

SPECIAL REPORT: MR. FUOSS AND THE DOCTORS

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A controversial editorial entitled "The Doctors and the A.M.A.," by Editor Robert Fuoss, appeared in the February 3 issue of the *Saturday Evening Post* and set off considerable discussion in local and national medical circles during the last two months. The *Bulletin's* desk had been flooded with releases, reprints and directives from the higher echelons of medical organization (originating ultimately, we suppose, by way of state and national medical offices, from A.M.A. headquarters), all dealing in angry rebuttals to the offending piece. We have been urged also by members of our own county society (one of whom canceled his *Post* subscription in protest) to take the challenge and dive into the boiling waters with comments of our own.

Even though a *pot-au-feu* like this offers natural editorial meat, our stomach is a little queasy at times, and we do harbor a number of mixed feelings toward each side of the quarrel. Over the years we have grown so accustomed to the editorials, cover stories and lead articles that appear with monotonous, monthly regularity in all of the national slick-paper magazines, exposing or attacking some phase of medicine, that we now take our annoyance for granted and plod along in our dull, clinical way doing our best to mind our own business. We have come to accept the fact that medicine and the doings of doctors, hospitals and the A.M.A. will be subjects dear to the hearts of television, newspapers and politicians, and to the editors and circulation managers of magazines until all of us float away together in currents of atomic dust. The countering reaction of so-called "organized medicine" to these attacks, calling on us, its splintered periphery, to rise in indignation and speak out, write letters or call congressmen, is similarly a source of annoyance to us, since it reveals the existence of a pressure-type public relations organization constantly exhorting us, in the manner of the TV program directors who hold up the audience cards, to applaud, boo, whistle or scream as the occasion demands. We resent being told how to act or react as much as the next fellow and would much prefer to jump into action on our own hook without being goaded by frantic and undoubtedly biased cheerleaders.

In all fairness to Mr. Fuoss we should say first that reactions to the editorial here locally, by a number of friends—medical and lay—whom we interrogated specifically about it, have been varied; some felt the editorial was for medicine and the doctors, others felt it was against; some agreed with many of the statements, others took issue. Nevertheless, having been prodded into motion and hoping to clear up some of our own fuzzy thinking, we reluctantly dug up that issue of the *Saturday Evening Post* and re-read the entire piece with all of our senses alerted and our critical claws sharpened and readied for the pounce. We have gone through it several times now and have discovered that Mr. Fuoss, like us, is also a fuzzy thinker who shares our confusion and mixed feelings, although it is possible that he does so deliberately and with a purpose in mind.

Editor Fuoss' subject is so broad and presents so many vulnerable facets that he strikes out in all directions simultaneously and not infrequently finds himself sentimentally embracing the poor doctor with one arm while giving him an elbow to the groin with the other. He brings up all of the usual beefs—rising public resentment over impersonal medical care, indignation over increased costs of medical services, resentment of doctors' affluence, deterioration of doctor-patient relationship, annoyance with medicine's pompous I'm-the-doctor-you're-the-layman attitude, while throwing in a pinch of backhanded sympathy for the long work hours and costly years of medical schooling and preparation. He believes that the medical profession is in trouble—"The American doctor is more widely criticized today than at any other time"—and points to the increase in malpractice suits and the decrease

in the number and quality of medical school applicants as evidence. Some of Mr. Fuoss' mixed feelings come out in all portions of the editorial. In one paragraph he feels that, "In this century no profession has contributed quite so much to our national well-being as the doctors'," and he holds great reverence for the "men in white" because of their achievements and devoted service. (We love you too, Mr. Fuoss.) Six paragraphs later he remarks, "The doctors as a group have in essence been against everything that America is for." (But we are *for you*, Mr. Fuoss.) In another single paragraph he accuses the profession of constantly reacting and resisting social reform, while proclaiming that as far as he knows "there is no serious support anywhere in America for anything resembling socialized medicine." Fuoss has apparently investigated thoroughly all phases of society in regard to socialized medicine and states categorically that, "The politicians don't want it; the press doesn't want it; it is not wanted by labor or management, rich or poor, North or South." (Really, Mr. Fuoss, we are for you and your politicians and press, too.)

There is a villain in the article, and it is that old stand-by ogre, "organized medicine," in the convenient form of the A.M.A. Mr. Fuoss peppers it unmercifully with a rolling barrage of Fuoss-facts: "the A.M.A. has done precious little in our lifetimes to make us patients feel that medicine is on our side . . . the A. M. A., for example, opposed hospitalization insurance . . . the A. M. A. opposed all kinds of group practice." In spite of all this, to show that he has no hard feelings about even the A.M.A., he suggests, in regard to care for the aged, that if that body would stop crying wolf about this socialized medicine business and tell Mr. Kennedy that his plan will be unworkable because the doctors are not enthusiastic, and therefore will not do the job well because their hearts are not in it, that even he, Mr. Fuoss, might be with them. (We are with you, Mr. F.)

Apparently, all that Mr. Fuoss and his editorial want is for the A.M.A. to quit being so horsey and high-handed, to get over its confusion about what constitutes socialized medicine, and forget this pathological fear of socialization, which to him, "seems the rankest sort of nonsense." He calls on the doctors as members of the A.M.A. to rise to a new kind of "responsible statesmanship." He wants us, as individuals, to join sides with him and the rest of the patient-public in a great show of togetherness to face up "to the hard and nervous task of making this a better place for us all."

After struggling through this resume, when we get right down to it, we find that we have become so involved in Editor Fuoss' ambivalent feelings, we would not be sure were we to encounter him face to face tomorrow, whether to embrace him or give him the old elbow. Maybe we would borrow his technique and do both. You will just have to read the thing for yourselves, while we take off alone about one of the points that stirred us in his editorial.

The deterioration of doctor-patient relationship is lamented by the *Post* editor. He blames this sad state on the fact that while the doctor is aware of the tremendous scientific advances in the past twenty years, the doctor is unable to realize that his patient's grasp of medical knowledge and terminology has advanced equally. Mr. Fuoss maintains that the average patient nowadays is a medical sophisticate ("more than 40% of last year's high school graduates are in college"), and "he has the brains and the vocabulary to participate in medical decisions." Therefore, he advises, in order to improve medicine's public relations and reverse this worsening doctor-patient relationship, the doctors should drop their annoying, authoritative I-know-more-about-this-than-you-do" attitude and confide and consult more with the patient about what should be done.

Now what kind of double think is this?

All doctors would agree that any patient, intelligent or not, deserves an explanation of findings and of what is planned in terms understandable to him. But just because a patient has attended college, read the medical columns in the daily newspapers and mass-circulation magazines, and watched Ben Casey and Kildare on television (these are the graduate qualifications for lay, medical sophistication quoted by Mr. Fuoss in his editorial), we cannot feel too enthusiastic about relying on a patient's judgment in the reading of a differential count or asking his opinion about whether he thinks his case is one of appendicitis or diverticulitis, or whether he thinks surgery or conservative management is the proper course to follow.

Like Mr. Fuoss' sophisticated patient, most of us doctors (nearly 100% of us attended college) have come a long way in electronic and mechanical sophistication from our counterparts two decades ago, through education by the same media mentioned in the editorial. Yet most of us still retreat in bewildered ignorance before the learned, technical explanations of some high-school-diploma-ed TV repairman fiddling about in the confused mass of wiring, tubes and mysterious gadgets inside of our ailing TV set. Or you will often see us nodding blankly over an exposed car engine as the garage mechanic tries to explain in brusque fashion the merits of triple-carburetion and fuel-injection. Lord only knows what help we could offer if called upon to assist in making a decision about repairing an electronic computer or launching a satellite.

No, we believe Mr. Fuoss is off on a false trail here. If anything, the intelligent amateur of 1962 has been outstripped by specialized science and is really less of a sophisticate than he was in the 1920s, 1930s and 1940s. (At one point we almost understood what went on under the hood of a Model-T Ford back in those days.) Cocktail-talk to the contrary, today's patient, and doctor, and editor, would do well to keep mum in the face of specialized knowledge in fields foreign to his own, or his appalling ignorance will soon become evident to all.

As far as medicine goes, we suggest that maybe what is needed to better doctor-patient relationships are more old-fashioned, pompous doctor-authorities and more blindly worshipping patients who know damned well that the doctor, insufferable and opinionated as he might be, has more knowledge about a failing kidney than he. In short, a little more understanding, sincerity and trust on both sides might work wonders.

Recently in Atlanta, at a panel discussion on medicine and its problems, a Texas congressman told the group to take Mr. Fuoss' editorial with a grain of salt. He did not feel, he said, that the editorial necessarily reflected Mr. Fuoss' views, especially in the light of the recent changes at the *Saturday Evening Post*, and that its primary aim was intentionally controversial as a gimmick for increasing circulation. This seems possible to us, although we hate to feel that the editor, idealistic as he is and calling on us to join with him in "responsible statesmanship," would be influenced by circulation figures. We feel sure, too, that if Mr. Fuoss had had any idea that most doctors could be made to bridle and react almost uniformly in wounded false dignity, as when addressed flippantly and patronizingly by the overly familiar patient, he would not have meant to conclude his editorial with the line: "How about it, doc?"

Assuming though that Mr. Fuoss may be like some of his fellow-editors whose conceptions of

statesmanship, moral obligation and responsibility of the press leave something to be desired, we call upon him and his associates in the world of journalism, to join hands with us in the manner in which he expressed it, "as responsible citizens of the Republic," and rise above the level of commercialism—onward, upward and toward a greater, better, socially reformed America.

How does that strike you, Mac?

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