

SPEECH OF THE HONORABLE JOHN E. FOGARTY, M. C., 2ND DISTRICT, R. I.  
AT THE BETH ISRAEL HOSPITAL DINNER HEID AT THE STATIER-HILTON HOTEL,  
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#### MEDICAL PROGRESS: A LOOK AHEAD

It is a genuine pleasure to join with you this evening as you reflect upon the many accomplishments of the last half-century and look ahead to the challenges of the future. Beth Israel's record has been one of inspired service and steady growth since the early dispensary days of the Mt. Sinai Hospital which led to the creation of this outstanding teaching institution. I have long been aware of the vital role of such institutions, and I heartily congratulate Beth Israel upon its long and distinguished service.

During the past score of Beth Israel Hospital's 30 years of progressive teaching, research, and healing activities at this site, I, too, have been deeply concerned with the serious matter of building our Nation's health. For the past eighteen years it has been my privilege to serve in the Congress of the United States, where health issues have always been my primary concern. After these many years of close association with medical scientists and educators, as well as with those who determine Federal policy, I welcome opportunities such as this to



look ahead toward further medical progress.

Foremost in the advances of the last few decades of life-saving progress in medicine has been the application of research findings from the medical and biological sciences. This period has been the most fruitful one that the world has ever seen with respect to scientific achievement, and we are indeed fortunate to be living in these times. As a layman, I cannot presume to discuss specific details of medical research. However, without enumerating the thousands of developments including antibiotics, heart surgery and all the methods and materials for diagnosing, treating, and preventing disease, I wish to express my profound appreciation of them.

I am particularly pleased with the part that hospitals such as this have played in bringing health benefits to the public. Research training for our young doctors in real hospital situations, with real patients and with the supervision of senior physicians has proved itself, as you all know, a keystone in the whole national health picture. Our ablest medical investigators and practitioners continue to come from



this background, The Nation looks to your institution and others like it for both the development of our physician-potentials and the evaluation and application of new research findings.

Because of my interest in medical and health research, I am aware, as I'm sure you are, that this is the shining hope of the human race for a healthier, happier future. In my role as chairman of the House Subcommittee receiving the testimony of medical scientists in connection with appropriations for the Department of Health, Education, and Welfare, I do a sizable amount of "homework" myself, reading over the testimony and the reports that sketch the progress of research and its probable application to practice.

From this "homework," I gather that our medical researchers now think that we can look forward perhaps -- and I know that they stress the perhaps -- to such advances as the following:

1. Solution to the present question of whether some or many human cancers are caused by viruses, with all that this implies for possible prevention or treatment.



2. Better, or perhaps complete, understanding of the artery disease which medical men call atherosclerosis. From such understanding would come methods that physicians could advise for prevention or treatment of this major cause of death.
3. Better drugs or other means for treating high blood pressure, resulting from an understanding of its cause and, with this understanding, development even of a rational method for its prevention.
4. More and better vaccines for control or prevention of infectious diseases, including tuberculosis and the common cold.
5. New knowledge in the field of mental and emotional disease, not only of environmental factors concerning or causing mental illness, but also of the role of drugs and, most importantly, of the chemistry and physiology of the brain.



Perhaps from advances in this last area will come the most striking changes in the practice of medicine. I have been told that physicians in the future -- and I hope it will not be a too distant future -- will be applying much new knowledge in the field of mental health to both individual patients and to community groups. Through such an approach we -- you as physicians and supporters and I as a legislator -- may be able to help in achieving a more intelligent social environment, so that each of our younger and our older citizens can better make his total contribution to his community and his nation.

A major concern of everyone in the health professions today, and an even greater concern for the years ahead, is the growing proportion of elder citizens in our population. We have much to learn about the basic processes of aging, to say nothing of our joint responsibilities to this group which the increasing longevity brought by medical progress assures that most of us will join. As many of you may know, the bill which I introduced and sponsored for a White House Conference on Aging became law last year. With careful groundwork throughout all



the States paving the way, the Conference is scheduled for January, 1961.

I know that this audience will need no urging to consider and to act upon the recommendations of this important meeting when they are promulgated, and I hope that they will represent a real platform for progress against the aging problem.

I know that you here today look forward especially to such future advances, as I do, and I can assure you that as our scientists show us, through their research, the way to improve the health of individuals and of communities, I as a legislator, stand ready to help in every appropriate way to implement the improvements. Furthermore, I am confident that your staff is keeping closely tuned to the scientific pulse, eager to relay the very latest research results from the laboratories to medical practice.

Now, let me talk a few minutes about some of my hopes in the broader area of world health -- the area of international medical research. Probably some of you here this evening have studied or worked abroad. Certainly many of you, while students, interns, and



residents, established friendships with men and women who, students or interns then, are now your colleagues in medicine in other lands. Such associations have undoubtedly shown you what a strong common bond medical science forms between world powers.

This summer, I was fortunate enough to attend the World Health Assembly with some of these dedicated health workers from all over the world. As in several previous assemblies, I was one of the official delegates and, as before, the meeting was an encouraging one to all those who have high hopes for medical progress and its role as an aid to world peace.

A major concern of the Assembly this year was the advancement of medical research. In my opinion, no subject could be more important, or more timely, for deliberation by the Assembly.

On my way to and from Geneva I visited medical and health workers in London, Dublin and Rome. Everywhere I went, I found these men and women in agreement with me on the importance of expanding medical research. They feel, as I do, that expanding research and disease control around the world is one -- perhaps the one -- truly



global effort in which all nations can and will join as real partners.

As I visited various health workers, and talked with others at Geneva, I gained fresh, first-hand knowledge of some of the health problems of the world, some of the potentials, some of the programs and their costs. These matters may be familiar to you. Yet, perhaps, the pace of modern business and the demands of daily practice have prevented you from keeping fully informed of world-wide--as well as our own -- needs for research, for more trained medical manpower, for health facilities, and for better education and information dissemination. I can assure you that the needs are many and great, but, equally, I am certain that we are entering a new era of greater interest than we have ever seen, on the part of more people everywhere, in doing something really progressive to meet these needs.

World interest and participation in medical research is at a high level, a fact which is reassuring because our total current medical knowledge has been derived from all quarters of the globe. You know better than I that the roots of most great medical discoveries lie in



scientific findings contributed by many investigators over the course of many years of work.

An all-important segment of any medical research program is that of clinical investigation. It is common knowledge that careful observations at the bedside and in the clinic -- such as the men and women in general and special practice and in hospital practice make every day -- have often pointed the way to important advances in the control of disease. This hospital has done a good share of this kind of work and I'm certain that it will multiply such activities in the coming years.

In today's newer hospital facilities we can observe several significant trends in addition to research orientation. City hospitals are moving toward the suburbs -- and it has been predicted that probably most of them will be in or beyond the suburbs within 50 years. Closely related to this movement is the trend of hospital architecture toward more spacious and appealing, even motel-type, accommodations, intended to foster more personalized care.



Along with the blessings of increased medical knowledge, we must expect that only the larger hospitals will be able to offer the full range of expensive diagnostic and treatment services and equipment. Each such major institution may be affiliated with a number of smaller hospitals, clinics, and community centers which might perform their supporting functions more effectively in an integrated health care structure of this kind.

Many communities are approaching this kind of medical care organization today, I understand. To all communities, I would recommend that they look ahead five to ten years, or more, to assess their anticipated population growth and the extent of their expected resources and every other foreseeable, related factor. Now is the proper time for community leaders to determine how their present institutions may contribute to future medical care, and what must be done to offer the latest discoveries of medical science to the community.

Increased medical services will most certainly be accompanied by increased costs. Since hospitals must compete in today's labor market



for medical care personnel, wages must rise. The necessity for more tests, personalized care, and more complicated equipment can only mean higher costs. A few factors will help to offset increased costs, but experience shows that costs will inevitably go up.

Integrated care planning should reduce costs by eliminating duplication of complicated equipment. Then, too, a concerted effort to shorten patient stay at the hospital will help to ease individual burdens. Increased outpatient service would also result in reduced burdens plus more effective use of available space, but obviously such measures cannot overcome manifold economic pressures.

However, I don't believe that there is any likelihood of a swing to socialized medicine. Present trends suggest that a vast extension and stabilization of prepaid medical and hospital care plans of various kinds will absorb much of the cost to the consumer. Most Americans still have a strong independent nature characterized by the desire to pay their just debts, and there are bound to be solutions to the problem of adequate medical care for all if we all will work hard enough



together to find them.

In complex medical financial problems of national scope, the Federal government will take action, as it has in the past. We are all well aware of the appropriations which have been made in the interest of national health and which have been continually, rightfully, and needfully on the upswing. I can assure you that we in Congress are making every effort to see that the taxpayer's dollars will be appropriated and spent only when they are urgently needed and only where they can do the most good for the advancement of the people's health.

In a moment I would like to mention some of the current pressing medical problems which are being deliberated in many places today and which influence any looking to the future. First, however, I want to set forth a few of the basic, general considerations which I follow in judging between the many competing needs for Federal funds:

1. The most vital factor in the strength of a state or nation is the general health of the people. Poor health can sap the Nation's strength and undermine its productivity.



2. Medical science needs to learn much more about the basic laws of human health and illness. We must have more medical research in order to increase our healing resources.

3. Much of the medical knowledge which is already in our hands is not being applied as widely as it should to fight disease and relieve suffering.

4. Money wisely spent on health is by far the greatest bargain anywhere in the economy.

These are among the truths which I hold uppermost in my mind in presenting national medical issues to the Congress and the President. During the past year these principles led me to call attention to problems which seriously threaten to impair the progress of medical science.... and its application as well. If you will allow me to quote from a letter I wrote to the President this summer, it will highlight, I believe, the medical manpower problem's practical contents and those closely related problems affecting our hopes for the future



progress of medicine: the needed research and teaching facilities and the current care needs of our people which compete for our tax dollars.

My opening paragraph to the President read as follows: "The Nation is facing a shortage of 3,000 physicians and 4,000 dentists over the next ten-year period. This prospect imperils the maintenance of our present health standards and precludes the expansion demanded by our growing and changing population. It will deny needed improvement in the level, quality, and distribution of the Nation's health and medical care services."

I went on to explain in some detail that these estimates were based on highly predictable population trends and the ration of physicians and dentists to population. I also pointed out that the medical schools admitted that they could do but little about increasing the current rate of graduates.

The President's reply to my letter stated that this problem required still more investigation to substantiate what I believed to be well-supported estimates of the needs. Naturally, I was more than



pleased when, just a few days ago, eminent consultants reported similar findings.

The report of the Consultant Group on Medical Education to the Surgeon General of the Public Health Service concluded that probably the greatest immediate obstacle to expanding the Nation's medical education capacity is the problem of financing needed physical facilities, particularly those for teaching as contrasted to research and hospital construction which have been Federally aided, as you know, quite substantially.

Thus we see that right now, in the face of aroused awareness of the continuing need for more research and research facilities, we must consider the practical need to staff our laboratories of the future as well as to increase our future supply of practitioners and teachers. Medical knowledge has progressed tremendously in the last few years, but to be realistic we should liken present day understanding of health and disease to an iceberg, the true dimensions of which are still hidden from our view.



Now, as we pay tribute to those who foresaw the need for this institution at the turn of the century, and those who underwrote its start as a teaching institution thirty years ago, we too must plan for the future. We must look ahead with the full appreciation of the past roles of voluntary organizations and Federally-supported agencies, knowing that both are essential to medical progress in this country.

Teaching hospitals like this are the essential places to which the medical graduate looks for the final refinements of his education, much as the telescope mirror looks to the polishing rouge to make it effective in focusing on our environment. These training grounds for our budding medical scientists and practitioners have a fundamental responsibility to increase their capabilities. As the population growth soars, your leaders must anticipate the needs and devise effective means to expand, but they may also anticipate greater Federal endorsement in accordance with the trends of increased medical appropriations in recent years.

It is time to seek out the means for the needed expansion, and



I'm sure that this audience can be as resourceful, if not more so, as the Beth Israel leaders were in the early thirties.

It is time, too, to be re-examining the hospital's position in relation to the other health facilities in the city. How much larger can it and should it grow? What additional functions it can undertake and what services might better be done elsewhere are questions which I'm sure you answer every year -- I only urge that these answers be derived in proper perspective to your overall community health organization.

Finally, since you have such a vital interest in the graduates of the Nation's medical schools, it is time to consider your own roles, both as a teaching unit and as individuals, in fostering basic medical education.

These are just a few thoughts to bear in mind as you look ahead to ever greater medical achievements. I'm sure you will have many more ideas.



The road ahead may not be an easy one. No doubt it will take more of the persistence, knowledge, patience and hard work that paved the way to accomplishment in the past. But, with your continued vigor and enthusiasm, I promise that the results will surpass your highest expectations.