Oration from 1915

Oration Title:

*The Practice of Preventive Medicine*

Orator:

John M. French, M.D.

Abstract of Oration:

Dr. French begins by making the distinction between the old and new roles of physicians and their patients. "The old idea regarded the physician as a healer, whose chief business was to relieve suffering, and restore the sick to health. The new looks upon him as a teacher, whose most important work is to promote health and prevent disease." These roles are reflective of the recent change in medicine: from therapeutic to preventive. Dr. French reflects respect and admiration for the physicians of the past. They were family physicians, and although ignorant of much of the medical knowledge of today, they were good doctors. They knew their patients more closely than any modern doctor can, and they had the ability to read signs and symptoms in a more personal way that has now been lost to instrumentation. They made bedside diagnoses, nursed their patients themselves, and did not have the availability of specialist consultation.

French discusses modern medical advancements, especially the introduction of anesthetics and antiseptics in surgery, and the rapid rise of internal medicine. Accurate diagnostic lab tests have been invented, and treatments such as vaccines and antitoxins have also been developed. He sees surgery becoming secondary to internal medicine, and so urges his surgical colleagues to push the limits of modern surgery and "work to bring the science and art of surgery up to a higher ... point of perfection". But although surgery will rank behind internal medicine, the two fields will work together in a preventive manner, for preventive medicine is the definite future of medical practice. Periodicals are contributing a great deal to the preventive medicine movement, but, French warns, many back medicines or treatments based on financial interests rather than sound health practice.

Dr. French addresses two issues instigated by the shift to preventive medical practice. His plan for doctors to receive adequate compensation for their services involves limiting their practice to 500 patients, and agreeing with them to receive annual payment for care. For this sum, they will receive preventive instruction and regular care during sickness. When a specialist is needed, his payment will be decided previously by the doctor and patient. Dr. French gives recommendations for the frequency and content of patient examinations. He knows that inevitably there will be challenges to his plan and arguments by his peers that his system will never be successful, that patients will not be willing to pay for care when they are not sick. But
he counters these claims by saying that many ideas have been labeled "impossible" in the past and so many of them have been brought to fruition today.