

*VAN DIE REDAKSIE*

*EDITORIAL*

## Ou en Nuwe Medisyne

In hierdie uitgawe publiseer ons 'n interessante bydrae in ons rubriek 'Geskiedenis van Geneeskunde'. Dit is 'n kort bespreking van 'n Britse medisynelys van 1747. Benewens die belangrike items wat in die lys aangegee word, asook insiggewende kommentaar deur die oorspronklike vertaler, is daar 'n aantal aaklighede soos krap kloue, erdwurms, ens., wat ook as medikamente hul plek in die lys inneem. Dit klink amper soos die hekseresep uit *Macbeth*, en ons ril met betersweterige plesier oor die domighede en grusame geaardheid van hierdie outydse aptekers en geneeshere. Omdat die goed in die medisynelys gepubliseer is, moet ons seker ook aanneem dat hulle gebruik is, en dit laat opnuut 'n grillige denkbeeld van bloedluise op arms en bene ontstaan.

Ons troos ons daaraan dat dit baie lank gelede was—in die oerdae toe wetenskaplike geneeskunde nog maar in sy kinderskoene was. Vandag weet ons beter, en die groot farmaseutiese huise sal dit nie meer waag om sulke onsinnighede aan ons te probeer opdis nie. En in hierdie waan van streng wetenskaplike geregtigheid vergeet ons dat bloedsuiers nog deur sommige geneeshere, wat steeds vandag in die praktyk staan, in hul jonger jare gebruik is, en dat groen amara en duiwelsdrek nog tot baie onlangs op die rakke van ons apteke gepryk het—of miskien is hulle nog daar, maar dan darem seker net vir die vertoon. Dit was sulke mooi fesse, daardie oues, en hulle is tereg reeds gesogte antiekstukke.

Moet ook nie ons boererate weggooi nie. Dit is volksbesit en ons is trots op hierdie kultuurskatte

van ons voorvaders. Mens moet net nie deur een van die boererate-boeke gaan staan en blaai nie. Die medisynelys van 1747 is sommer konserwatief — blote kinderspeletjies. Destyds het die sieke-troosters en diegene wat probeer gemoedere gesond kry nie eens geweet van die medisinale eienskappe van kakkerlakke nie, veral as hulle fyngemaak word en met 'n bietjie boegoebrandewyn oor 'n kersvlammetjie warmgemaak word alvorens die pasiënt die helende mengsel sluk. Dit staan so opgeteken in ons boeke oor boererate, en as een van ons lesers so naïef wil wees om te dink dat daar nie meer mense in ons land is wat hierdie grilligerige middels gebruik nie, wil ons hom summier en deeglik ontnugter.

Dit help ook nie om sulke primitiewe gebruike aan die deur van die onontwikkelde te lê nie, en te dink dat net diegene wat nie behoorlike mediese dienste kan bekom nie of wat geen oordeel kan vel nie, deur die bog aangetrek word. Ons weet van talle van ons voorste burgers wat daagliks landsbelangrike besluite moet maak wat gretig gryp na die garingboomsap, die bosluise en ander nare goeters. Só is die mens se geaardheid en ons sal dit nooit verander nie. Die magiese, die ongewone en dit wat buite die bestek van suiwer deurdagte objektiwiteit val, het die mens nog deur die eeue heen beïndruk, en dit sal so bly. Daarin lê die bestaansreg van mense wat snaakse dinge doen en wat natuurwette skynbaar omseil. Die publiek wil dit so hê en daarom gaan die publiek dit so kry. Wie wil nou gesond word van 'n alledaagse ou pilletjie met 'n nommer op as jy van jou siekte, en sommer miskien jou oortrekking ook, ontslae kan raak deur koggelmanderbloed te drink?

## The Minister Shall Consult

The third reading of the new Medical, Dental and Supplementary Health Service Professions Bill took place on Friday 13 September, and, if one is superstitious, the date could well be regarded as significant. In this issue we also publish a Bulletin by the Chairman of Federal Council, Dr J. K. Bremer, setting out the history of this Bill and the actions taken by the Medical Association. At the time of writing Dr Bremer had not yet had the Hansard report of the debates during the second reading and the committee stages. We therefore wish to report certain aspects of these debates.

As stated in the Bulletin written by Dr Bremer, the Medical Council, the Medical Association and the Dental Association carefully considered the Bill, and all three bodies requested that the Council membership be increased rather than decreased. In replying to the debate during the second reading the Minister of Health, the Honourable Dr Schalk van der Merwe, himself a member of our Association, said: 'Although the Medical Council as such may perhaps not be considered specifically as an interested party, the Medical Association as such proposed 21 members in a Council of 39. Can you see where the catch is, Sir? They want control of this Council. In other words, we could just as well have made the Council a committee of the Medical Association.'<sup>1</sup>

In his introductory speech during the second reading, the Minister said: 'The opinion that the Council is a fully autonomous body is a flight of the imagination.' During the committee stage the Minister said: 'Because the Council is an autonomous body, there cannot be any appeal in this case.' It seems to be important which page of Hansard one reads.

The only important amendment agreed to during the committee stage was the additional requirement

under clause 61(2) that the Minister may review, rescind or issue regulations after consultation with the Executive Committee of the Council (see the Bulletin in this issue). There was strenuous opposition to this clause. Seen in the light of the results of consultations about the constitution, when the three interested bodies disagreed with the Minister, without achieving any significant changes in the Bill, we can well understand such opposition. During the discussion concerning the co-optation of non-members of Council to serve on its committees, the Minister said: 'However, I can also tell the hon. member (Dr E. L. Fisher) that it is for me to use my discretion to decide which members of the Council are giving the lead at this moment. I had to make a decision, because my decision did not depend on a majority vote in the Council or in the Medical Association. I can tell the hon. member that the people whom I regard to be giving the lead in the medical profession, the opinion-makers as such, agree with me.' We suppose that this will henceforth be known as democracy, medical style. Consult, if forced to, but make sure that you consult with those who agree with you.

Replying to a question by the member for Houghton regarding representation by the universities with medical and/or dental faculties, the Minister said: 'I said that after consultation with them and explaining to them the reasons for the reduction in the number . . ., they were satisfied. It is not a question of them being completely *ad idem* with us. They were satisfied with the position.' Has the Minister heard of the sergeant in the army, who said: 'I want two volunteers. You and you.'?

Perhaps we are wrong. Perhaps consultation does not mean what we have always assumed it to mean.

1. This and further quotations from House of Assembly Debates, First Session—Fifth Parliament, 9 to 13 September, 1974.