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Letter from Ireland

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Letter From Ireland

This Easter time we celebrate the 50th anniversary of the Insurrection which was the first step towards our gaining independence. It is fashionable at this time to review progress in the past fifty years. Granted, enormous strides have been made in the field of medicine, but the students' course in University has remained about the same length. The subjects have become much more complex and seem less orientated to the production of the embryo general practitioner. Proportionately fair teaching in all branches of the art and science of medicine is given, but these lectures have been given by specialists, who cannot fail to emphasize their own subject. This may give the most up-to-date knowledge to the student, but it leaves him wondering what the "compleat doctor" does in his practice. In an effort to help in this matter most colleges now have one or two lectures in the final year by family doctors on the broad principles of general practice.

The new graduate is required to be an "intern" for one year before registration and license to practice. His troubles begin immediately. There is a chronic shortage of house officers and consequently long hours of duty. In most cases few facilities are available for study or reference, and whilst there will be a steady flow of interesting cases in the wards, specialist chiefs can be very busy. Long hours are spent in theatre and follow-up clinics — all the time the emphasis is on specialisation.

Several surveys have been published in the past year showing the reduction in the numbers of new doctors going into general practice. This trend is world-wide. The Southern Irish Faculty of the College of General Practitioners has published a very detailed analysis of the Career and Migration of Medical Graduates from University College, Cork. Before 1950, 60% of graduates settled outside the Irish Republic, mostly in the United Kingdom, and 60% of these went into general practice. Since then, more than 75% go abroad, more than half of whom are not in the United Kingdom, and only 40% in general practice. The remaining 50% are almost all in the United States of America or Canada.

The trend to specialise abroad and the lack of post-graduate teaching in this country are shown clearly by these figures (43% of returning doctors are specialists).

Most general practitioners would aim for a public appointment as a District Medical Officer, who is given an area where his services are available for public health and general medical attention to those whose incomes fall below a certain level. He has many other duties, but basically this is a salaried post with pension and permission to engage in private practice. This gives a great start in life to any young doctor, and many train particularly for this.

A recently issued Government

White Paper proposes to change this system to a health service where 90% of the population will be eligible to attend the doctor of their choice, and payment will be by capitation. The lack of guaranteed income must be very discouraging to any young doctor training abroad before returning home.

These are just some facets of a very serious problem, which begins at student level and continues to the stage where the public may find themselves short of the family doctor who is the backbone of medical service. This would be particularly true in the thinly populated areas in the south and west of the country.

In general, progress is reported in the field of marriage guidance clinics and sex education lectures to school drop-outs — most necessary because of the high emigration rate. We are still active in the Mission fields — the diocese of Cork and Ross has recently taken over a large

tract of Peru as a parish to be supplied from home.

While we all await the findings of the Papal Commission on Birth Control, the medical profession is very alarmed at the proposed relaxation of the abortion laws in Britain to include (a) suspected abnormal foetus, (b) mother considered unsuitable or incapable of rearing the child, and (c) pregnancies caused by sexual assault. This is a challenge to Catholic ethics quite unlike the older one of abortion for the general good of the mother, and will be harder to combat. The high proportion of Irish doctors in Britain have already considered the difficulty with the prescribing of "the pill." This can only add to their problems. However no doubt our English colleagues are well aware of this, and will take appropriate action.

May, 1966

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THE WHITE MASS is scheduled for October 18 to honor St. Luke, Patron of Physicians. Please to assist at Mass with your Guild for this special observance.
