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SECOND WORLD CONFERENCE ON MEDICAL EDUCATION

MEDICINE—A LIFELONG STUDY

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BY

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I am proud to have the honour of welcoming you to this great conference on medical education and of saluting you for your dedication to the profession of medicine and to medical education. Ours is a great international fraternity of men and women devoted to the health, welfare, and happiness of people everywhere. Medical education attracts idealistic members of the profession who are concerned about the transmission of the science and the art of the practice of medicine. They cherish the great and rapidly increasing body of knowledge and skills of medicine. They transmit all of this to the young and inculcate in them the ideals and the spirit of service which imbues our great profession.

And so may I express your gratitude and mine to the World Medical Association, its officers and Council, for organizing and planning this Second World Conference on Medical Education. That such a Conference would be held was inevitable after the great success of the First World Conference in London in 1953. The impact of the proceedings of that meeting on undergraduate medical education is well known. The success of this one is assured by the meticulous planning of the programme committee, and by the distinguished group of leaders in medical educational thought and practice here assembled. You have come from the great medical centres of the world to exchange experiences and ideas about the art of educating and training the physician. Modern technology, it is true, is shrinking distances and making peoples everywhere close neighbours. Even so, your presence here represents sacrifices from your obligations at home, and your colleagues here in America are most grateful for the time you will be spending among us. We do hope that while you are in our country you will spend more than this week with us and visit far and wide.

All of us are indebted as well to the World Health Organization, the Council for International Organizations of Medical Sciences, the International Association of Universities, our host organizations, the American Medical Association, and the Association of American Medical Colleges, and to many foundations, corporations, and associations, as well as to individuals who have helped to make our meeting possible.

We are proud indeed that the President of the United States has honoured the Conference with his sponsorship.

If you will permit this personal note, may I say that as I have worked with Dr. Louis Bauer, a most

distinguished physician and the Secretary-General of the World Medical Association, I have appreciated his great skill as an organizer and leader. Learned, humble, sensitive, wise, he is at the same time decisive (as those of you who have attended meetings of the World Medical Association know full well). His selfless dedication to the best interests of mankind through our profession and medical education is an inspiration to us all.

We are here to think together about the problems of medical education and learning which continue throughout the professional lifetime of the physician. Our concern will be with the ways in which the physician may best and most expeditiously extend his knowledge and improve his skills; with the health problems of the community of which he is such an important part; and with the preparation of medical teachers and research scientists.

A Period of Crisis

Never, perhaps, has a conference been convened at a time of greater ferment. Perhaps it is not too much to say that this is a period of crisis. I refer to the crisis of the adaptation of science and technology to the problems of the revolution of rising expectations of people everywhere. Information on the advances in science and technology is known world-wide, almost as soon as they occur. Never has a challenge been more immediate; never has the demand for the benefits of science and technology been greater; and never have the problems of medical education and medical service been more urgent. Thus, we meet at a time when our deliberations are world news and our findings and recommendations are eagerly awaited—awaited not merely by our colleagues at home in the profession, but by peoples generally and by their governments.

Governments everywhere, and in whatever form, are increasingly aware of their responsibilities to their people. Edmund Burke emphasized this relationship, in eloquent words that are meaningful to-day, when he said: "Society is indeed a contract. . . . But the state ought not to be considered as nothing better than a partnership . . . to be taken up for a little temporary interest, and to be dissolved by the fancy of the parties . . . it is a partnership in all science; a partnership in every virtue, and in all perfection. And as the ends of such a partnership cannot be obtained in many generations, it becomes a partnership not only between

those who are living, but between those who are living, those who are dead, and those who are to be born."

But it is not my purpose to discuss government in relation to the problems of medical care. This is not the subject of our conference. However, may I say that to the extent that governments impose regulations on the medical profession that interfere with personal professional service, and regulate medical education in the interest of the political institutions of government—to this extent, the freedom of the individual doctor and professor is impaired. At the same time, medical men have come to appreciate that there are many things which the State can do more effectively in certain aspects of preventive medicine, public health, and medical service. Governments everywhere are in the business of providing hospital services, for example, and this is as true in the United States as elsewhere. The great problems of the mentally ill, of infectious disease and tuberculosis, of mounting populations, and of food and nutrition, and medical services for the armed Forces and Veterans, require community and State action. Without this community contribution of facilities and services the individual physician and the profession as a whole could not render their most effective service. In a sense, the State, with the co-operation of physicians, deals with broad environmental problems and organizes facilities within which the profession can provide its independent and essential professional services. Accepted, too, is the fact that the State must exercise a licensing function of physicians and health service personnel. The State, together with the universities and medical schools, guarantees to the public that the medical graduate is qualified to practise medicine, assuming personal responsibility for the health of the individual.

But the medical profession, this Conference of the World Medical Association, our national and local associations, and the individual physician himself, must be constantly alert lest the independence of the practising physician or health officer be restricted in his relationship with his patients. The fact that we meet in national and international conferences, publish papers, and communicate with one another on these vital questions without interference by government augurs well for the future and the solution of the problems we will be considering. As long as we, as individuals, are aware of our responsibilities and exercise them with judgment and humility, seeking only the welfare of our fellow human beings, we have nothing to fear for the future of our profession.

Increasing Demand for Medical Service

There are problems, of course, and one of them about which we will be talking is the demand for more medical service, particularly among peoples where facilities are inadequate for training physicians and health personnel in sufficient numbers to meet the needs of the community. Even in the United States, where there is one physician for every 750 people, a recent report to the Secretary of Health, Education, and Welfare indicated that a minimum of 14 new medical schools should be built by 1970 to meet the requirements of medical service to a growing population and expanding economy.

I learned in Indonesia recently that over the next ten years the number of graduates will be greatly increased

and that one physician to 10,000 people, with auxiliary personnel, will be able to meet the health needs of the country. The co-operation of international technical assistance agencies with the universities of Indonesia in this programme is an example of world-wide efforts to meet the health service needs of people.

I am convinced that this Conference and co-operating governments and organizations can mobilize a tremendous reserve of resources to meet the rising expectations for a healthful, decent existence. The international health year of 1960, presently being proposed and organized, will be a year of massive mobilization of all organizations towards these high goals. We will co-operate fully with officers of government, officers of the World Health Organization, and the United Nations, and will bend our own individual efforts toward doing what we see in front of us to do, whatever the sacrifice.

Medicine, an Influence for Good

More than 30 years ago one physician made up his mind that he could best serve his fellow men by leaving his honoured place in Europe, where he was esteemed as a theologian, composer, philosopher, and author, and by establishing a modest hospital in the jungle village of Lamborene, in French Equatorial Africa. He still labours there with help from his many friends and admirers the world around to bring modern medicine to the people he serves. I like to tell my friends in this country that he, Albert Schweitzer, was a pioneer international co-operation administrator, and an ornament of our profession. There are many Albert Schweitzers of medicine. In your own way, each of you is practising this same faith—faith in the individual, and faith in yourself and your God.

As we learn to respect ourselves, we learn to respect all life, and especially human life. Out of disregard for human life has grown the crisis and struggle of our times. Unhappily, many people seek only to gratify their own selfish acquisitive instincts. What a tragedy this is when there is enough for everyone's need, but, as someone has remarked, not enough for everyone's greed. The physician, like the philosopher and the saint, puts down this sorry scheme of things as man's baser nature, and with patience, kindness, and tolerance goes about his work of healing, and prays that time will not run out.

As we look back across the cataclysmic years of man's struggle and despair, we are challenged to see to it that, centuries hence, man will look back and say of us that we built upon the best that was in us and fashioned a better world for them. Medicine, with its age-old concern for the sick, the poor as well as the rich, the weak as well as the strong, has been an influence for good, surpassed only by the moral precepts of religion. The services of medicine, like those of religion, are, and will continue to be, largely personal. However, medicine must progress as a social as well as a biological science, and must broaden its outlook accordingly.

The timeless quest of medicine is health—health not merely of the individual, but of the society that embraces him. Medicine has learned that these goals are actually one and inseparable. Healthy individuals in a healthy society are interdependent for their security and well-being. Unhealthiness in one leads to unhealthiness in

the others. The quest of health is timeless, but with ever-changing frontiers. The outcome of the search depends upon the imagination, energy, skills, and courage of individuals, and especially of university and medical school men, men of "hope and forward-looking mind."

Relation of Medicine to Education

Now may I say a word about the relation of medicine to the university as a whole and to education in general. All of us have seen patients who are sick yet have no evidence of organic disease. We have seen sickness of the spirit of man, sickness of the soul. We have seen patients who are sick because they have given up the battle, because they were incapable of dealing with the problems confronting them. But it is rare indeed that we have seen a sickness of spirit in a man who has prepared himself well for the kind of world in which he is living. The tragic pity is that many people never have the opportunity to prepare themselves to cope with the problems of the kind of a world which is now emerging—a world of science, technology, and industry; and so we see many neuroses, many psychosomatic disorders for which the cure is difficult because re-education is difficult, especially when there has been little education to begin with.

An important element in the revolution of rising expectations is the expectation of every parent that his children will have the advantages of an education. It is clear enough to even the lowliest of men that if his children are to progress and have a better life in an age of science and technology, they must have all the education and training possible. The curiosity, imagination, and great energies of the young need only to be provided with a healthy outlet—serious study, work, and activity, mental and physical and spiritual, which lead them on to better appreciation of themselves, hopefully to full self-realization. Thus the young learn that disciplined well-schooled intelligence is the way to

excellence and that through excellence comes self-realization and understanding of themselves and their fellow men. In this manner they grow to maturity and to leadership in a world which will belong to those who are prepared to manage it.

Education and health are inseparably bound together, for unless the mind is trained to think, to create, to work, to try and fail, and try again and again to achieve, nothing results but a boring routine and no self-realization and no real happiness. Happiness is found only in self-realization, and it is through the mind, nourished by the healthy food of great ideas and great works and great achievements of mind and hand and spirit, that the individual comes to understand and realize himself—who he is and what he can do. This, I suggest, is the binding relation of medicine and education, not merely education of the doctor, but education of men.

The physician humanizes science. He brings to science human understanding and warmth, drawing from the rich traditions of his noble art, from all the ages and races of men. Selfless, dedicated, wise, and strong, his is a profession which seeks to embrace the wisdom of the race, the wisdom of the sciences, and the arts in the service of human kind. The physician of the future is our sacred trust. He will cushion the hammer blows of cold science and technology and of powerful government, and will help bring to this age peace and good will among men everywhere.

In this Conference, ladies and gentlemen, we rededicate ourselves to this great mission of education, joining hands with men of good will in every profession and in government to make a great crusade for the health and welfare of every living soul on this planet. In spite of the many divergent forms of government in this world and of tensions and differences among governments, this bond among men and peoples, though sometimes strained and bent, is never broken.

THE PROCEEDINGS OF THE FIRST WORLD CONFERENCE ON MEDICAL EDUCATION*

BY

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"Medicine to-day demands much from character, intellect, and practical ability, and medicine also provides a wide variety of opportunity for all kinds of talent. But talents will be wasted or misused if the structure and content of medical education are faulty, and if medical educationists remain complacently satisfied with themselves and their methods." With these apt words Sir Lionel Whitby concluded his presidential address to the First World Conference in London in 1953. It is with a deep sense of humility and sorrow that I stand before you, because I know that but for his untimely death Sir Lionel would be in my place and I would not have lost a kind friend and we an inspiring leader.

By a happy inspiration Sir Richard Livingstone, a former President of Corpus Christi College, Oxford, in an address to the Opening Plenary Session struck the

keynote of the whole conference when he expounded the philosophy of the first-rate in the sense that the hall-mark of the educated man is that he knows what is first-rate and "that the best-educated man is he who knows the first-rate in the most important human activities." If the development of such critical appreciation of the first-rate in medicine is the objective of undergraduate education surely the theme of this Second World Conference devoted to graduate education must be the maintenance and sharpening of the same faculty throughout professional life.

The First Conference was attended by over 600 men and women representing 127 faculties and 62 countries. Apart from the Plenary Sessions 87 papers were delivered, and the published proceedings amount to 800 pages containing just short of half a million words.

The work of the Conference was divided into four sections: Section A, Requirements for Entry into Medical Schools (chairman, Dr. Victor Johnson;

*An address given to the Second World Conference on Medical Education, Chicago, 1959.