THE DOCTOR'S DILEMMA

WHEN lawyers differ the world smiles wrily and goes its way. But the differences of doctors are apt to stab us to the heart with doubt. Some deep atavistic instinct clamours for an oracular quality in our physicians. Perhaps our unconscious minds recall that in antiquity, religion and medicine, faith and healing, were of one piece. In Western civilization the first clinics for the observation and treatment of disease were the temples of Apollo. The earliest Greek doctors, like those of Egypt, became gods.

Modern discoveries of science tend rather to increase than diminish in the lay mind an expectation of infallibility in the doctor. That may be because people lose sight of the division between the theory and the practice of medicine. It is rather like expecting judges and magistrates to take responsibility for the laws they have to administer. If laws were infallible, justice would always be predictable and there would be no need for litigation. So in medicine, if theory were practice, the greatest surgeons and physicians would be the professors and lecturers of the medical schools.

The prevention of disease is

a science, or rather a group of sciences, although healing is still an art and more than something of a mystery. Yet the triumphs of modern medicine have not been attained in the consulting rooms of great hospitals but in the laboratories of the entomologist, the bacteriologist, the parasitologist, the biochemist and other specialized scientific investigators.

The enormous saving of life in the last decades has resulted mainly from the fight against diseases spread by specific organisms and the discovery of how to destroy them. Bubonic plague, smallpox, typhus, cholera, yellow fever, tuberculosis, typhoid, malaria, sleeping sickness, and syphilis in turn or conjointly in the past have almost halved the population of the world. These are among the communicable diseases that are being stamped out by organized research. The medical practitioner takes his share in that fight, but so does (or should) every member of the public. The victory itself is being won in the laboratory.

It is not long since the triumphs of science and medicine were inextricably united. The great physicians and sur-

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geons who laid the foundations of modern practice were of necessity investigators as well as practitioners. To-day both scientific research and specialist practice are departmentalized, while the mass of the medical profession are forced into a lower position and tempted to confine themselves to routine methods.

A similar tendency was noted nearly two hundred years ago by William Cullen, Professor of Medicine in the University of Edinburgh, when he wrote: "The great horde of physicians are always servile imitators, who can neither perceive nor correct the faults of their system, and are always ready to growl at, and even to worry, the ingenious persons who could attempt it."

That was undoubtedly more true in Cullen's day than in our own, yet it serves to bring home the fact that differences among doctors are possibly a sign of progress rather than of stagnation.

The limitations of modern general practice are not of the doctor's seeking, but are imposed upon him by the rapid extension of the medical field. It is more than difficult for an overworked practitioner to keep abreast of every phase of knowledge: it is physically impossible. The medical schools also are slow to adapt the curriculum of

study to the trend of scientific thought. Take, for instance, the science of nutrition, now no longer in its early infancy, and likely to affect fundamentally the practice of medicine in the next decade. A Chair of Nutrition was established at the University of London some years ago, but there is still no postgraduate course to repair the short-comings of the past.

If science has narrowed personal initiative in the treatment of serious disease, on the other hand it has added to the difficulties of accurate diagnosis. Successful diagnosis depends more than ever upon experience, aptitude, and observation. It is almost entirely governed by personal qualities in the practitioner. Modern instruments and apparatus are useful aids in diagnosis, but they cannot add to nor detract from individual genius. More almost than any of his colleagues the brilliant diagnostician earns his dollars and save yours.

If the limitations of modern general practice were better understood, there would be less futile criticism of the doctor and his ways. Sympathetic criticism is always stimulating, but criticism of the doctor is often interested and malicious, or merely ignorant. The most crude misconceptions flourish in our enlightened country.

Much clap-trap too is foisted on a credulous public by charlatans and fanatics in the sacred name of "Nature". "Back to Nature" seems so easy as a solution for all our ills. But the stern fact is that from the conditions of civilized life we cannot go back; we can only go forward. We cannot revive old conditions, we must adjust ourselves to new ones. "If," as Professor Sir J. Arthur Thomson says, "back to Nature

means simpler living and less artificial excitement, more sunshine, open air and joy, it is of course sound advice."

Beyond that point science, in the person of the doctor, must come to our aid. We can help the doctor by appreciating his difficulties and studying some of his problems, but we are quite entitled to say to him that his first duty is to keep us well.

—C. M. Kohan, condensed from Nutrition, London.

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Massage for Manliness

WHEN ointment containing male sex hormones is rubbed into the comb of a capon, the listless, bedraggled cock gradually turns into a lusty, strutting rooster. Reason: the hormones are absorbed into his blood-stream. When Dr. George L. Foss of the Royal Infirmary at Bristol, England, learned that this direct application of hormones to a capon's comb is 200 times more effective than injections, he decided last summer to try it on impotent men.

He mixed testosterone propionate (synthetic male hormone) into a bland ointment, gave two patients tubes of the ointment, asked them to squeeze out an inch (containing about 20 milligrams of hormone) and massage it into their thighs and abdomens every night. Within a month the flabby men grew hairier, more muscular, even "pugnacious." When they used the cream faithfully they were able to practice normal sexual relations. A third patient, a boy of 18 whose voice had not yet changed, rubbed the ointment into the skin over his Adam's apple twice daily for a month until "his voice became very deep and remained so."

"Hormone massage," concluded Dr. Foss in *The Lancet*, "is the simplest method of androgen (male hormone) therapy . . . is most acceptable to the patient who desires a maintenance dosage."—*Time*.

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