

Courtesy Frank K. M. Rehn Galleries, New York

## DR. JOSIAH PITE

By Allen Tucker

ALLEN TUCKER likes to make up convincingly real names for his subjects and we suspect that this painting is his tribute, not to any one man, but to a memory of the solitary doctor's buggy jogging through mud and mire. In all but the most remote corners of the world the lone practitioner, with his worn black bag, is passing. Automobiles and hard roads are symbols of the new era for doctor and patient, new not only in transportation but in the quality of medical care itself. This has become not the crushing responsibility of one man, but subject for the skill of many men equipped with delicate and exact apparatus, with better medicines and specialized skill and knowledge. Increasingly the scene of illness is not the home, overburdened and perplexed by conditions it is ill-equipped to meet, but the hospital. What this evolution must mean in cost and organization is still a subject for earnest study; that it must not mean the loss of the spirit of a Dr. Josiah Pite doctors and patients alike will agree.

# An Economist Audits His Costs

By WALTON HAMILTON

Drawings by Gerta Ries

**A** SHORT time ago, in the course of a very general conversation, I casually inquired of my favorite physician, "By the by, how are those investments coming along which you made with your savings?" A bit deliberately he replied, "Well, they haven't as yet yielded a competence upon which I can retire."

Here, almost in its easiest terms, is the problem of the cost of medical care. In a single year, such as comes now and then to every family, the savings of many moons were assigned, deeded, and delivered over to a physician, to specialists, to hospitals, to the functionaries and factotums of the get-well industry. We are lucky to have the money—or were they lucky that we had it? The bills were far more than we could afford, and in one way or another the costs remained for years to come. Yet the hospitals were not paying expenses; the specialists were thriving, but not like investment bankers; and the physician who did the larger task and carried all the responsibility was not flourishing as the green bay tree.

He was a surgeon of quality and a good all-around medical man. He was for years our family physician, if one who keeps up with the tricks of his trade can be called by so old-fashioned a name. He had spent years in mastering his art; a recognition of his competence had not come until he was well in his forties; his income was far smaller than a business man gets for the use of far commoner gifts. He did not exact of us an extravagant toll; his rate of charges was reasonable; many an item of service escaped enumeration in the account; and with it all there was an insight, a concern, and a devotion which money cannot buy. He was not over-paid; we had to have his services and yet could not afford them.

But even this makes the problem of getting away from sickness over-simple. The event just set down is a late chapter in a long story. As need came, we sought medical aid in a town of five thousand in which we were living, in cities of fifty and one hundred thousand nearby, and in a large metropolis. At the time, we had little acquaintance in the personnel of medicine; but we did take the bother to examine such evidence as was to be had and to assure ourselves of formal competence. The physicians we consulted were graduates of the best medical schools; they were reputed to be per-

sons of exceptional skill; one and all they were among the orthodox of the orthodox.

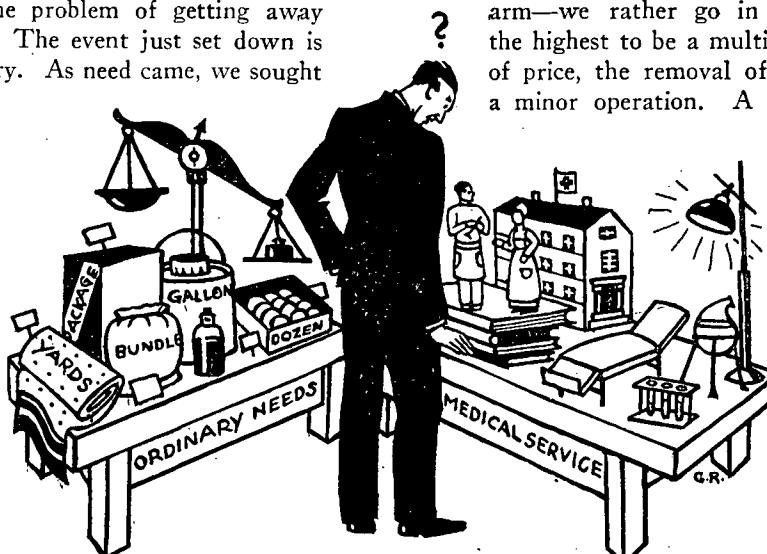
A local light said "nerves," and a greater luminary "stomach trouble;" it turned out to be a diseased gall bladder. An experienced practitioner prescribed rich milk; the head of his division in a great hospital added cod liver oil; a pediatrician of note continued the treatment with forced feeding while the child dwindled. Yet a simple laboratory test, a matter of common knowledge within the craft, would have shown an inability to digest fats. Later, a competent specialist, who has since won a reputé he did not then possess, easily discovered the source of trouble and quickly checked the malady; but neither easily nor quickly could he repair the damage caused by "repeated insults to the child's feeding."

**A**N "ear, nose and throat" man, amazingly skilled in the use of the knife, found an abscess in a child's ear and opened it; a few days later the other ear had to be opened; again, the first, and so on until six incisions had been made. Then, as he reported it, "I made up my mind right then and there that there was a cause. So I looked down her throat and found diseased adenoids, and out they must come." Out they came, the ears quit misbehaving, and the over-diligent specialist made no charge for the sixth incision.

This business of shopping around may have been an education; but it can hardly be described as either a pleasant or a costless adventure. Eventually, of course, men were found who knew the doctor's trade; but they had to contend with something more than the original trouble.

In the same chapter of experience, costs proved quite as puzzling. To one whose job it is to wonder "how prices get that way," items lifted from doctors' bills are a fascinating study. The fees charged for setting a broken arm—we rather go in for this—vary enough for the highest to be a multiple of the lowest. In terms of price, the removal of an appendix is a major or a minor operation. A trio of physicians make the

same charge per visit; each has his way of counting up the total, and no one of the three is in the arithmetic. Such differences defy explanation in terms of quality of service, personal reputé, or local custom. My list includes extravagant payments to bunglers, reasonable fees to competent physicians, merely nominal charges for sickness of long duration, and services rendered without compensa-



"If he wants coffee, candy, or cigars he gets just about what he asks for. . . . But medical service bears no mark of assured quality"