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Musings of a Layman ▲ ▲ ▲ ▲

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IF YOU WANT to make your patients happy, charge them a fee sufficiently large to provide after-dinner conversation. For some reason, my attempts at small talk fail because I have never been fortunate enough to be what could honestly state, "victimized by a physician. Lampooning the medical profession has not only become fashionable, it has become a science. This worries me, a layman whose slight knowledge of medicine is the result of osmosis rather than any sincere effort to master the art of healing, and yet why should it worry me? What do I have at stake?

Since this is written for a publication geared to physicians, it would be insulting the intelligence of my readers if I intimated that an answer were necessary. Physicians know the answer, hospital personnel know the answer, but does Mr. Average Citizen know too?

May a troubled layman make a suggestion or two?

Organized medicine (admittedly an inaccuracy) has to snap the whip by purging (a despicable word), wherever possible, the increasing number of humorous (to the uninitiated) cartoons which are sensitizing the public through an insidious and subtle type of therapy which in effect pictures the physician as a combination of

Nero and Henry VIII and the public as a much maligned Topsy. The stories and quips with double meanings, the blasé notoriety that erupts when one physician makes a wrong turn are insidious. Your own technique, the power of suggestion, is being used to demean you and your profession.

Perhaps it is unfortunate that most physicians have little contact with the public they serve except when the doctor-patient relationship exists, a relationship not conducive to revealing honest attitudes. Pay a visit one day to the recreation rooms of some of our factories, or neighborhood clubs, thumb through the periodicals available at any airline or railroad newsstand. It might be surprising to see what clippings are posted on the bulletin boards — not obscene, not objectionable to anyone but you; yes, you will always be pictured as the big, bad wolf. Sadly enough, some will be reprints from your own periodicals.

Censorship — no, but counter-attack, yes. Never underestimate the power of the press or the gullibility of the average American.

Why can't physicians get together? I was amused, surprised and stunned, in that order, when the administrator of one of our hospitals informed me that her staff did not want to grant staff membership to either the patholo-

gist or the radiologist although the credentials committee recommended their acceptance. The staff was all for accepting them as department heads and so voted, but did not, apparently, want to accept them as physicians. It seems strange to a lay person that there should be a caste system among doctors, that some are considered technicians, others merely tolerated because they have not concentrated on one phase of medicine, but rather have given full attention to human misery in its totality. In years past, did administrators deny general practitioners the use of their hospitals, prevent radiologists from becoming members of the active staff? — or was it the medical staff that vetoed their acceptance?

To the average professional in other fields, the controversy involving methods of compensation is ludicrous. On my desk at the moment is a news release announcing the opening of a new clinic supported by Mr. Reuther's union. In it the statement is made that 75 full-time physicians will be employed by the clinic. In New Jersey, one of the Assistant District Attorneys has publically announced an investigation into the relationships existing between physicians, specialists, and hospitals. He will probably pursue this if it is politically expedient and if he does an intelligent job, he can get reams of publicity for himself and his party at the expense of both hospitals and physicians. It will be difficult for even the best public relations firm to create a favorable image for men whose salaries run

to five and six figures after such publicity. The unfortunate aftermath will be the impression that physicians salaries run into six figures and restrictive legislation will surely follow. Perhaps one would be exchanging the Cadillac for the Rambler as a status symbol.

Psychiatry was dealt a severe blow by the recently publicized talk presented at the A.M.A. meeting held in Miami, Florida in which legalized abortion was suggested. To thousands of Catholics this meant a disregard for any moral code and has created distrust of this branch of medicine which will inhibit consultation by those who might be helped. But worse than that, it symbolizes the philosophy of medicine in the minds of many.

Why is medicine failing to attract our better young students in adequate numbers to meet the need? Many superficial answers are readily available — cost, time, and others. The real reason is just as apparent if one cares to search for it: the profession, as a profession, has lost its appeal because somewhere, somehow, the idealism, the spirit of service, the man image has been destroyed.

This is the task facing physicians today; the restoration of respect for the practice of medicine based upon service to a community. Physicians represented by any spokesman should declare a moratorium and for one year refrain from supporting any negative report and spend the fees now allocated to lobbying in an effort to acquaint their membership with

the danger of being relegated to the position of civil servants.

It's absurd to oppose loss of autonomy by platitudes instead of correcting the cause. It may be too late to build dikes; perhaps the need now is for boats.

Medicine and its contribution to the health and happiness of every individual is not sufficiently appreciated because no one has taken

the time to advise of the problems involved in practice. The physician is fast becoming a journeyman because no one has explained the intricacies of the profession. The physician must be given autonomy; he must be revered for all humanity suffers. This, it appears to me, is the task facing our County Medical Societies.

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