President’s Address *

H. R. REICHMAN, M.D.
Salt Lake City, Utah.

It has been a great honor to serve as President of the American Proctologic Society. I should like at this time to thank the membership for this expression of their confidence. I have endeavored to carry out the duties of this office faithfully and I am profoundly grateful to every one who has worked so diligently for the Society during the past year.

It is with real satisfaction that I can report to you, that the American Proctologic Society is in excellent condition.

Many of you, and I am sorry not all of you, were able to attend the joint Anglo-American Sessions held in Atlantic City and London last year. The clinical session with our English colleagues proved so successful that all members in attendance unanimously agreed some steps should be taken to have regular combined sessions. Acting upon this suggestion your council has agreed that such sessions should be held every five years. The combined meetings would be held alternately in the United States and in Great Britain. An invitation to attend our meeting in 1964, and to participate in our program has been extended to the Section of Proctology of the Royal Society of Medicine.

In addition to the progressive excellence of our annual scientific sessions, advancement is also being made in other activities of the Society.

It is the desire of this Society to help in the growth and development of the local and regional proctologic societies. It is our belief that expansion and increased activity by local societies will stimulate interest in the specialty. Increased interest among the members of the general surgical profession will result in better care of the patient, suffering from colon and rectal disease.

Through our Journal, Diseases of the Colon & Rectum, complete, accurate and factual information is presented to our members and is made available to the general profession. The success of this Journal is a credit to our Society. Assurance of the continued success of the Journal is a responsibility which rests squarely on the shoulders of every member of this Society—an obligation which I fear most of us, thus far, have failed to realize. I fear we have
accepted publication of this excellent official Journal of our Society as a matter of fact.

Our Research Foundation was organized to sponsor fundamental research in diseases of the colon and rectum. This is essential in any progressive scientific society. It is also an obligation for a group such as ours to continue to add to the scientific knowledge pertaining to our specialty. During the past year this recently organized foundation has participated in several projects.

Through our Educational Loan Fund, two physicians have completed their training in colon and rectal surgery and are now eligible for examination by the board. Neither of these two men would have been financially able to complete their training without this assistance. Others are being helped at the present time.

A report on the progress of the American Proctologic Society for the past 60 years, together with some of the problems we may expect to encounter in the future, was presented to the Society by our president last year. I shall make no comment on this excellent presentation. Rather I should like to present briefly what I believe to be of the utmost importance to this organization, as well as our great American society. There can be no doubt that the character and success of any society will be determined by the character and activities of its individual members. A society's functions can only be the summation of the activities of its individual members. The function of a tissue or an organ is determined by the structure and activity of each component cell. Who should know better than physicians that any deviation from normal function requires correction, and any malignant change demands removal, lest the entire body be destroyed. So it is with any society.

The American Proctologic Society is fortunate that its members are capable, competent, and willing to work for its good, and for the advancement of the specialty which it represents.

For 61 years our predecessors and our contemporaries have endeavored to maintain this fellowship of honorable, dedicated men—men with a high moral conscience, dedicated to the objectives as stated in Article IV of our Constitution: "The purposes of this Society are to facilitate the dissemination of the knowledge relating to the colon, rectum and anus; to encourage proctologic research; and to advance the specialty of Proctology." The consistent progress of this Society both numerically and in the ever increasing scope of knowledge pertaining to this specialty is no doubt largely due to adherence to this constant objective. The annual meetings of this Society constantly attract men who seek knowledge of advancement in the management of colon and rectal disease. Our primary objective, however, has never been for numerical growth alone; always qualitative growth has been more important. This Society welcomes well-qualified men who possess the kind of character expected of its individual members.

What should be the characteristics of these individual members? I believe we should place first on this list the qualities of honesty and integrity. "To thine ownself be true, and it must follow as the night the day, thou canst not then be false to any man." To be true to oneself, to have integrity, requires far more than pretense. One must do what he knows to be right regardless of immediate cost or sacrifice. Decisions for one's self, for one's family and, in the case of the physician, for his patients, must be based on what is right, and what is proper, and not expedience. It means one must, at all times, be honorable in thought and deed. He must have moral courage. Nowhere in all the broad field of human endeavor can the Golden Rule have a more significant place, than in the practice of medicine. It is to be hoped and it is expected, that every member of our Society, when called upon to make a decision, to give
advice or recommend treatment for a patient will apply the Golden Rule before acting.

Another trait of character which I have found to be almost universal among our members is dependability. As your president, I have made many requests of many members and without exception, I have received a prompt response. In each instance that which was promised was ably done. It must certainly be reassuring to a patient to know that the physician he has chosen can be depended upon to assume his responsibility and to do his work well.

Of all desirable qualities, I believe understanding and kindness rank high upon the list. Certainly no patient with a proctologic complaint enters the physician’s office without some feeling of apprehension and embarrassment. If we are patient and kind in approaching this unhappy, tense individual our ministrations are more likely to succeed. Here one must always have a true appreciation and love of his fellow men; a strong desire to help, to relieve pain and suffering often under very trying circumstances. “Service above self,” the Rotarian’s motto could well be utilized by our Society. The physician must care for the patient and his ailments first, and consider himself only after this has been accomplished.

The specialist in colon and rectal diseases has an exceptional opportunity to practice the art of medicine. While attempting to solve the scientific problem presented by his patient, the physician, and especially the proctologist, can practice this art and allay fears and apprehension. Group practice, institutional practice and many types of specialty practice may deprive many physicians of this opportunity and the deep satisfaction of the doctor-patient relationship, but, as I have said, we proctologists have an exceptional opportunity to practice the art of medicine.

This is most essential at this time. The introduction of the third participant in the practice of medicine is undermining the patient’s appreciation of his physician’s personal effort. Many patients believe that their prepaid health insurance, often provided by no effort of theirs, should buy them the best of health. They believe a continued state of good health is guaranteed by wonder drugs and medical miracles. It is possible that people have been misled into believing that a miracle can and should always be forthcoming. It has been said, that never before have so many Americans read so much which has been written about medicine by so many who know so little about what they write. Perhaps the effect of this proves the dictum, “a little knowledge is a dangerous thing.” Those of us who devote our lives to the practice of medicine, humbly acknowledge that the great mysteries of life and death, health and disease still remain great mysteries. Present-day knowledge of medical treatment produces miracles when compared to the results of a few years ago. We hope and believe, our present knowledge will be considered meager when compared to knowledge we expect to possess in the future. In this modern day the proctologist must be prepared to manage surgical disorders ranging from the simplest to the most complex. He must be prepared to make diagnoses and advise patients whose complaints range from those caused by minute lesions to those associated with the most complex organic and functional disorders. His practice includes patients of all ages, from the newborn to the most elderly person. Thus, the proctologist requires broad medical knowledge based on proper training.

In our attempt to assure the competence of young physicians who have not had an opportunity to prove their capabilities, but desire to enter the practice of proctology, the American Board of Proctology has assumed the responsibility of examining these young aspirants and certifying those who can qualify. As you know, three years of
approved postgraduate training in general surgery and two additional years in colon and rectal surgery are required before a candidate is eligible to take board examinations. By some, it is thought that this training is too prolonged. It was found, however, that the training in abdominal surgery afforded by the average two-year residency in general surgery was inadequate. Perhaps, better residencies in proctology can be provided to solve this problem.

Superior training alone does not make a superior surgeon; however, superior training is a most essential requirement. Training must be accompanied by sound judgment. Continued study increases knowledge and knowledge enhanced by experience promotes judgment. Mature judgment increases the capacity of the individual to exercise independent thinking and his ability to assess quickly factors of importance concerned in any given circumstance, and to make the best possible decision. This is a quality necessary in medical practice.

These requirements place a great responsibility upon our medical faculties. Certainly, today, great emphasis is being placed upon the science of medicine, much time is being devoted to research. Great have been the accomplishments of science. Has the importance of the patient as an individual been equally stressed? No physician can master all medical knowledge. No one can keep pace with all the advances in research and scientific knowledge. Every physician, however, is expected to do his utmost to accomplish this in his own particular specialty.

Every physician, regardless of his specialty, is expected to possess high moral character. The physician must constantly strive to learn all that is new in scientific progress, yet he need learn only once that he can accept only one moral standard which is the highest, and must be constantly maintained. He is expected to conduct his practice in the highest ethical manner. Every student must learn and every physician should know that he is treating the greatest of God's creations, the individual human being. This individual does not consist of his physical being alone. His emotional and spiritual components may be far more important than the physical ills which he endures. He should never be considered an experimental animal. When the student completes his education, he should have, first and foremost, a humble appreciation of his great responsibilities. Once he appreciates them, he is at liberty to seek, to develop the greatest possible skill in his chosen specialty. Lacking this moral conscience, he can only be a tradesman, selling his services in the market place.

Usually the physician has been generally accepted as one of the best educated men of his community. He has been generally accepted, and respected, as one of the intellectual leaders. Of recent years this general acceptance appears to be waning. This may be the result of several factors. For many years he has been reluctant to actually participate in community affairs. This is readily understandable but it is unfortunate. There has always been, and there still is a constant demand upon his time. The physician should regard all people who require his services in the same spirit and perspective. He has thus assumed a position of nonpartisanship, particularly in the political world. Community inactivity on the part of the physician has left the medical profession, as a whole, poorly represented and often ignored on the fast-moving social, economic and political scene. As a result, rewards in economic and social affairs of our country today have deteriorated to such an extent that many students do not consider attaining a place in the medical profession worth the extra effort required to obtain a medical education. Only a few years ago there were 10 to 12 applicants for every place in medical schools. Now there are only 1.7 applicants for each posi-
tion. This is a condition serious enough to demand immediate recognition and attention.

Also today, higher education is becoming quite general. College education is no longer found predominantly among professional groups. This is extremely desirable, particularly in a democracy such as ours in which an enlightened voter has no more voice than does one who is illiterate. With better understanding and better education, better government should be possible. Broad education no longer places the physician in a position of the select among educated groups. Even if he is educated, he must prove himself; he is no longer accepted because of his medical education alone.

Does a medical education today adequately prepare a physician to assume community, as well as professional, responsibilities? Does education today adequately stress individual opportunity and responsibility?

Secretary of Agriculture, Ezra Taft Benson, in a recent address, noted with alarm that in the past 25 years there has been a great shift from individual responsibility, to government responsibility. There has been an alarming shift of local government responsibilities to federal government responsibility. This shift of responsibility to government can only result in destruction of individual incentive, ambition and individual accomplishment. Individual responsibility and accomplishment have been the very essence of America’s greatness. Secretary Benson pointed out that the present freedom and the abundance of everything enjoyed by citizens of the United States is owing to three fundamental factors:

1. Free enterprise. This is the right of the individual to choose his own occupation.
2. Private ownership of property. This is the right of the individual to own property, acquired by his own industry and effort.
3. The free market. This is the right of the individual to buy and sell as he chooses.

Here is a fundamental right which lies close to the individual—especially the patient and the physician. The right of the patient to choose his own physician and the personal responsibility assumed by the physician in rendering service to the patient must be maintained. This is the very essence of a philosophy of medical practice which has given the people of this country the finest medical care the world has ever known. If this system of “free choice” is permitted to continue, we may expect the quality of medical care to reach a level which transcends the limits of comprehension.

Unfortunately there are forces which oppose and seek to destroy the American system of medicine. This is shown by the decrease in individual responsibility and initiative. Secretary Benson lists the responsibility factors as follows:

First: The subversives. These are the people who do not like the American system, and seek to destroy it.

Second: “The Do Gooders.” These are individuals who believe things can be done better under the management of governmental bureaus and agencies. The medical profession encounters many problems whenever a third party intervenes in the practice of medicine. There are individuals in authoritative positions in government, who believe it is their responsibility to guide, regulate, and even direct the time and talents of the physician. This intrusion must be watched carefully; its ultimate effect can be disastrous. The destructive effects on the quality of medical care can be detected whenever a third party employs a physician and sells his services. The physician becomes a tradesman hired at a cut-rate fee to do a job. The patient knows nothing of the sacrifice made by the physician in providing these services. Generally the patient has the impression that the
physician is fully compensated for his services. Any dissatisfaction with the service rendered is often taken to the agency rather than to the physician. Under these conditions the incentive, diligence and dignity of the physician are challenged and often destroyed. In brief it may be stated that when the doctor-patient relationship is lost the quality of medical care deteriorates.

Third: “The Self Servers.” These are individuals who view various governmental agencies as a means of gaining personal advantage and power. In the business world this could lead to restraint of trade or monopoly. As applied to the medical profession this means a captive practice conducted through some agency acting for a physician or group of physicians, not necessarily of the patient's own free choice.

Fourth: This is the greatest group numerically and undoubtedly the most important. These are apathetic individuals who stand by and see small minority groups guide the affairs of our great American society into destructive pathways. These nonvoting individuals have heard, but have never learned that: "The price of liberty is eternal vigilance." It seems likely that many of us in the medical profession can be numbered in this group.

During the past quarter of a century in our country the goal has been to be a common man. Recent world events in the realm of science have suddenly shown us that what we need is the uncommon man of unusual talents and accomplishments. Men with superior training and understanding, dedicated to the American way, are needed to lead us to a position of pre-eminence in the world. The need today is for men of knowledge and integrity; men of ambition, imagination, diligence and dedication who possess a desire to serve their fellow men. If our great country, in these perilous times, needs a rebirth of moral and spiritual values then let it begin here and now. Let each individual member of our Society become a worthy example of integrity in his professional and his community activities. Let our profession as a whole strive to be a good example and lead the way. If everyone here today will dedicate himself individually to these principles and objectives, we need have no fear for the future of our illustrious organization.