

SNOW JOBS AND SNOWBALLS

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For over a year now we have been reading the British Medical Association's *British Medical Journal* (the counterpart of our own *J.A.M.A.*) We have followed with interest the editorials, special articles and correspondence columns in which weekly, the predicament of British Medicine is hashed, rehashed and debated. Unlike American physicians, British doctors are a highly literate and outspoken group; they take full advantage of a correspondence section and air their opinions and complaints forcefully and often entertainingly. Of late, however, the tenor of their letters contains little of amusement and is almost universally one of bitterness and disgust. Their recriminations these days are directed not only against the Government and its handling of the National Health Service, but also against the British Medical Association for its cooperation with the Government in allowing the situation to degenerate into its present unhealthy state.

Our own Government generally holds up Britain's N.H.S. (and all other systems of State Medicine) as an example of progressiveness that we would do well to copy here. As you might not know from reading the snow job and propaganda broadsides emanating from our Administration's Department of Health, Education and Welfare, the British health system, during the past ten years, has been faced with crisis after crisis. Its problems have been big ones, real ones and serious ones. Doctors have fled from Great Britain in droves to relocate in this country, Canada, Australia, New Zealand and Africa—anywhere to escape the oppressive effect of bureaucratic control. Resignations from the National Health Service have been increasing steadily as more and more disgruntled physicians return to private practice. The Government has not been able to find money to finance even a second-rate health service, much less make improvements in it.

About two years ago, as a result of these pressures and faced with the signed resignations of a majority of the National Health Services general practitioners, the British Government set up a Review Body to study the problem, and gave assurances to the doctors that it would act to correct the deficiencies. The Review Body's Report (its seventh such) was presented to the Government last spring; most of its recommendations were accepted. In general, these would have increased the pay of the general practitioners and junior hospital doctors to a still limited but more realistic level and also provided for incentive awards and other benefits; included too, were pay increases for medical teachers, research workers and public health, industrial and armed forces doctors. Although granting the increase, the Government did hedge by announcing that the new

contract could not be honored all at once, but instead was to be accomplished in two steps over a one- or two-year period.

The new financial structure was to have gone into effect on April 1, 1966; first payments to the doctors were to have been received on July 1, 1966. By mid-July, neither the GPs nor the hospital doctors had received any of their promised money. Shortly afterward on July 20, as a result of the Prime Minister's austerity decree (and even though their contracts had been negotiated and approved months before), the doctors were included in the salary and wage freeze, along with about 1/4 of the total workers in the country. At the present time, there is little prospect that the doctors will ever get their promised benefits. And once again Britain faces a medical crisis.

Here are some quotes from a few of the letters in the correspondence section of the August 13 *British Medical Journal*:

- *"The meek acceptance by the British Medical Association of the Government's wage freeze policy, has filled me with profound dismay."*

- *"Much as I am in sympathy with many principles of the N.H.S., our only hope of saving medicine in this country is for all of us to resign and offer our services `across the counter.'"*

- *"The only solution for us junior hospital doctors is to follow the steps of many of our colleagues and emigrate from this country as soon as possible, but not before resigning from the British Medical Association."*

- *"Please don't let us have any further discussions, negotiations and the like, which have been a heartbreaking waste of time."*

- *"The effect on the N.H.S. could be disastrous for the following reasons:*

- (1) *An increase in emigration is virtually certain.*

- (2) *The trend to return to private practice will continue with increased momentum.*

- (3) *The betrayal of trust is such that negotiations with the Government will never be the same again."*

- *"The National Health Service, even with all these latest gimmicks keeping it alive, is bound to atrophy from lack of funds and doctors. Let us, while the fire yet burns strongly within us at this latest indignity, strike for our liberty from the petty and ever-increasing tyrannies of this stultifying Service."*

"I am, with 18 years of attempting to make a go of this increasingly impossible Service, etc."

The only reason why Medicine in the United States is not in the same calamitous predicament as it is in Britain, has been the prolonged and stubborn fight by the A.M.A. and organized medicine against our Government's attempts to socialize it. We have been spared for at least 18 years because of our struggle. Our resistance was finally overcome in the rash of social legislation passed by the Great Society's administrators. With Medicare and Title XIX already here, and more welfare medicine legislation in prospect for the near future, we are well on the way toward having the establishment of an American National Health Service forced upon us. We are embarked on the same discouraging road upon which the British started 18 years ago.

There will be no escape from the snowballing bureaucracy of health and medical welfarism. Just as it has proved to be in Britain, the deterioration of medical service in this country is practically inevitable. And because, as a nation, we do not possess the altruism and character of the British, we will make a greater mess of it in a much shorter period of time, and because of our wastefulness and disregard for spending, the cost will be infinitely greater.

It is most unfortunate that the power-hungry politicians of the New Frontier and its bastard offspring, the Great Society, have made such a political issue of health. It is unfortunate for us as physicians. It is even more unfortunate for our patients and for the tax-burdened public.