BE PREPARED

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In the steady flow of mail across our desk was a memo the other day from something called Service Editors, Inc. urging us to avail ourselves of their new subscription service. This one is called CLIN-ALERT, and for \$15.00 a year it promises to shower you with special medical releases prepared and sent (air-mail) immediately as the information becomes available. The aim, the memo explained, is to help the harassed doctor keep on constant alert for the first recorded occurrences of "medical adversities." This nice sounding term is apparently a euphemism for some fatal, or near fatal, reaction complicating the use of various therapeutic agents or following some routine medical or surgical procedure.

In the short sample copy, attractively gotten up in the form of a blue-backed legal document, we learned of the following cheerful events: 61 hemorrhages and 9 deaths following long-term anticoagulant use; death of one twin and convulsions in the other after the use of Fluid Extract of Ipecac instead of Syrup of Ipecac as an emergency room treatment for poisoning; permanent blindness in a 55-year-old arthritic after chloroquine therapy; suppression of bone marrow in 26 cases on chloromycetin; and flaccid paralysis and death of a 29-year-old on Fungizone treatment.

It seems that with the latest CLIN-ALERT bulletin in your pocket at all times to warn you of new and unexpected dangers, you will thus be able to skirt peril and thereby strengthen your defenses against the possible "filing of a multi-hundred-thousand-dollar lawsuit."

This prophylactic trend of clinical medicine into the newly developed field of "Preventive Lawsuit Medicine" is one that has disturbed us for many months now. It has gotten so that we tremble every time we pick up a new medical bulletin or newspaper out of the mail pile. Just the sight of a *Medical Economics* is enough to send us cowering into the nearest corner; with each new issue our courage to carry on in daily practice fails another notch, as we learn of some new slip we made that exposes us to the mercy of scheming patients and opportunistic lawyers.

We don't know how all this campaign of doctor intimidation got started, but we have to admire the initiative and ingenuity of the originators of CLIN-ALERT who were themselves alert enough to capitalize on the scare-approach and sell the doctors their service. We certainly hope that the new venture will be successful and prove profitable to its backers, and that they will be more than satisfied with their medical circulation and subscription volume.

The one thought that does make us tremble even more violently is that the originators of CLIN-ALERT might become greedy and want to expand the service into other obvious, prospective subscriber fields: a CLIN-ALERT for the law profession, to keep them up to date on medical malpractice suit opportunities; or a CLIN-ALERT for patients to keep *them* on their toes for a possible multi-hundred thousand dollar windfall.

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