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Dr BC Rao

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Dr Rao of Bengaluru is a seer not adequately recognized outside his own state.

He has chosen to be a family physician and has served his patients and their families for over 40 years. A respected colleague in Bengaluru tells me that Dr Rao ‘is one of the best physicians I have ever come across’.

Dr Rao is blessed with deep moral insight. Since this is coupled with humility of high order, many of us have been deprived of the opportunity to learn from him.

His familiarity with the writings of Hippocrates, Osler, Shelley, Matthew Arnold, Ralph Waldo Emerson, the Dalai Lama,

Gerald Durrell, Plum Wodehouse and the bird-lover T.N.A. Perumal inspire respect.

He informed me that Dr M.K. Mani is one of his mentors. In turn, I have learnt from Dr Jaya Bajaj, scientific chairperson for the 4th National Conference on Family Medicine and Primary Care: ‘Dr B.C. Rao has been our mentor.’ And so, the virtuous cycle continues to cast its beneficial spell.

I am trying to learn more about the man and his work but would like to present to you whatever I have uncovered in the hope that you will also benefit from what I am learning.

Apart from treating his patients with expertise, compassion and empathy, Dr Rao does his best to educate younger family doctors in Bengaluru. He plays golf twice a week and has a current handicap of 16. (Since I am an ignoramus on golf—as on many other subjects—I had to make enquiries before learning that a golfer with a handicap between 10 and 18 is a skilled player with a moderate handicap.) I am also cheered by the

fact that he is fond of studying birds and the lives of plants.

We are fortunate that he is fond of writing. Some of his essays can be found on his blog site: <http://badakerecrao.blogspot.com/> 2007/ The blog appears to stop at 2016 but he continues to inform, educate and, at times, amuse right up this date.

He has other achievements to his credit. He set up a study group of general physicians in Bengaluru. Professional bodies such as the Indian Medical Association profess to promote learning but end up catering to politically powerful individuals and the interests of the sponsors of meetings—usually from the pharmaceutical companies.

Dr Rao describes his initial experiences as he set about trying to form a group dedicated only to learning:

My practice those days was semi-urban, though today it is fully urban and, in the vicinity, there were four general practitioners [GP], two of them senior to me. I felt I should moot the idea to them. The first worthy I went to thought I was a patient and I could see the disappointment on his face when he came to know that I am a fellow GP and possibly a competitor. He was polite but dismissive of the idea and told me to my face that he gets enough updates from pharma company representatives. I later came to know that he never attends any professional meetings but still was quite successful and no wonder he felt mine was a wasteful venture. The other senior was also lukewarm to the

idea and felt he may not be able to attend given his busy schedule.

The other two agreed and we set up a meeting at my home. For want of an appropriate name we called it Doctors' club.

Within a few years the club grew to 15 members who lived in different parts of the city. We decided to put a cap at 15 as we found it difficult to host more than this number in our homes. From the beginning we were clear—the meeting will be in our homes and the expenses will be borne by the member doctor and the hostess and no outside agency will be involved. As the meeting is held on Sunday afternoons, once a month, followed by high tea, alcohol does not come into the picture.

Did this experiment work?

This monthly activity has led this group of doctors to become good family physicians and I suspect their rate of referrals and needing specialist help is far less than others. It has fostered friendship based on respect and affection to each other and their families.

More recently, he has published a paper enshrining the principles that have guided his general practice and lessons learnt over the decades (Rao and Prasad 2018¹). I hope that like me, you will find the case studies fascinating.

Readers of this Journal will be pleased to learn of how he studies each issue as it reaches him.

I am a regular reader of NMJI and I read the journal from the back to front. There are a few reasons why I do this. The front-page articles and papers are often full of statistics and other details which my old [grey] brain refuses to understand. In these, I end up reading the introduction and conclusion. Whereas in the back pages I find material that is more interesting and easier to understand and thus hold my undivided attention. These pages also cover a wider range of topics.

Professor Mani's Letter from Chennai is one such and those of us who worry about healthcare delivery and the related issues can easily understand and share his concerns.

1. Rao BC, Prasad R. Principles of family medicine practice: Lessons gleaned over a lifetime in practice. *J Family Med Prim Care* 2018;7:303-8 [←](#)