

## EDITORIAL COMMENT

"Who is going to accept liability when the "men of science" hand a corpse back to the grieving parents and announce that the operation was a success, but the patient died? What is to become of law when the currently popular practice of blood transfusion goes the way of blood letting, sulfa drugs and other medical practices which have enjoyed a brief fad of popularity and then disappeared?"

The above statement is taken from an article in the Canadian Bar Journal, Volume 3, 1960, written by Mr. W. Glen How, Q.C. Mr. How, a noted Canadian civil liberties lawyer, was at the Dalhousie Law School on February 22 and 23. In speaking to the law students he more or less rehashed the arguments that he puts forth in the article "Religion, Medicine and Law" from which the above quote was taken. As well as being a member of one of Canada's minority groups, the Jehovah's Witnesses, he is also their legal consultant. In this article, as at the Law School, one of the prime topics of discussion is the legal right of members of the Jehovah's Witnesses in refusing to accept blood transfusions.

He divides his argument into three parts:

- (1) "Society accepts the religious opinions of larger groups who decline to accept certain medical treatment, but the same tolerance is not shown toward minorities such as Jehovah's Witnesses".
- (2) "Jehovah's Witnesses found their objection to the use of blood in the Bible."
- (3) "The common assumption that blood transfusion is an undoubted lifesaver is insupportable. In fact it results in many deaths and much sickness".

Any person reading this article who has an I.Q. equivalent to the average lawyer's hemoglobin will agree with the arguments put forward under the first two headings.

It is with number three that medical people would take issue and as they read soon discover the boiling point of their own blood.

The facts that Mr. How uses to back up his arguments are taken from Medical Journals and are quoted completely out of context. For example: "Thoughtless prescription of blood transfusion is playing Russian Roulette with bottles of blood instead of a revolver".

This is the statement of Dr. W. J. Crosley and it is meant as a warning to the medical profession to be cautious in their use of blood products. However when read in the light of Mr. How's arguments it is a total condemnation of the use of blood in medicine. In fact he goes on to ask, "Blood transfusion, has it any real scientific basis?"

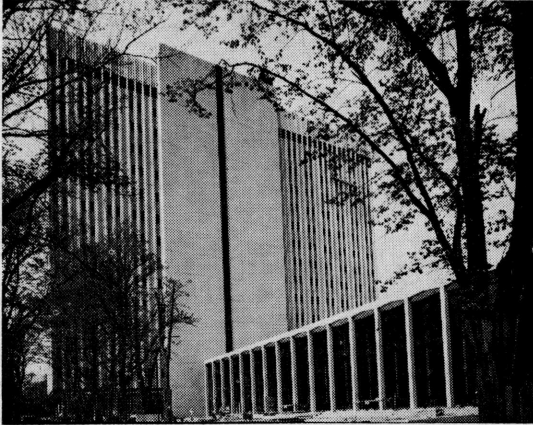
Mentioned here as the diseases most **commonly** caused by blood transfusions are "syphilis, homologous serum jaundice, and malaria". Others transmissible by the use of blood are "measles, smallpox, typhus, influenza, tuberculosis, gonorrhoeal arthritis and fatal encephalitis."

On pointing out that the mortality rate resulting from blood transfusion is inaccurate Mr. How states: "Doctors customarily bury their mistakes so the full details do not become known".

Though these things make one angry they are not shocking. The shocking thing is that not one medical student or faculty member was present when Mr. How spoke at the Law School.

Is our education confined to learning the incubation periods for a hundred or so communicable diseases? Should we have been present to tell Mr. How that we agree that the rights of minority groups should be respected? Should we have told him that we disagreed with many of his arguments and that he was taking liberties with facts as only a lawyer can do? Furthermore should we have invited him on a tour of the Victoria General Hospital and shown him blood at work in the emergency room - on the medical, surgical and obstetrical wards? Maybe this would not

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have made him realize that blood is second only to antibiotics in being responsible for the great advances that have taken place in medicine. However it would have undoubtedly made him a little unsure that he was right in his view that blood transfusion is totally wrong.

These questions suggest many more about our own education. This year we have had a Workshop on Medical Education. We have closely inspected the various modes of teaching and ways in which they can be bettered. Maybe next year we should consider non-medical things that we need to know. Law is one of the greatest of those. Looking across the border we see malpractice suits by the thousands in the United States. Will this trend migrate to Canada with the draft

dodgers? We don't need a familiarity with law for these things. After all our insurance will take care of that. But how about things like: "When is a person dead?", "What are the legal issues involved in organ transplantation?"

Is it worth our while to get together with the third year law students and plan joint seminars from which both groups can benefit? We don't want to be lawyers but it would be helpful at least to be able to understand the new laws which must soon go on the statute books and to understand the people who write them. It is only in this way that we will be able to lend our voices to a course of action that will be best for us and for our patients. What do you think? T.M.

Not without misgivings, the Journal staff undertook a survey of its readers following distribution of the Winter issue. Our objective was simply to determine the "impact" of our publication - were we producing a Journal of interest to both students and alumni?

Response to our queries from Alumni have been exceptionally encouraging, and many commended the Journal's efforts. Tabulation at the time of printing indicated clinical and historical papers and editorials ranked equally high - 74% of those replying to the questionnaire stated they preferred to read such articles. 68% read the Alumni News section, 63% read general interest articles, 58% expressed an interest in student activity news, and 47% gave attention to research articles. Several stated that they did not feel our Journal should endeavour to publish original research, although it was suggested that abstracts and preliminary reports be included. Clinical and historical articles were cited most often in the penned-in comments, and also Alumni News - what is needed, as one 1950 graduate declared, is "a good contact with the old school."

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