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Letter to the Editor ...

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Letter to the Editor . . .

Letter from Ireland

Irish doctors will best remember 1987 for the number of hospitals closed down and the many wards closed in other hospitals, coupled with a reduction of government spending on all medical services. This was due to the continuing general recession. The new government elected in the spring of the year promptly introduced severe cutbacks in all areas. This was necessary because of the increasing national debt which had to be tackled by a great reduction of expenditure in all government departments, but especially in the medical services. For a long time, it has been true that the Irish Republic had more beds per head of population than any other European country, but strangely enough a relatively small ratio of trained medical personnel per patient. Many of these beds were part of small private hospitals usually run by religious orders, which often duplicated services in the public hospitals. In recent years the cost of bed occupancy, the higher salaries of staff, and the more expensive instrumentation forced these hospitals to apply for government aid, which was granted. Thus, it can be seen that the newer and more modern hospitals were maintained and the smaller old-fashion ones were eliminated.

The young Irish have always emigrated, ever since the Great Famines of the nineteenth century, and, as is well known, a great number settled in the United States and in Australia. In this century the most constant flow has been to Great Britain. With the closing down of small hospitals and wards in large hospitals, a great number of highly trained nurses and technicians have gone abroad and are unlikely ever to return. When we consider the high cost of educating and training these people, the government and taxpayer have food for much thought.

A second consequence of the recession has been the continued efforts by the government to increase revenue by direct and indirect taxation. Now in principle

all patients living in the Irish Republic are entitled to free hospital treatment, but in practice up to 30% use a private insurance company called the Voluntary Health Insurance Board. Its workings are similar to the Blue Cross but the Board holds a monopoly. All hospital bills are paid in full and a grant is made towards the physician's or surgeon's bill. Likewise, the general practitioners have an agreement with the government to be paid on a fee per item basis. Unfortunately, a withholding tax has been introduced (35%), so that the initial remuneration is reduced by this much before tax claims are made. However the general practitioners are negotiating a new form of payment of a fixed sum per patient per annum. To this will be added many benefits of state service, which include paid holidays, locums, sick leave, and provision for pensions, etc. Thus, we see more state control and consequent reduction of doctors' independence in exchange for security.

In the past few years, but especially in the last year, there has been a great increase in the number of legal actions taken against doctors by patients claiming negligence. This may have been stimulated by the much larger awards made to successful litigants. It may also be associated with the increased media coverage and publicity. In another way, this type of case also reflects the shortages caused by the recession. One consequence has been for medical insurance agencies to increase their annual premiums, which were extremely low in these islands and even yet in no way approach the very high costs in the U.S.A. and Canada. Again, in its own way, this has had the effect of increasing the cost of medicine in general, because of a more defensive type of medical practice, e.g., more tests being ordered and patients being kept longer in hospital.

Other items of interest include reports which suggest that 20% of first pregnancies in this country are conceived out of wedlock and that 10% of children are born

to unmarried mothers. One must remember that Ireland is the only country in the European community which has no law allowing abortion, and neither is divorce granted. The consequences of this include an estimated 4,000 Irish women per annum going to Britain for termination of pregnancy. There is no legally permitted counseling for these unfortunate people. They tend to be advanced in pregnancy when they arrive in England. A private Members' Bill in the British House of Commons last year failed to get a reduction in the legal time limit when termination of pregnancy is permissible

from 28 to 24 weeks. Again a change in the laws concerning inheritance to allow illegitimate children to have the same rights as those born in wedlock has been made. Also the adoption laws have been improved to give more consideration to the natural mother, and to allow the adoption of children of married couples. Thus, all is not gloom, and we look forward to the end of the recession with considerable financial help from the E.E.C.

—Robert F. O'Donoghue
Cork

Dr. Ayd Honored

During its annual meeting in San Juan, Puerto Rico, Frank J. Ayd, Jr., M.D., emeritus director of Professional Education and Research at Taylor Manor Hospital, was designated the 1988 recipient of the Paul Hoch Distinguished Service Award of the American College of Neuropsychopharmacology, the largest and most prestigious college of its kind of the world. Dr. Ayd is also editor of *The Medical-Moral Newsletter*.

Established in 1964, the Hoch Award is given periodically to a member of the college who has made unusually significant contributions to the college. Dr. Ayd was one of the founders of the American College of Neuropsychopharmacology, and has been a fellow of the College for 27 years.

This is the second major award received by Dr. Ayd this year. In October, he was the first American recipient of the international Open Mind Award in Psychiatry, presented by the Janssen Research Council of Belgium.