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Foreign Communications: Letters from Japan, Ireland and England

Catholic Physicians' Guilds

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Foreign Communications...

Letter from Japan . . .

There is a strong section of the Japanese Association of Catholic Doctors in the Tokyo district, and regional meetings are held monthly. At the January meeting Dr. T. Miura, President of J. A. C. D., presented his impressions of the Third Asian Congress of Catholic Doctors and of the 38th International Eucharistic Congress, both held in Bombay in November and December 1964. He also announced that the Fourth Asian Congress will be held in Tokyo in 1968 and urged the executive committee of J. A. C. D. to begin preparations.

The February meeting featured Dr. and Mrs. Kenneth G. Johnson. Dr. Johnson, Associate Professor of Clinical Medicine at Yale and currently Chief of the Medical Service for the Atomic Bomb Casualty Commission in Hiroshima, spoke about the motivation and life of Christian physicians, drawing largely from St. Thomas More. Following his talk there was a lively discussion about birth control.

The President of J. A. C. D. plans to visit New York in May to participate in the 122nd annual meeting of the American Psychiatric Association as well as the Scientific Section of the Guild of Catholic Psychiatrists.

—Taiei Miura, M.D.

Tokyo

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Letter from Ireland . . .

As I write this letter, we await the results of a General Election in which all Parties emphasized the importance of Social Welfare. Each had its own ideas of the improvements necessary, admitting that the existing facilities are inadequate. Our Government's expenditure on health is included with the five lowest in Europe. When so, this spending takes a great proportion of the annual budget and perhaps one-quarter of the local rates. Fortunately, relations between the Ministry of Health and the Irish Medical Association have improved greatly, even to the point of regular meetings and negotiations. For some years a deadlock had existed because of disagreements over the working of the Health Act—particularly in relation to terms of consultation, appointment in local authority hospitals. Again, the Irish Medical Union and the Irish Medical Association have realized the value of cooperation, and seem to appreciate their separate and special functions in medical matters.

All this paints a rosy picture, but if a more all-embracing Health Service is instituted, we will need to marshal our forces properly to prevent a situation such as occurred in Belgium. You will remember how a National Strike of doctors was deemed necessary to guarantee basic professional freedom for doctors under the State service. The unity and loyalty to cause of the Belgian

doctors gave a great example to other countries who might have to face a similar problem. Irish doctors do not show such agreement at the moment. The doctors who led the Belgian strike came to speak to the annual meeting of the Irish Union, and gave much good advice, which we hope will not have to be used.

The cytological diagnosis of cancer, especially uterine, is presently being developed in this country, but the public is not very well educated in cancer prevention. Logically, the first step is to educate the general practitioner. This was done at the annual general meeting of the Irish Medical Association held in Galway in July, 1964. An entire day was devoted to a Symposium on cancer diagnosis by a team of experts from two American cities. Present Irish statistics show a very low incidence of cervical cancer, which may be associated with late marriage and consequent small families.

The first European Congress of Catholic Doctors was held in Valetta, Malta in September. This was attended by doctors from all European countries and included a delegation from the Irish Guild of St. Luke, Saints Cosmas and Damian. The subject of the four-day meeting was "The Catholic Doctor and his Apostolate within the Family." The Irish Master General, Dr. P. C. Jennings, read a paper on the problems encountered in Marriage Guidance Clinics. This was very relevant to the problems under discussion and it was apparent that Ireland was not lagging behind in this apostolic work. These Clinics are run by counsellors who have been

chosen following interview and aptitude tests. Then follows a six months' course of lectures, mostly at study week-ends, given by priests, doctors and social workers who have had previous experience. Patients are referred to the Clinics by confessors and doctors. The principal problem is family limitation and the use of the infertile period, but many other situations arise which need counsel. Priests and doctors are available for consultation, but the basic family doctor-patient relationship is always respected. Such Bureaus are already functioning in this country. Their work will eventually embrace other such services which have been in action for some years; viz. pre-marriage lectures for engaged couples, lectures to young marrieds and talks on sex education to children of school-leaving age. This latter work is absolutely essential and will show results in the next generation, when parents will be properly trained to educate their children in matters of sex. There is great enthusiasm for this work among young priests and doctors.

While the Irish missionary effort has always been great in proportion to the population, a much greater number of missionaries, altogether unwitting and often unprepared, exists in our emigrants. It is unrealistic to think that this century old diaspora will cease suddenly. We hope that the new generation will give a better account of itself.

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Letter from England

On the first Sunday in Lent when Mass was said in English many will have thought of their forbears in the 16th Century who must have listened to the Mass in their own tongue for the first time with sad hearts. On this occasion, also a reformation in a way but initiated in Rome by good Pope John, the responses were loud, clear, and cheerful. Welcomed by the vast majority by whom it is felt the congregation now actively participates in the Sacrifice of the Mass, there are some who regret the passing of Latin and time for private prayer. Their wishes are not entirely ignored for in the Southwark Diocese at least a Mass will be celebrated in every church once a week in Latin.

Twenty-five years ago, according to the British Broadcasting Corporation, "it was possible to assume that most of its listeners would be at least nominally Christians. In 1965 this cannot be assumed." On what data the B. B. C. bases this assumption is not indicated but on it they have brought to a close an outstanding feature, a five-minute talk each morning entitled "Lift Up Your Hearts." In it Christians, clerical and lay, of all denominations and from all walks of life spoke for five minutes. The talks were varied and interesting. The B. B. C. has had an avalanche of protests, all of no avail. In an editorial entitled, "Cast Down Your Hearts" the *Daily Telegraph* calls this action a cruel blow to the aged and bed-ridden to whom the B. B. C. owes special duties. It is replaced by what

is called a religious programme, "Ten to Eight." Among miscellaneous items offered so far was a left wing ballad of unusual length and an extract from a book by Aldous Huxley.

A commendable feature of the contemporary scene is the solicitude shown for the elderly by public and private bodies as well as individuals. In most districts social clubs for old people are established where home visits are made, and individuals are encouraged to play the part of good neighbour. In our own district the club established by the local authority is flying out forty of the old dears to the Rhine for a fortnight holiday. Meals delivered to the home (not always very appetizing unfortunately), free chiropody service, home helps, visiting nurses when necessary, and laundry facilities gratis—all these make the lot of the old and lonely much easier to bear.

The discontent which has been smouldering for many years now in general practice under the National Health Service (1948) has finally burst into flames. 17,600 of Britain's 23,000 GPs have placed their resignations in the hands of their negotiators who have been in negotiations with the Minister of Health for the past few weeks. These have now ended and we await publication of the results. Final decision on resignation will be made at a meeting of the doctors in London on June 23rd. Discontent is not confined to pay rates (21/- a year for the medical care of each person on a doctor's list, compared with £ 6-10-0 for their daily newspaper), for the

whole system has debased the practice of medicine by the abuse of the free-for-all system. Last straw was the removal of the prescription charge, an act which has flooded the doctor's surgeries out with queues of medicine swallows, shopping lists in hand. Nothing short of a new deal is demanded and the B.M.A. have prepared a medical insurance scheme which they intend to launch one way or another.

Defenders of our National Health Service always point to America as the dreadful example of a country without socialized medicine. We are led to believe that to get ill in the U.S.A. means bankruptcy and that the doctors are so rapacious that

they are anything but "beloved physicians." Well, we must leave our American colleagues to answer this charge and hope someone will do so in the next "Letter from America."

It was with a pang of regret we saw the wall of the Anglican Church of St. Luke in our road bear a demolition firm's sign inviting the passer-by to "Watch It Come Down." Alas, it is only one of the many Anglican churches in Central London that have lost their congregations—a sad commentary on the affluent society.

—W. B. J. Pemberton, M.D.
50 Grange Road
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