## MEN OF MEDICINE TRANSCRIPTION

MEN OF MEDICINE – 1938

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In every US city and town, there is one house that everybody knows: the doctor's. Available here are the services of a man who by law is privileged to practice the most respected of all professions.

To today's 165,000 men of medicine has come a vital trust: to heal the sick and keep the healthy well. And to the nation's 69 schools of medicine is entrusted the responsibility of passing on unbroken the imperatives of medical knowledge, of indoctrinating each young student with the provisions and ethics of his chosen profession. Here he must spend four long years; here he must learn every physical detail, every living function of the human body. He must master the science of chemistry and biology. He must train his mind to grasp and make use of the accumulated knowledge of 20 centuries of medical research. And with his degree, doctor of medicine, he takes for himself the age-old oath of his profession: the oath of Hippocrates.

"Whatsoever house I enter, there I will go for the benefit of the sick and whatsoever I see or hear, I will keep silence thereon, counting such things to be sacred secrets."

His scholastic life ended, the young doctor joins a hospital staff for the period of his internship. Here he is brought face to face with the realities of medicine and of life.

"No, doctor, you hold him this way."

There, he gets his chance to practice firsthand the art of healing and here, from today's great men of medicine, he absorbs the high profession of surgery, ever greater skills, ever improving techniques.

ONLY AFTER INVESTING TEN YEARS AND NEARLY \$15,000 IN HIS EDUCATION AND TRAINING IS THE YOUNG DOCTOR READY FOR A HARDER JOB – BUILDING A PRACTICE OF HIS OWN.

In his chosen community, which from now on must provide his life and livelihood, the young doctor becomes "the new doctor". Unforgettable to every doctor is his first patient, the first advice given, the first money earned. But keenest in his memory is every detail of his first big case.

"Hello? Yes, this is Dr. Gibson. All right, I'll be right over."

"Hello, son. How do you feel?

- Not very well.
- You know Dr. Parsons is our family doctor.
- Yes.

- He's away on a trip and I haven't been able to locate him.
- I see. Right, son. Now, you tell me if it hurts any place. How about that? Well, we'll get you well, Bobby."

"I think he has a very bad appendix. I'd like to have him in the hospital. We may have to operate tonight.

- But Dr. Parson is away.
- I don't think we can wait for Dr. Parson. I'm sure I can handle it, Mrs. Sayward.
- All right, Dr. Gibson."

Like every man of medicine before him, the new doctor must now accept complete responsibility for a life.

With his patient in the hospital, to check his diagnosis, he orders laboratory tests. Analysis of the blood will reveal the degree of infection in the toxic system. He finds the pain has become localized, that around the appendix, the abdomen grows rigid under pressure. This he knows indicates a gangrenous appendix, calling for immediate surgery. But not until the hospital's laboratory completes its white blood (...) count is he ready to make his decision.

"White blood count: 16,400, 95% polys, the side has shift to the left. Thank you."

"Operating room, please. This is Dr. Gibson."

His decision made, into action go those who must prepare for the new doctor and his patient. Surgical nurses select the sixty-odd instruments the doctor must have at hand. Sterilized in live steam, the scalpels, clamps and retractors are laid out in precise formation. From superheated ovens come the surgical robes and dressings.

For from the moment the operative preparation is ordered, there begins the complex ritual evolved from the accumulated experience of all the great men of medicine, designed to protect the patient, remove pain and chance from the operating room. Greatest blessing to surgery is its anesthesia. Discovered less than a century ago by William Morton of Massachusetts and Crawford Long of Georgia, and once ridiculed as being a worthless experiment. From the bacterial discoveries of Louis Pasteur and the development of antisepsis by Joseph Lister, the surgeon knows how to protect his patients and himself from infection.

No precaution is too extreme, no safeguard too trivial. It is the duty of each nurse, each assistant to anticipate every need of the man in command. For on him now rests all responsibility. Success must now depend solely on the skill of his hand, and in any emergency on the speed and wisdom of his decision.



"Forty. The sponge count is correct.

- Thank you."

Within little more than half an hour, the new doctor has justified his ten long years of training.

OPERATION: GANGRENOUS APPENDIX REMOVED PATIENT DOING WELL T. W. GIBSON; M. D. Before dawn, a boy who at midnight was in danger of death is on his way to getting well again.

But today, facing Dr.. Gibson and his 165,000 fellow US doctors, is a problem of medical practice which cannot be solved by either science or skill.

Self-imposed responsibility of the medical profession today as in the past is the free and voluntary medical service to those whose need is great, whose resources are small. In hospital clinics, the doctor receives no compensation for his services, other than upholding the great and good position of his profession. And heavy is the doctor's burden. For with depression adding to the ever present problem of patients unable to pay, with the free clinics now filled with those who in past years have been able to meet the doctor's fee, the medical profession finds that the US doctor is contributing in free service over \$1,000,000 each day.

But beyond the reach of the facilities of hospital clinics, even out of range of any doctor's care, are hunDr.eds of thousands of US citizens. And in many out of the way sections, whole counties are too poor to support a single doctor. Though the health of the nation is by and large the best in the world, among rural Negroes, unattended sickness and uncontrolled disease is pushing up the national death rate. Based on the findings of a 3-year survey of the state of the national health, broad recommendations are made by the crusading Chief (Surgeon General) of the US Public Health Service, Dr. Thomas Parran Jr.

"Our first need is to join in a nationwide effort against those causes of disease and death for which we have scientific weapons of unquestioned power. Syphilis, tuberculosis, cancer, pneumonia, maternal and infant mortality are examples. To help doctors who are fighting against tremendous odds in remote rural areas, we need 500 new hospitals. The underprivileged third of our population when seriously ill needs help from tax funds. The help of the people is quite properly a concern of government."

Agreeing fully with Dr. Parran's analysis of the need of the US sick, the profession flipped sharply on the method by which it shall distribute the benefits of medicine. At New Haven, Yale's able diagnostician, Dr. John Peters, demands that the health needs of the people be met by tax money. This school of thought believes that medical school should be subsidized by the federal treasury. They insist that for those who need and cannot afford medical care and hospitalization, the government should pay both hospital and doctors. And for every mother and her child, they demand the best of medical care at government's expense.

In New York City, medical sociologist, Dr. Kingsley Roberts, heads the movement for cooperative medicine. By the cooperative plan, now operating in 16 US communities, individuals and families, by paying dues of a few cents a day, are entitled to general or specialized medical care and limited hospitalization.

But at the Chicago headquarters of the American Medical Association, is the spokesman for the majority of its 110,000 doctor members. Able publicist, Dr. Morris Fishbein, who opposes any radical departure from long-established medical practice.

"The House of Delegates of the American Medical Association has repeatedly declared that it is willing to cooperate with the government or with any other authorized agency in securing a wider distribution of medical care. Everyone should have good medical service. But we insist

that the practice of medicine is a doctor's problem. The doctor is the only one entitled by training, by experience and by law to take care of the sick. Medicine is still a profession. It must never become a business or a trade, never the subservient tool of a governmental bureaucracy."

Out of the greatest medical controversy in modern times spring unexpected benefits to the average U. S man of medicine.

Welcomed by all of the nation's doctors is the public new and sober concern over the problems of medicine.

## SHALL UNCLE SAM PAY YOUR DOCTOR BILLS?

Already more and more communities are taking inventory of their hospital institution equipment, the costly machinery of diagnosis and therapy. They are learning that besides the long familiar accessories of medical science, there are important new operators. The basal metabolism machine by which is detected glandular disturbance. An air chamber whose pulsating pressure stimulates the flow of blood through the blood canal of weakened blood vessels. New hydrotherapeutic baths useful in treating limbs crippled by infantile paralysis. A new weapon on the war on syphilis, the delicate artificial fever chamber which can raise body temperature to kill living germs in the blood streams. The new improved iron lung which breathes for man when his own lung action fail. And this year, as books based on the lives of doctors and the progress of medicine become popular best sellers, the public is learning of the doctor's greatest weapon against disease: the triumphs of biological research. Inexpensive, easily accessible, the proven vaccines of preventive medicine, the life-saving antitoxin serum for tetanus, diphtheria and pneumonia. The life-sustaining hormone, adrenaline. Thyroxin, lithium and the epic-making discovery of Dr. Banting and Best, the allessential insulin which has made life possible for the diabetic, old or young.

'Well, Louie has diabetes. And he's going to have to have insulin.

- What's insulin?
- Insulin is a new medicine that makes it possible for thousands of boys like you who have diabetes to live and play just like other boys.
- But if there wasn't any insulin?'

Rising today is a generation whose life span no man of medicine will predict. For the science which has added a decade to our days knows that whatever great discoveries lie behind it, immeasurably greater ones lie ahead.

Time marches on!

A NEW ISSUE OF THE MARCH OF TIME WILL BE SHOWN AT YOUR NEIGHBORHOOD THEATRE EVERY FOUR WEEKS.
ASK THE MANAGER OF YOUR THEATRE FOR THE DATE.