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## **An Adequate Medical Service** [extract]

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he General Practitioner is the foundation of the medical service of a country. It is he who can best help the progress of preventive medicine by the early diagnosis and treatment of disease. His work is all the better for healthy rivalry with his neighbours. Any form of compulsory national service, whether it is of the nature of the insurance scheme adopted in Great Britain, or like that proposed by a former Minister of Public Health, who wished to bring the whole profession under his control, would give satisfaction neither to the public nor to the doctor.

Sir John Tweedy wrote: "Any change, whether effected form within or imposed from without, that restrains the liberty or lessens the responsibility of a medical man or hampers the free play of his intellectual activities, will be detrimental to the authority and usefulness of medicine, and prejudicial to the interests of public health and national welfare."

It is generally recognised that the standard of medical practitioners and of nurses in New Zealand is a high one. This standard is likely maintained by the Registration Acts administered by the Medical Board. In the future, with the great increase of medical students at the Otago Medical School, this Dominion is likely to rely for its supply of doctors mainly on this school. Supervision of medical education should be in the hands of the Medical Board. It would probably be of great advantage to the Medical School if the State took over the Dunedin Hospital for teaching purposes, appointed a Director of the School to control the clinical teaching, and to have a seat in the University Council. Although the cost of medical education is already heavy, it is impossible to carry on the school by the fees paid by students, for these fees amounted last year to only one-fourth of the expenditure of the school. Accommodation is inadequate, facilities for clinical teaching are inadequate, and so are some of the salaries. Let the State take over the school and rectify these defects.

Unfortunately, it was recently decided to add a sixth year to the medical course. But unless this is made a clinical year, the students' time will, to a certain extent, be wasted. There is a great tendency to teach medical, as well as other students, too much. "It is far better," says Sir James Mackenzie,

"to be trained to understand a few matters thoroughly than to have a superficial knowledge of a great many things."

Sir Charters Symonds, in his recent Hungarian Oration, says that Astley Cooper recognised the evil effects of too much teaching, and inculcated, in his students, personal observation of the processes of nature. Discussing modern medical education, he says that it is clear to everyone that the curriculum is overloaded. He proposes to reduce the time spent on the preliminary sciences, and to cut out at least one-third of anatomy, which he thinks might be done without the omission of anything essential and without diminishing the educative value of the subject. There is no doubt the Otago Medical curriculum should be revised, and that could be done by nobody better than the Medical Board which comprises general practitioners well qualified to judge the education from the clinical and practical standpoints.

Why should not the students in their sixth year be distributed amongst the other three large hospitals in New Zealand, each one of which has more clinical material than Dunedin? Would this arrangement not be of benefit both to the students and to the hospitals? Moreover, it would help to relieve the congestion of students at the Dunedin Hospital. It would, of course, be necessary to appoint clinical teachers in each of the other hospitals.

To keep up the standard after registration every opportunity must be given to the general practitioner to keep abreast of the times. The public hospitals should be freely opened to him, and he should be encouraged to attend clinics such as those instituted during the past winter by the energetic secretary of the local branch of the British Medical Association.

To get the best results there must be co-operation and harmony between the general practitioner and the departmental officers. The appointment on the Medical Board of representative members of the British Medical Association, which comprises most of the general practitioners, was the first official recognition ere of the British Medical Association, and was a favourable omen for the future good relations between its members and the Health Department.