

Anlyan: We need to think about tomorrow

(Reprinted from the Durham Sun.)
by Charles Jeffries

Many of the federal regulations regarding hospitals and health care are "ridiculous," according to Dr. William G. Anlyan, vice president for health affairs at Duke University, who added health-care regulations should be the responsibility of the private sector.

Speaking at the Durham Kiwanis Club at the Downtowner Motor Lodge last week, Anlyan said that the federal government issues conflicting laws governing health care, offers simplistic solutions for complex problems and generally provides little or no money to implement its regulations.

"The way the federal government swings in opinions on health care from administration to administration," Anlyan said, "is certainly not conducive to good, orderly planning of your tax money," he told his audience.

Depending on who was president

Anlyan cited the several conflicting regulations that have come from each federal administration, depending on who was president.

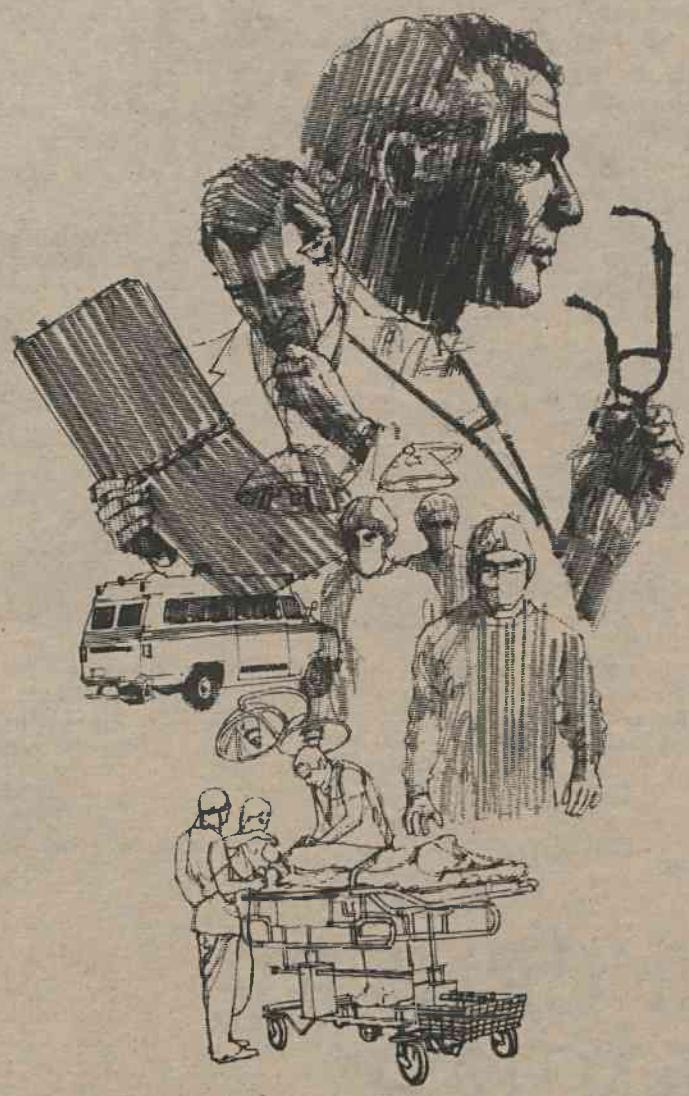
"In the early '60s, one administration told us there were not enough doctors, and we were asked to graduate more. Then in 1973, the U.S. Department of Health, Education and Welfare, headed by Casper Weinberger, asked us to reduce the number of physicians," he said.

Anlyan then criticized the Occupational Health and Standards Act. "We would have to spend the entire Duke Endowment to meet all the regulations it sends us," Anlyan said.

Nine percent lid unrealistic

As for simplistic solutions, Anlyan said that the cost-containment measures the government proposes — a nine percent lid on the cost of hospital care — are too

much. "Here at Duke, we have been able to hold costs down to a six percent increase last year and a seven percent increase this



"Our system here in the United States is very different from that in Great Britain, where there is socialized medicine. The expectations of Americans are much higher than those of Britains and socialized medicine could not meet them," he said.

Anlyan described the system of socialized medicine in Great Britain as "pathetic" and said "I hope it never reaches this country."

He did say he would favor some sort of system that would use both public and private resources to deal with the rising cost of medical care.

Seven priorities of health care

Anlyan then gave what he believed to be the seven priorities of health care in the country:

—Educate the public better about health problems, treatment and prevention.

—The need for a birth control program in this country, noting his disagreement with both HEW Secretary Joseph Califano and President Carter on their anti-abortion stands.

Before problems occur

—Genetic counseling, research into the matching of parents to reduce the occurrence of mental illness and birth defects.

—The need to enhance the system of monitoring newborn children.

—The need for more preventive health care for adults: "We don't need to see a doctor every time we hurt," he said, "if we did, we would have to multiply the number of doctors we have by ten."

More research technology

—And to increase the amount of money in research technology, citing such advances as using one blood sample for 18 different tests, the reduction of the number of days that heart attack patients stay in the hospital (see related story on page 1) and the use of the new computerized X-ray machine.

"There is a burgeoning role of the federal government in medicine. We should maximize the involvement of the private citizen and minimize the government's," he said.

"Politicians think of what is best for today, and not for tomorrow."

year. But to say that nine percent should be the limit, especially for the small community hospital is ridiculous," he said.

Another example cited by Anlyan was a recently proposed ceiling on the amount of money that could be used in research at the veterans hospitals, \$100,000.

Socialized medicine

Another sour note with Anlyan and the federal government, was socialized medicine — a system where all citizens would receive free medical care, regardless of income.

Navy grant funds diving study

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at Duke participating in the experiments which are expected to take 12 months to complete.

Dr. Peter B. Bennett, director of the F.G. Hall Laboratory for Environmental Research (hyperbaric chamber) where the research is being conducted, said that this is the first time the Navy has supplied divers for a protracted series of diving experiments in a non-military setting.

He said Dr. John Miller, assistant professor of anesthesiology, will serve as

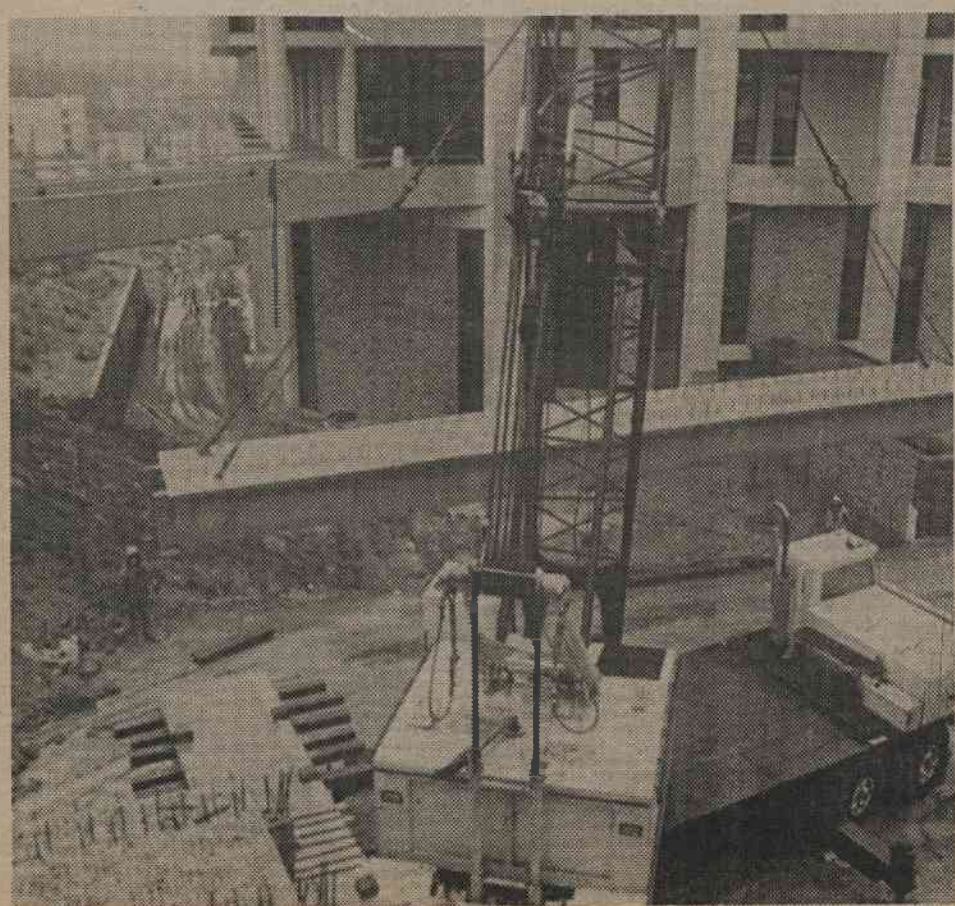
medical director for the studies.

Not for sports

The Swimmer Life Support System is expected to have important military and commercial uses, but is unlikely to catch on with sport divers any time soon, Bennett said.

Units now being tested cost about \$10,000 each to manufacture, he added.

The Office of Naval Research and the Naval Medical Research and Development Command awarded the contract.



BRIDGE BETWEEN TWO HOSPITALS—A crane and several workmen install a section of the bridge which will carry the personnel rapid transit (PRT) across the deep ravine between the Bell and Mudd Buildings as it runs between the present hospital and Duke Hospital North. Even though the PRT guideway has not been completed, its north-south path is now quite evident. Another chapter in the Duke Hospital North story will be presented in the second edition of "Looking North," which will be published with *Heartbeat* Feb. 22. (Photos by John Becton)