

Do No Harm

by Jane M. Orient, M.D.

I am Jane Orient, Executive Director of the Association of American Physicians and Surgeons. I am in the solo practice of private medicine in Tucson, Arizona. I speak as a physician who is bound by the Oath of Hippocrates.

By my Oath, I must refrain from doing harm to my patients, and I must abstain from mischief and corruption. I may not promise my patient a three-minute remedy and then give her a deadly potion.

Furthermore, I must "follow that method of treatment which according to my ability and judgment I consider for the benefit of my *patients*." I may not subordinate my judgment to that of a secret council. I may not sacrifice my patient's welfare to a social agenda. I may not deny my patient a cancer treatment or heart surgery so that his resources can be used to benefit someone with a higher social priority, such as a person who is entitled to a free checkup.

I want the best medical care for my patients and for all Americans. We cannot provide the best until we get the cost down.

We will not lower costs by abolishing the Oath of Hippocrates and destroying the patient-physician relationship. The Oath of Hippocrates dates to the fifth century B.C.; the acceleration of American medical costs dates to 1965.

Costs skyrocketed because the government got *into* medicine. Costs will not decrease until we get the government *out* of medicine:

out of private physicians' offices, where regulations are driving physicians out of business, especially in rural areas and inner cities;

out of hospitals, where compliance costs add a huge administrative overhead;

out of the pharmaceutical industry, where government adds \$250 million to the cost of marketing a single new drug;

out of the medical marketplace, where government intervention has destroyed the normal economic mechanisms that keep costs reasonable in a free market.

We need to bring *patients* back *into* the financial equation. We must allow *patients* to benefit from their prudent spending and saving decisions. All Americans should be permitted to use pre-tax dollars to establish their own medical savings accounts.

To preserve excellence in American medicine, we must preserve patients' freedom of choice—not turn it into the sham of picking Monolith A or Monolith B, both offering the same government-dictated benefits package.

If government forces us all into a bureaucratically managed system, we will still have something called "health care," delivered by persons called "health care providers." But such a system will have no place for ethical physicians, whose Oath forbids them to accept a situation of conflict of interest with their patients.

Government bureaucracy has never controlled costs. The promise of universal access to comprehensive service under a global budget and government rules is, in a word, bankrupt.

Government officials do not take an oath to do no harm. What a government system *can* accomplish is to destroy the art and science of medicine in these United States of America.

This article is adapted from a statement by Dr. Orient on behalf of the Association of American Physicians and Surgeons before the White House task force on health care reform, George Washington University, Washington, D.C., March 29, 1993.

BOOKS

Drug Policy and the Decline of American Cities

by Sam Staley Transaction, 1992 • 257 pages • \$29.95

Reviewed by Doug Bandow

The drug war is raging on the streets of cities across America, but off the front pages. While Uncle Sam's expansive and expensive efforts to staunch the nation's taste for drugs have failed to end substance abuse, they have turned scores of urban areas into combat zones. Indeed, the war on drugs has become a war on cities. Observes Sam Staley, president of the Urban Policy Research Institute: "the policies that form the core of the Drug War strategy are hastening the destruction of central city economies by abrogating the institutions that are most likely to lead to economic rejuvenation: private property, respect for civil liberties, and smoothly operating markets."

Staley's book is important because he approaches his subject as a scholar rather than an ideologue. Although drug use and sales affect the entire nation, the consequences, particularly the pervasive violence, have fallen most heavily on urban America. Staley's thesis that the drug war is unwinnable is not unusual; what is unique is his conclusion that the drug war is inextricably linked to the catastrophic deterioration of the cities. But the relationship is a complicated one. Staley writes: "The ways in which public policy undermines the processes necessary for encouraging productive economic and social development requires an understanding of the changing economic environment of central cities."

He begins by reviewing the dynamics of urban growth and the illicit trade that has enveloped many cities. As last summer's riots in Los Angeles obviously demonstrate, the state of many urban areas is not good. Particularly significant are the declines in population and employment. Moreover, the composition of city jobs has shifted from manufacturing to service. This has tended to encourage suburbanization and the creation of "ring cities" around shrinking centers.

Many factors have been working together to hinder urban economic growth. Staley focuses on the role of institutions-"the established customs, laws, and traditions that provide the underpinnings of any society." Unfortunately, government has long been less than friendly to these sorts of institutions. Virtually unbounded use of the so-called "police power" and eminent domain, for instance, has sharply restricted the value of private property rights. The ever more draconian drug war has damaged civil liberties and shredded the social fabric of many cities. Such political intervention, Staley argues, "undermines the very institutions that facilitate social progress," necessarily encumbering cities' economies.

Moreover, given the relative dearth of legitimate employment, drug trafficking has proved increasingly attractive for young black males. Indeed, the drug trade has helped fill the cities' economic gap, expanding as legal businesses shrank. Observes Staley, "some inner-city neighborhoods are now fueled principally by the drug economy."

Urban centers remained the locus of drug trafficking even as the suburbs expanded in part because of the large pool of unemployed labor available for the drug trade in cities. Moreover, urban neighborhoods offer significant advantages for both customers and dealers, including relative anonymity for participants, simple access to the market, numerous escape routes from police, and myriad hiding places for inventory.

The drug laws do not just skew individual behavior. They also warp the institutions discussed by Staley that arise naturally through the community's business and social interaction. In the case of the inner city, drug prohibition has unintentionally funneled billions of dollars to other criminal