% to 70% of drugs work for the individual patient at the first application; that only 50% of proven medical discoveries are routinely implemented in our clinics and hospitals; and that medical error is an important cause of morbidity and mortality.

We must, and can, tackle these issues. The diagnosis has been made and there are several treatment options available. What is unclear is whether we are in denial or whether we have the strength and stamina to make the necessary changes.

The School of Medicine at the National University of Singapore continues to review the content, delivery, and assessment of its curriculum to produce effective doctors for Singapore and the region.

We aim to:

- better integrate the basic and clinical sciences;
- develop skills that allow effective practice, communication, and ability to self-learn;
- stress the importance of professionalism;
- function as part of a multidisciplinary team.

Working with the entire medical community, we must ensure that medical education is a continuum, from undergraduate to postgraduate, to one's entire professional career. We must also work with the policy makers, management and patients to develop a system that is safe, effective, patient centered, timely, efficient and equitable.

Goethe said, "Knowing is not enough; we must apply. Willing is not enough; we must do."

As we face the next 100 years of medicine in Singapore

and Malaysia, let us live up to the legacy of Mr Tan Jiak Kim and his fellow citizens.

If we do this, the next century will be a magnificent one, as the convergence of molecular biology, computing, engineering, chemistry and technology, combined with the power of the healing hand, will usher in the era of personalised medicine.

Thank you.