

## EDITORIAL

### THE PATHOLOGIST'S ROLE IN MEDICAL CARE

From the early times of Modern Medicine, pathologists have always played a central role in patient care and academic medicine. Although there have been periods of decline and stagnation, pathology has always been able to regain a prominent position in the frontiers of Medicine. In recent times, the explosive advances in technology in the laboratory-based sciences have been partly responsible for putting pathology again in the forefront. However, we should not lose sight of the fact that it has largely been the searching and independent attitude that pathologists take towards medical science and progress that has given pathology its enviable reputation through the ages. Because he has a feeler in every discipline of Medicine, the pathologist is an invaluable member of most medical and research teams. Because his training and profession requires him to take an unbiased and independent view of what goes on in a medical practice, the pathologist has an irreplaceable role as a "medical auditor." This is one of the governing influences on the pathologist's position in tissue committees, autopsies and clinicopathological discussions.

Today, pathologists also take the lead in computerisation of medical services and in the development of safety guidelines for medical and health staff. In addition, with the rapid changes in the medical practices, social conditions and lifestyles of society today, the pathologist has to be even more alert, in his role as "watchdog" of the medical profession, for the emergence of new "diseases", whether iatrogenic or otherwise. These important matters are covered by symposia articles in this issue of the Journal.

It must be further emphasised that the declining rate of autopsies, in Malaysia and worldwide, is a cause for concern. We must ask why this very important means of quality assurance in medical practice is falling into disfavour. Have clinicians been lulled into a false sense of security by the huge armamentarium of investigative tests and procedures at their beck and call? Are they fearful of the truth? Should not a finger also be pointed at the pathologist: are clinicians today disillusioned and frustrated by poor quality and uninformative autopsies? Perhaps we should also look at ourselves and ask how best we can fulfill what is expected of us.

L.M. Looi  
Editor