

Doctors: A self-perpetuating profession

By Mary Louise Adams

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About half the time since third-year medical school has been spent in pursuit of the useless and the arbitrary, which are justified by the diaphanous explanation that they are a necessary part of being a medical student and becoming a doctor. Bullshit. This part of thing is simply a hazing and harassment, a kind of initiation rite into the American Medical Association. The system works, too; God, how it works! Behold the medical profession, brainwashed, narrowly programmed, right wing in its politics, and fully dedicated to the pursuit of money ... — R. Cook, *Year of the Intern* (New York, Harcourt, Brace, Javanovitch, 1972)

Medical doctors are increasingly coming under attack. Concerned individuals are questioning the priorities and policies of the health care system. Physicians' use of overly complex procedures, heavy reliance upon often harmful drugs, and an obvious inability to treat the patient as a whole person have led people to question whose best interests doctors really have in mind.

Medicine is one of the most economically secure professions in our society. It's no coincidence then that most doctors were raised in economically privileged circumstances. Like attracts like, and medical school admissions officers are no exception. The homogeneity of the profession is startling.

According to Canada's Royal Commission on Health Services, 73 per cent of physicians had fathers whose occupational class was among the top 17 per cent in Canada. Fifteen per cent of the physicians had doctors for parents. Indeed "cronyism" (favouring the sons and, in rare instances, the daughters of fellow physicians) has seen many a mediocre student through medical school admissions procedures.

The majority of medical students in Canada are white, middle-class, Canadian males. Only Spain has a lower proportion of women in medical schools than do Canada and the United States. In the early 1970s, the Canadian trend was for women to comprise about 13 per cent of the total enrolment. That figure has risen slightly since then.

From the moment they are accepted, medical students are groomed to be "professionals". They are socialized to be doctors. According to Martin Shapiro, a McGill medical

school graduate and author of the book *Gettin Doctored*, a grueling curriculum, heavy competition, and innumerable rituals combine to strip students of their pre-professional identity. He suggests that faculty members actually screen potential students to weed out activists. Docility and unquestioning acceptance of procedures and policies are encouraged.

The further along students proceed, the more deeply entrenched they become in the "profession" and the less likely they are to criticize or analyze it. The more necessary it then becomes for the consumers of health care to compose a critique of the system that was established to serve them.

Established medicine as we know it, hospitals and doctors in particular, have a virtual monopoly on health care. Few alternatives to institutionalized medicine exist. Those that do are relatively inaccessible to all but a minority of the population.

Our society has given doctors the exclusive right — the power — to define disease and determine how to treat it. In so doing we have denied patients (denied ourselves) the ability to decide what is best for them. We lose sight of everyone's potential to initiate healing themselves.

In *Limits to Medicine*, Ivan Illich writes that our surrendering control of medicine has led to an iatrogenic (physician-caused) epidemic, a burgeoning level of ill-health directly related to the policies and practices of the medical system.

Medicine as an institution is becoming counter-productive. The clinical damage it produces (from unnecessary or hazardous treatment from the inevitable "side" effects of drugs) is beginning to outweigh its benefits.

It "mystifies" and denies the power of individuals to heal themselves, thus enforcing their dependence upon the system. And further, the position of medicine as a money-making enterprise in a capitalist economy, means that the profession, the institution itself, actually has cause to maintain those social and economic conditions that make individuals unhealthy (ie. environmental degradation, hazardous occupations, social inequalities).

According to Illich, the cost of medical care in the United States rose 330 per cent between 1956 and 1976. Since 1950, the cost of staying in the hospital rose 500 per cent. During the same period the average life expectancy for males decreased.

In his book *Mirage of Health* Rene Dubos outlines recent trends in the types of diseases afflicting society. Since the mass killers of previous centuries have come under control — infectious diseases like smallpox, T.B., typhoid, cholera — two-thirds of all deaths are now associated with old age. The changing causes of mortality are generally ascribed to improvements in the medical system. But Dubos finds no evidence to support this. For over a century, analyses of disease trends have shown that the environment is the primary factor determining the state of general health in a population.

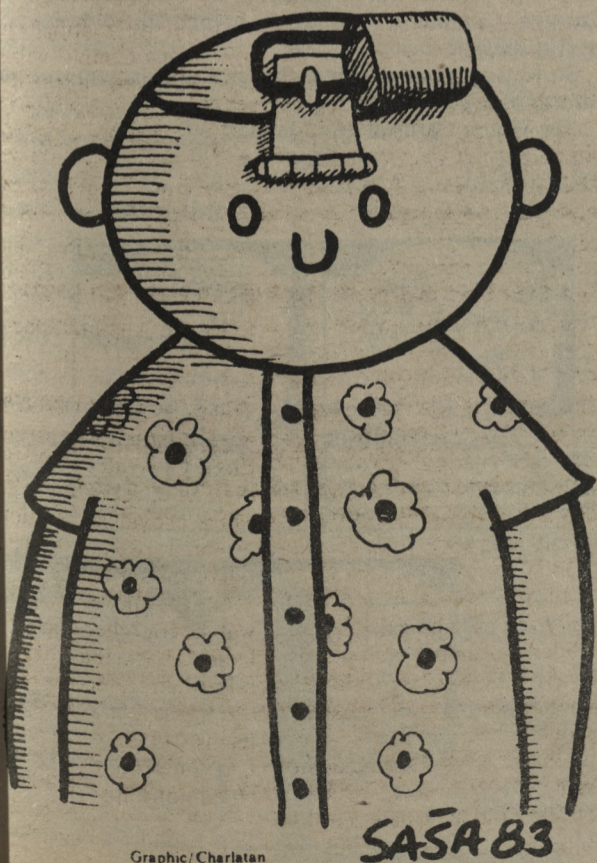
Malpractice in varying forms has always played its part in the medical profession. But what in early days was decried as a moral failing is now explained as a "technological breakdown" or a "random human error".

In 1971, Americans filed between 12,000 and 15,000 malpractice suits. Less than 50 per cent were settled in less than 18 months. More than 10 per cent were not settled for more than six years. Only 16 to 20 per cent of the money paid in malpractice insurance compensated the victims. The rest found its way to lawyers and medical experts.

Doctors can only be charged if they have acted against the medical code, have performed incompetently (by whose definition?), succumbed to laziness, or acted out of greed.

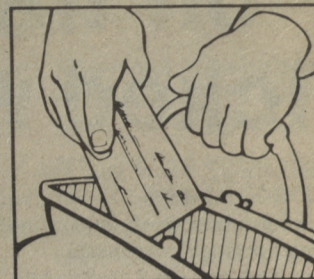
Unfortunately, most of the damage caused by the medical system has nothing to do with the "Professionalism" of the doctor. It is part and parcel of everyday procedures. It is estimated in the U.S. that at least seven per cent of all patients suffer compensable injuries while hospitalized.

The professionalism and elitism of the medical establishment has served to alienate increasingly dependent patients from practitioners and ultimately from their own bodies. In turn, doctors have become alienated from society and from their former ideals. In this respect the medical establishment is no different than any other sector of our overly industrial, technological society. And it cannot be expected to change radically without concurrent changes in the rest of our society.



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