MEDICINE IN THE EIGHTIES: A CRISIS IN CONFIDENCE?

Western medicine has reached a critical crossroads. On the one hand, the technological accomplishments of the medical world are becoming increasingly incredible to the average layperson: test-tube babies, gene splicing, heart transplants, chemotherapy. On the other hand, as the wizardry of our doctors impresses and amazes us, we are also experiencing a growing dissatisfaction with the quality of medical care in this country. Complaints against the bureaucracy, the impersonality of a monolithic medical system are numerous, as are medical legal suits, problems of adherence/ compliance with medical regimens, and a growing demand by patients to take more direction of their own treatment.

What are the problems and challenges facing medicine today? MEDICINE
IN THE EIGHTIES: A CRISIS IN CONFIDENCE examines some of the salient issues,
and looks for answers among the alternative developments in medicine, such
as humanistic, holistic and behavioral medicine. The program is divided into
two hour segments, with a narrator such as Alan Alda or Robert Young, and
consists of the following components: Medicine Today: Miracles and
Disillusionment; New Models of Medicine: Humanistic, Holistic and Behavioral.

The first segment briefly encapsulates the role of healer, from Greek times to modern-day. Emphasis is placed on the unique powers attributed to the healer, and the importance of involvement in many aspects of his patients' lives. An interview with a Midwestern farm wife shows that Marcus Welby is not dead: She describes the family doctor she and her family have known for 30 years: He delivered her six children, has seen them through good times

and bad, and is one of the family. But increasingly, the face of medicine is changing, and the scene changes to a series of glimpses at modern medicine: the complex equipment necessary to save the life of a premature infant only 1-1/2 pounds birthweight; a shot of Shumway at Stanford doing open-heart surgery; a shot of an ICU - the tubes, monitors, and machinery sensitive to the flicker of life or its passing; summary collages of advances in the treatment of cancer, such as complex chemotherapy, heat treatment, etc. Narration explains how lives are saved and/or prolonged by such progress in medical science. Next we see quick cuts into interviews with patients and relatives, praising the miracles of modern science: A mother marveling that her child was completely cured of a rare malignancy; a family celebrating the birthday of the longest-surviving heart-transplant patient, a patient paying tribute to the hemodialysis equipment which keeps her alive when her own body has failed her.

But there is a darker side to medicine today. Although medicine is doing more for people these days, some people also feel it is doing less. From the smiling faces and happy hearts of the survivors, the human miracles of modern science, the scene shifts dramatically, and a series of interviews graphically summarizes some of the outstanding concerns in medicine today from the consumer point of view: The cost of medicine is becoming prohibitive, and individuals at all levels of society are being overwhelmed by the burden of chronic illnesses, complex surgeries, elaborate treatment protocols.

Mini-interviews include a family of undocumented workers in California who, ineligible for Medi-Cal or other aspects of the welfare system, neglect the health of their children for financial reasons; a welfare mother in New York

City who complains about the incredible red-tape in processing medical claims; a middle-class family who has been forced to mortgage their home and sell many of their possessions in order to continue paying for their son's treatment for leukemia.

Beyond the cost, other significant issues emerge. The rise of medical legal suits is astronomical. A French doctor training in this country marvels, "In France, a patient would never dream of suing his doctor. But then, in France, medicine is not a business." The rising sentiment of patient as consumer-client is explored, as well as the feeling that often patients are not getting what they are paying for. Both the physician and the patient involved in a legal suit are interviewed and present their points of view.

Even when the patient does not resort to suing his doctor, much dissatisfaction remains. Primarily this may be conceptualized as a clash of expectations: The patient is looking for Marcus Welby, while the physician often sees himself as a subspecialist, with a highly refined and specialized area of expertise. Interviews with both patients and doctors reveal the frustration: Relatives of a patient in the ER complain of the callousness of the hospital staff; a physician dying of cancer reflects on what it is like to be on the other side of the fence; Ann Ryan (Cornelius Ryan's wife) talks about some of that couple's frustrations with the medical system; overworked residents complain about having to be everything to everybody, and the willingness of families to pass on responsibilities of nurturing and caring to the physician.

The final segment of the show examines three alternative and/or complementary responses to this crisis in confidence: humanistic, holistic and behavioral medicine. In brief interviews, proponents define each of

these terms: humanistic focusing on the human or subjective side of medicine, emphasizing care-taking and personal satisfaction; holistic stressing personal responsibility for health and well-being, and a consideration of the whole person in treatment; and behavioral medicine advocating nonpharmacological and social learning approaches in the treatment of disease and in preventive Noted sociologist Erving Goffman talks about the evolving nature of doctor and patient roles, and notes the shift from doctor-omnipotence to patient-physician equality, at least in some aspects of treatment. The well-known psychiatrist Thomas Szasz discusses considerations in creating a workable doctor-patient relationship. This segment will include examination of the importance of placebo in treatment; how the physician can use his person in a therapeutic way (the art of medicine); the severe problems that exist in doctor-patient communication, and how some of these can be ameliorated (the author of The Doctor Game could be interviewed), as well as how communication can have a profound influence upon the patient's illness. Interviews with doctors and the teachers of doctors will explore why this failure of the humanistic side of medicine has occurred, and both patients, physicians, and theoreticians will speculate on its effect on patient welfare.

Next, the belief that science alone is not sufficient for healing to occur will be examined. Patients are seen learning biofeedback for control of headaches and hypertension; and the Simontons explain their methods of visualization and meditation for combating cancer. Cancer patients who have experimented with such alternative methods are interviewed, and their negative and positive reactions explored. A representative faith healing will also be portrayed. Representatives of the medical community are

asked to comment on these approaches to health care. The emphasis of this segment is to show how nonorthodox approaches seem to be satisfying many health care needs of many people. The benefits and risks of these approaches, are examined, as well as the lessons they may teach traditional medicine.