

"Rationing"—Health care style

Government intervention in the practice of medicine has been written about, listened to, and proclaimed over with such regularity that the cynical response is often, "What else is new?"

This is not to say that all of the efforts to reduce the costs of medical care have been wrong. Nor is it to say that physicians do not have a justifiable right to protect their interest and, in particular, the interest of their patients.

Too often the public seems to think that this debate is some sort of an argument between organized medicine and governmental bureaucracy. As in most areas, they are "for" anything that will cut costs. But they also realize that while the cheapest product may not be the best, the most expensive product may not work either.

Whether the consumer realizes it or not, health care is slowly but inexorably being rationed, and sometimes the sickest people are the victims.

Let us take as an example the recent colorectal surgery performed on the President of the United States. Although I am relatively sure that the Diagnostic Related Group formula would not have been applied in his case, the example I am going to suggest is valid.

You may recall that during his illness, the surgeons explicitly outlined what the possible complications of such surgery might be. Fortunately, President Reagan's bowel resection and his rapid recovery came well within the DRG formula. But what would have happened if he had developed an abscess or suffered heavy bleeding requiring surgical reentry? If any of these complications had occurred, the President of the United States would have been a very sick man. His hospital stay would very likely have been prolonged way beyond the DRG allowance. In other words, the degree of severity and unpredictable complications create a gap between the allowable costs proclaimed by the bureaucracy and the actual costs of a very sick patient.

The paradox of the present system is that its goal is to use every possible means to keep patients out of the hospital. Yet if patients are ill enough to necessitate hospitalization and should develop

complications, hospitals are faced with releasing them too soon and suffering the medical consequences, or keeping them in the hospital and inviting financial loss.

True, absolute rationing of health care is not yet upon us. But the signs are there. Unless they are recognized and fought against vigorously, the quality of health care in this country will suffer a major blow.

GEORGE W. NORTHUP, D.O., FAAO

Children's fingerprints

Diane Gooch is on a mission to protect our children. As executive director of the National Fingerprint Center for Missing Children, her goal is to provide law enforcement agencies with complete fingerprint records that will help in recovering children more quickly. This lack of preexisting proper identification often hampers a police investigation once a disappearance has occurred.

In a recent address, the former public school teacher thanked the Auxiliary to the American Osteopathic Association for passing last year's resolution in support of her organization. Ms. Gooch pressed home the seriousness of her cause by quoting some sobering statistics: 1.3 to 1.8 million children have been reported missing in the U.S.; 5,000 more are reported missing every day; and 6,000 to 8,000 unidentified children are given a "potter's field" burial each year.

"Unless we get our priorities straight. . . we will continue to make it easy for our children to fall prey to adults who turn them into prostitutes, use them in pornography, encourage their drug abuse, adopt them illegally, or kill them," said Ms. Gooch.

Based in Kirksville, Missouri, the National Fingerprint Center for Missing Children is an outstanding example of public service. They deserve our support.

GEORGE W. NORTHUP, D.O., FAAO

The effectiveness of spinal manipulation

From time to time, an article on spinal manipula-