



A message from . . .

The President

COST CONTAINMENT VS. QUALITY OF CARE

ACCORDING to recent polls, it is apparent that the No. 1 health care concern of both physicians and society as a whole is the increasing cost of medical care. This has generated a series of "cost containment" committees, established amidst cries of alarm from the business community, the media, labor groups and the political establishment. There is also serious concern among physicians and other health care professionals, such as hospital administrators. These cost containment commissions have been established with an avowed purpose of "cutting the cost of health care" but, they, in general, seem to have been composed of representatives of business, labor, consumers, politicians and insurance with precious little input from health care professionals. In all this rhetoric of "cost containment," I am disturbed to find that there is very little attention paid to "quality" of care.

To a certain extent, we in Medicine have been victims of our own successes. Life expectancy has increased. Infant mortality has decreased. The quality as well as the quantity of life has been vastly improved. Procedures and innovations such as surgical and medical ICU, CCU, neonatal centers, joint replacement, coronary artery by-pass surgery, intraocular lens implantation, renal dialysis and transplants for end-stage renal disease, aggressive chemotherapy for patients with previously quickly-fatal malignancies, to name but a few, have improved quality as well as quantity of life for many over the past two decades. Even the heretofore much maligned CAT scan has proved itself to be an efficient and cost-effective diagnostic procedure.

These advances do not come cheap, nor are they the result of efforts of politicians, bureaucrats, Ralph Nader's consumer groups, or even the *Washington Post*. These advances were made by

the medical profession in response to our stated goal of improving the quality and quantity of society's health and well-being.

Cutting health care costs, per se, is not difficult. If I, or for that matter, any other physician, were given dictator-like powers, I expect we could cut health care costs in half starting tomorrow morning. The end result would be: survival rate and life expectancy would go down; infant mortality would go up; and most people would not enjoy the improvements of the quality of life from the advances outlined above. In effect, we could ration medical care, but this would indeed cut costs.

Please understand that I am not in favor of continuing the spiraling increase of health care costs. I feel it is a subject that must be addressed by health professionals and society as a whole. We are told that 10 per cent of our gross national product is too high a price to pay for the best medical care available anywhere in the world today. If this is the case, then society must decide what percentage is appropriate. As a concerned profession, however, we must provide the input and education so that the buzz-words "cost containment" do not become a euphemism for rationing quality of care. If society as a whole accepts the concept of rationing medical care, then this is its choice; but we must be ever-vigilant to inform the public exactly what the choices are. If we fail to do this, then we have failed in our duty to safeguard the public health and welfare.

Increasing health care costs are a serious problem, but, in a headlong rush to lower these costs, our profession must be ever-mindful of encroachment on quality of care and insist that high-quality health care be available to all, not just to those fortunate families rich enough to afford it.

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