“PRACTISING MEDICINE WITHOUT A LICENCE”

The New England Journal of Medicine has in the past lambasted the US Congress for “practising medicine without a licence”. The basis for this outburst was the continuing intrusion of legislators into the practice of medicine. Such interference is becoming a worldwide phenomenon from which Australia is not exempt.

Health is a top priority for governments, and politicians increasingly dictate how health care is delivered in hospitals and the community. In this process, politicians assume the mantle of “de-facto doctors”. Their past treatments have included: an intentional reduction of hospital beds, fuelling the current chaos in our emergency departments; the capping of medical school places, causing our present chronic dependence on overseas-trained doctors, with unfortunate outcomes such as the Bundaberg Hospital scandal; the de-skilling of general practice, exacerbated by the downgrading or closure of rural hospitals; and the failure to follow up the Relative Value Study, with its resulting negative impact on the morale of doctors and a loss of trust in de-facto doctors. More recent treatments include a precipitous increase in medical school places, which is a disaster in the making if the required expansion of training infrastructure fails to materialise.

Given the tyranny of the electoral cycle, it appears that some aspects of medical practice are low priority for de-facto doctors: they eschew responsibility for instituting appropriate therapy, have a penchant for blaming others for treatment modalities that go wrong, and show a lack of commitment to long-term care. Finally, any notion of teamwork appears to be completely foreign to these “practitioners”, divided as they are by political ideology.

But one factor remains paramount: the downgrading of evidence-based medicine, as “doctors practising without a licence” respond to the demands of their electorate, and treatment decisions are based on their value in terms of votes rather than on evidence.

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