RECOMMENDATIONS OF THE SNYMAN COMMISSION*

MEMORANDUM IN SUPPORT OF A RESOLUTION REQ UESTING THE SOUTH AFRICAN MEDICAL JOURNALS TO PUBLICIZE THE RECOMMENDATIONS OF THE SN YMAN COMMISSION, PROPOSED AT THE 78TH MEET-ING OF THE SOUTH AFRICAN MEDICAL AND DENTAL COUNCIL IN SEPTEMBER 1963

BY R. LANCE IMPEY, AND PUBLISHED WITH THE PERMISSION OF THE PRESIDENT OF THE COUNCIL

In view of the revolutionary changes that may be brought about as the result of the recommendations of the Snyman Commission, I feel that individual members of the profession in South Africa have a right to know the complete picture. Unless they have that knowledge, they are not in a position to understand the implications of the Commission's recommendations, which in my opinion should be of great benefit not only to medical educators in South Africa but also to the public in general.

One of the Commission's main criticisms is of the part that operative surgery is playing in the healing art, and how the teaching schools have not been successful in correcting this undesirable tendency. Attention was drawn to this fact by the

Snyman Commission, to investigate the high cost of medical services, and any other related matters. This Commission draws special attention to the 'detrimental effect on young doctors in particular' of 'the strong financial incentive to undertake surgical work, sometimes contrary to the interests of the patient'. One realizes, however, that the in-

1939 South African Committee on Medical Training, which

referred to 'this craze . . . to cut up the bodies of patients should be discouraged during the student's medical course'.

It should be noted that this was the report of an official com-

mittee taking evidence and enquiring into the first 18 years

of clinical teaching in South Africa. 20 years later the Govern-

ment appointed a new Commission generally known as the

^{*}The recommendations are set out in Chapter 8 of the Report of the Commission (No. R.P. 59/1962).

centive is not always necessarily for financial gain, but may be to enhance the reputation of an individual doctor. Irrespective, however, of whether a doctor is a university professor, a physician, a general surgeon, a gynaecologist, a radiologist or a general practitioner, every registered practitioner is held personally responsible for his own individual actions.

Whereas the Snyman Report refers to all departments in the realm of medicine, I am more concerned with the specialty with which I have been associated. The Report remarks on 'an obvious tendency to undertake more and earlier operative procedures'. As an example of this it is stated: 'It is the opinion of the Commission that caesarean section, curettages and hysterectomies are carried out earlier and more often than is absolutely necessary'. After 40 years' experience as an obstetrician and gynaecologist I can fully endorse this statement and would strongly recommend that women of this country should not submit to operations of this nature until confirmatory opinions have been obtained, and that one of these should be that of the family doctor.

In Section No. 21, the Commission enumerates the principles which, in its opinion, should govern the training of medical

students at our South African Medical Schools.

The publication of the Report of this Comission was followed almost immediately by the leading South African daily newspapers issuing a warning to the public against surgeons who perform unnecessary operations for financial gain.

Never before in the history of this country has the good name of the profession of medicine been at so low a level, and the confidence of the public has been rudely shaken. This state of affairs is grossly detrimental to the interests of the public in general.

As the body specifically created by the State to safeguard the interests of the public, it now falls within the purview of this Council to restore the relationship of trust and mutual esteem that has existed between the public and the profession

of medicine throughout the ages.

The Council is nearing the end of its five-year term of office, and, in urging you to complete this important task of regaining the confidence of the public, I would remind you of how the General Medical Council, from which this Council has evolved, has been described by both its ex-President, Sir David Campbell, and the present President, Lord Cohen, as quoted in 'The Doctor's Code', in the British Medical Journal, I September 1962: 'It (the Medical Council) is a device of government whereby Parliament controls the education and ethical conduct of the medical profession through the profession itself. This is a fact of supreme importance'.

It was gratifying to hear, in an inspiring address to the Medical Council in Cape Town recently, given by the Minister of Health, the Rt. Hon. Dr. Albert Hertzog, that the Government of the Republic of South Africa considers itself dependent on the Medical Council to maintain the traditions of the medical profession in this country.

It is also encouraging to know that, according to the British Medical Journal (vol. 1, suppl. 1958), 750,000 individual doctors scattered throughout the world and members of the World Medical Association subscribe to the principles of the

1918 Declaration of Geneva, the modern version of the Hippocratic Oath. This may be taken to be 'The Voice of Medicine'.

Since the Hippocratic Age, 2,500 years ago, it has been a tradition of the profession to offer its services free to any member of the public not in a position to pay for these services and to reduce its fees in other deserving cases. This is still the practice of those doctors who continue to look upon the profession of medicine as a vocation and not as a business or trade. The profession goes further than this, and whereas there is no legal duty imposed upon a medical practitioner to treat a stranger, if, in an emergency, his failure to do so results in death or unnecessary suffering to the patient (after due enquiry by the South African Medical Council), he is liable to have his name removed from the Medical Register. Action may also be taken by the South African Medical Council against the charging of excessive fees.

From the evidence laid before the Snyman Commission it appears that recently we have been living through a period of abuse of the science of surgery, during which numerous operations were being performed, which may not have been essential. This is the very antithesis of the usual practice of the profession, which is primarily of service—the fee being of secondary importance—a service to provide the medical care that is in the best interests not only of each individual patient but also

of the public in general.

As an ex-University lecturer in medical ethics, I believe that the only way to regain the confidence of the public is by maintaining our well-tried ethical code and traditions in all circumstances.

It is hardly possible to over-emphasize the importance of the role of the staffs of medical schools and other leaders of the profession, who by their example and precept can have a lasting influence on the attitude of students and the future generations of doctors. On the other hand, as history has shown, even one teacher who looks upon the practice of medicine as a money-making concern may do immeasurable harm.

Finally, I quote from an address (in Aequanimitas) given to medical students by that eminent medical philosopher, the late Sir William Osler, Professor of Medicine successively at Montreal, at Philadelphia, and at Baltimore, in America, and

later at Oxford in England:

'My message is chiefly to you, students of medicine, since with the ideals entertained now your future is indissolubly bound. The choice lies open, the paths are plain before you. Always seek your own interests, make of a high and sacred calling a sordid business, regard your fellow creatures as so many tools of trade, and, if your heart's desire is for riches, they may be yours; but you will have bartered away the birthright of a noble heritage, traduced the well-deserved title of "Friend of Man", and falsified the best traditions of an ancient and honourable guild.'

Since an important method of disseminating ideas such as these and stimulating serious consideration of and explaining the recommendations of the Snyman Report would be through the medium of the medical press, I propose that we enlist its

cooperation.