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Letters to the Editor ...

Catholic Physicians' Guild

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Letters to the Editor . . .

Dear Editor,

Re: *President's Perestroika etc.*

Grace and peace be with you; and thanks for continuing to send me a complementary copy of the *Quarterly*, which I have just received and am reading.

I have just read the President's Page on which he treated of *Perestroika, Glasnost and Beyond in the NFPCG*. I follow his concerns and his exhortation very well and I appreciate it very much. However I notice something which could easily lead to a very dangerous oversight in that call and the subsequent positive responses to it as I hope (indeed am sure) there will be.

Much as we must be positively anxious not to lock ourselves inhouse in our moral concerns, and especially in our thinking processes about them (that is, as he says, such that we do not allow even the dissenting opinions to be freely expressed, heard and discussed), we must *realize that even for that, there must be a limit!* Otherwise we will no longer be what we must be if we are to be true to ourselves; i.e. like Jesus, a sign of contradiction in the world! Even the Jesus whom we (should) imitate knew how to be open but also *when to insist on truths and damn the dissenters; even invite them to increase* if they will!, (at the teaching about receiving his body and blood, Jn6; At the last supper as he urges Judas to go and do what he intended to do!, Jn 13:27; etc).

What I am saying is this, in seeking *Perestroika* and *Glasnost*, we must be clear in our minds that what we are doing is to act *in greater charity* to those whose faith is not enough *as yet* to perceive the truth as it is and as Christ reveals it most fully only in his One, Holy, Catholic, and Apostolic Church! Its purpose is NOT to enrobe ourselves in the false secular humanist garb of "civilised" but truly mindless openness!! To do that would be to die, and worse still, to become another secular humanist monster organisation finely dressed externally with the truly civilised name of Catholic Christianity!

In Him.

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Dear Editor,

Three areas have dominated medical news items in Ireland over the past year. These were the financial pressure general practitioners are under, lack of places for non-consultant hospital doctors and the great success of the new Irish Hospital Consultants Association (IHCA) which has now negotiated a substantial (30-50%) increase in consultants' salary. Within the last few months the surprising Supreme Court decision to allow a fourteen-year-old alleged rape victim the right to an abortion is also receiving a lot of attention as we now technically have the most liberal abortion laws of any country.

This is not a very happy time for GP practice in Ireland. Financial pressure is coming from different sources. There is a 35% withholding tax on all official payments. There is also an increasing awareness of the need for computers and to become more efficient. Over the past few years there has been a very rapid rise in insurance premiums and, on top of all that, new EEC regulations on health and safety at work could make GPs liable to heavy fines if practice premises are not up to standard. Development of a proper infrastructure for Irish general practice, the introduction of incentives for screening and prevention services and a division of fees between expenses and treatment costs will form the main strategy for GP discussions on an upcoming review of medical services.

In a report published late last year, the Irish Medical Organisation (IMO) were very critical of the lack of proper manpower planning in the profession. The emigration of Irish trained medical staff is reaching an all-time high with approximately 75% of the annual production of 425 doctors leaving the country each year. At the same time immigration of non-EEC doctors into Ireland has continued to rise. The introduction in 1988 of a 65-hour week for junior doctors led to the creation of 300 extra jobs for non-consultant hospital doctors (NCHD's). This worsened the imbalance with consultants so that the ratio of two NCHD's for one consultant is now the highest in Europe. Our ratio of one doctor for 628 members of the population is almost double the European average.

In 1990 public and private beds in public hospitals totalled 13,704. In 1991 this figure dropped to 12,172. A new system has now come into operation aimed at reducing public waiting lists and eliminating queue jumping. It was claimed that some patients being treated privately by their consultants were gaining speedier access to public beds as private patients and displacing public patients. It will now be no longer possible for private patients to avail of public beds. The number of public beds is also increased by 1,200 at the expense of non-designated beds and some private beds. It is hoped that this will ease the 37,000 public patients on waiting lists. 73% of all beds will now be public, 19% private and 8% non designated.

Expenditure by the state on drugs and medicines for 1991 was 118 million Irish punts (approx. 190 million U.S. dollars). This was an increase of 3.5% over 1990. Hospital expenditure overall was unchanged at 38 million whereas community drug schemes increased by 18% to 33 million. The total expenditure on drugs and medicines last year (including private) was 189 million which was an increase of (5%) on the previous year.

On the AIDS front it is true to say that the majority of Irish doctors would still have no experience with AIDS patients. Since 1982 262 patients have been classified as having AIDS. Just over 100 have died. 1,200 have tested positive for HIV. 50% are drug misusers, 20% homosexuals, 10% suffer from haemophilia, and 10% are heterosexuals (mostly contacts of the former groups). The remaining 10% comprises 79 babies and others unspecified. The media are promoting the need for condoms to prevent spread.

On the political front the ruling Fianna Fail party (now in a coalition government with the much smaller Progressive Democrats) changed leaders recently. The new Minister for Health is a former GP who has been in politics for a long time. He is somewhat of an unknown entity, unpredictable but with definite liberal views. The country is now in turmoil over the recent Supreme Court decision making abortion legal when the mother threatens suicide. This is generally regarded as a very strange interpretation of the 1983 amendment

to the Constitution which everybody thought guaranteed the right to life of the unborn. The liberal media, — TV, radio and press are all promoting abortion under limited circumstances. All political parties with the exception of Fianna Fail are also openly promoting a similar view. Fianna Fail are not saying but they have a definite inclination to sort out the problem of the Supreme Court decision by legislation rather than by another referendum on abortion which would be necessary to overturn the Supreme Court decision. The whole issue is complicated by a referendum on an EEC union treaty (Maastricht) which must be held before the end of 1992. The Pro-life lobby claim that this will impose European abortion laws on Ireland unless the Supreme Court decision is overturned before the treaty vote. At the moment there is every possibility that those completely opposed to abortion in Ireland will be opposing the media, which is influenced by the union of journalists (London based and pro-abortion) and the leadership of all political parties in the Dail. There is some chance that pro-life will again win the day however, especially if the Catholic Church authority gives public support. A new Christian Principles Party to represent Christian values are trying to get established amid all this confusion. It could only happen in Ireland but then again if we are different for the right reason it is good to be different.

It is interesting that in the medical press journalists are also taking a pro-abortion line for the most part but letters are more balanced against, in keeping with the general population. The Professors of Gynecology units in all four main teaching centres have come out strongly against abortion and psychiatrists have castigated the suicide clause in the Supreme Court judgment based on an opinion of one psychologist as medically unsound. Medical meetings are now considering the ethical implications of abortion. 1992 will see some important decisions made for the unborn in Ireland as it will in the US. Keep us in your prayers.

**Dr. James Clair
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Ireland**