

Editorial

A Question

A number of weeks ago, a group of medical students were given the opportunity to view a cinematic production of the AMA and AAMC. The film, as introduced, was designed to inspire thoughts of medicine in career minded people of high school age. Needless to say, the lecture hall had an obvious air of skepticism as the first few feet of film dramatically portrayed the "typical" doctor's office at the end of a busy day. However, the premature air of skepticism was well dissipated at the close of the production.

Why? Because many of us realized, in all too pointed fashion, that our concepts of the scope of medicine were unjustifiably far from being complete. Of course no film could succeed in teaching us, in thirty minutes, that which we had failed to learn through experience over a period of many years. It did, however, succeed in implanting within us a new germ of thought. Just what is this heritage that has been placed in our hands? There must be more to it than overcoming a serially arranged battery of examinations.

We have on hand the knowledge, thoughts, dreams, and ideals of many men. Men, who through the hundreds of years that preceded ours, had as their goal the uncovering of the means by which the variety of disease that plagued the physical and mental structure of humanity might be eliminated. The process was slow, for then, as today, there were very few direct answers. The nature of disease and illness, as well as the nature of their victims had to be discovered. Nor could the validity of the early answers be easily assessed. Old "sciences" were called upon and new sciences, new and seemingly unrelated avenues to the "truth", were developed. The smallest pieces of evidence were recorded, accumulated, and passed on so that the future could invalidate them if false, perpetuate them if true.

The practical developed along with the theoretical. The vitality of man's thought very quickly grasped the product of their combination, and growth developed in geometrical proportions. It is at, what would seem to be the height of this geometric progression that the destiny of this age old project, which we now call Medicine, is placed in our hands. Thus we must use the past to cope with the present, and use the present to prepare for the future.

Research needs us, for our basic knowledge informs us that the answers to many of our questions are yet to be completed, while still further questions must be proposed in anticipation of problems which have yet to come to the fore. Nor can we deny the importance of the academic world, the centre for the reproduction of the men of medicine. The problems of community medicine still require the general practitioner, the public health men, and the experts in preventive medicine. These demands are accompanied by the need for the specialist to deal with the more recently developed surgical and diagnostic procedures. These are but the obvious. What of the medical philosopher and historian, men of literary ability, men who record and shape our thought? It is through their efforts that we are able to relate ourselves to the society in which we must work.

Obviously, we cannot challenge ourselves with all of the problems mentioned above, and the many others not mentioned. But before we do commit our skill and desire to any of them we must know that they all exist. We must see each one clearly in the light by which we, as individuals, may contribute to them. Only in this way can we become integral factors in striking the proper "balance" so necessary for the success of all the principles of medicine.

Medical students, as a group, are chosen on a comparatively select basis. The selection is founded principally on the potential that the individuals demonstrate to possess. The development of a student's full potential is limited by the necessary curriculum of the medical school. Thus we must constantly seek new insights, striving to broaden ourselves so that we may be better prepared to meet the challenge of our responsibility.

A medical school applicant, when asked by an admissions board interviewer what type of doctor he would like to be, replied, "A good doctor." The interviewer promptly requested that the applicant explain what he understood to be a "good doctor." The hesitant reply, "I am not sure I know, sir, that is why I should like to study medicine".

How many of us can, even now, answer that question?

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