

SUID-AFRIKAANSE GENEESKUNDIGE EN TANDHEELKUNDIGE RAAD : SOUTH AFRICAN MEDICAL AND DENTAL COUNCIL

The 74th meeting of the South African Medical and Dental Council was held in the Council Chamber, Cape Town Chamber of Commerce, Barclay's Bank Building, Adderley Street, Cape Town, on 2-5 October 1961. The proceedings occupied 8 half-day sessions. The President (Prof. S. F. Oosthuizen) was in the chair, and 27 members were present, together with the Registrar (Mr. W. H. Barnard) and his staff.

PRESIDENT'S OPENING STATEMENT

The President confined his remarks, in the main, to a survey of his recent overseas visit.

Reciprocity

While in Britain, Professor Oosthuizen had discussions with the Presidents of the General Medical Council and the General Dental Council on the question of continued reciprocity between Great Britain and South Africa in view of the changed constitutional circumstances of this country. He was pleased to be able to report that both Councils supported the continuance of reciprocity, and negotiations to that end were successfully concluded. It was possible that South African practitioners would be placed on the foreign list in future instead of on the Commonwealth list; this would only be a change of form. The same privileges appertained to both lists. An Order-in-Council would have to be made by the Privy Council in this connection, and this would be done later, when other constitutional matters between the two countries came up for review and alteration.

Universities

Professor Oosthuizen mentioned that it was the practice in Britain to appoint only full-time professors in the medical faculties of the universities.

Registration in Britain

Information was given to Professor Oosthuizen that in January of this year more South African doctors registered with the General Medical Council than in the whole of 1960. It was stated that most of these doctors stayed only a short while in Britain.

REGISTRATION

The Registrar reported on registrations during the first six months of 1961 as follows (figures in brackets refer to the same period in 1960):

Medical practitioners 141 (156), medical practitioners restored 17 (11); interns 46 (38), interns restored 1 (0); dentists 4 (9), dentists restored 3 (2); medical specialists 52 (58); dental specialists 1 (1); medical students 359 (330), medical students re-registered 6 (6); dental students 45 (32), dental students re-registered 1 (2); medical auxiliaries 236 (68), medical auxiliaries restored 1 (0). The large increase in medical auxiliaries was mainly due to the registration of 147 optometrists.

At 30 June 1961 there were 8,034 medical practitioners and 1,294 dentists on the register.

Removal from register. At their own request 42 doctors and 21 dentists had their names erased from the register.

Limited registration. The Council approved the registration under Government Notice No. 256 of 1947, as amended, of three doctors to work at mission hospitals, and extended the registration of one doctor to practise at a mission hospital for a further period of five years. Three applications for registration under this section were not approved.

Specialist registration. At this meeting 22 applications for registration as specialists were approved, 26 were approved subject to compliance with specific requirements, and 18 applicants were informed that further information was necessary before their specialties could be registered.

Higher qualifications. The Fellowship of the Faculty of Pathologists, College of Physicians, Surgeons and Gynaecologists of South Africa, was recognized as a higher qualification for the registration of specialties. The M.D. degrees of Netherlands universities were accepted as higher qualifications only if obtained subsequent to having obtained the Arts Examen of that country. The qualifications of the following Specialty

Boards in the USA were recognized as higher qualifications for the registration of specialties: Anesthesiology, Dermatology, Internal Medicine, Ophthalmology, Otolaryngology, Psychiatry and Neurology, Pathology, and Thoracic Surgery. In the case of the following Boards, the qualifications were not recognized, but each case would be dealt with on its merits as applications for recognition thereof were received: Obstetrics and Gynaecology, Physical Medicine, Plastic Surgery, Neurosurgery, and Radiology (diagnostic and therapeutic).

Additional qualifications. The degree of Ph.D. (Med.) of the University of Stellenbosch was added to the list of additional qualifications, as was the Diploma of F.F.A.R.C.S. Irel.

Maldistribution of Doctors

This problem was discussed once again at this Council meeting. Prof. H. Grant-Whyte suggested that the Commission on the High Cost of Medical Services might consider an adequate State subsidy for general practitioners and specialists who were prepared to work in unattractive and outlandish areas. Dr. L. O. Vercueil said that there were too many specialists and that full-time posts in hospital were so attractive to doctors that very few went into private practice. Prof. H. W. Snyman pointed out that the small European population had to supply the bulk of the doctors for the whole country, owing to the great shortage of non-European doctors. He was pleased to see that there was an increase in the number of medical students.

TREASURER'S REPORT

The treasurer, in submitting his report, informed the Council that the amount by which expenditure had exceeded revenue in the period covered by his report was R19,000. He said that if this trend continued it might be necessary for the Council to appoint an *ad hoc* committee some time in the future to look into ways of decreasing expenditure or increasing revenue.

RECIPROCITY

Reciprocity with the United Kingdom. The Council noted a statement from the Registrar setting out details of the negotiations undertaken by Professor Oosthuizen on its behalf while in Britain. The main points in it were covered in the President's opening statement (see above).

Reciprocity with the Federation of Rhodesia and Nyasaland. The Southern Rhodesia Medical Council had informed the Council that the *status quo* regarding registration of South African degrees in Southern Rhodesia would be maintained after 31 May 1961 pending suitable legislation being introduced permitting continuation of registration of South African medical and other degrees. A similar position applied to Northern Rhodesia and Nyasaland.

ETHICAL RULES 19 AND 19 (BIS)

At an earlier meeting, the Council had decided to amend rules 19 and 19(bis), concerning the advertising of professional appointments, to read that an advertisement for such professional appointments should appear in **the South African Medical Journal** or in **the Journal of the Dental Association of South Africa**, among other amendments. These were sent to the Minister of Health for approval and promulgation, but the Minister did not see fit to promulgate the amendments.

After considerable discussion, the following amendment was accepted by the Council for submission to the Minister:

"An advertisement for a professional appointment for a medical practitioner could appear in one or more medical journals provided that one such journal is the official organ of the Medical Association of South Africa, and for a dentist in one or more dental journals provided that one such journal is the official organ of the Dental Association of South Africa."

DIFFERENTIATION IN SALARY SCALES IN RESPECT OF EUROPEAN AND NON-EUROPEAN MEDICAL PRACTITIONERS

Following receipt of a letter from the Medical Graduates' Association of the University of Natal, the Executive Com-

mittee of Council resolved that the Acting President of Council be requested to ascertain from the Minister of Health whether he was of opinion that the time was now opportune to receive a deputation from the Council in connection with this matter, as previously requested by Council. The action of the Executive Committee was confirmed by Council.

PROCEDURE FOR PERSONS APPLYING FOR RESTORATION TO THE REGISTER AFTER DISCIPLINARY ERASURE

Council accepted the following motion concerning the procedure to be followed in such cases:

'That on receiving an application from a person for restoration to the register after disciplinary erasure, it be an instruction to the Registrar to forward with the agenda for the next full meeting of Council all relevant information concerning such an application. Such applications are to be considered by Council at an early stage during that meeting.'

ADMINISTRATION OF ANAESTHETICS DURING ELECTROCONVULSANT THERAPY

Council decided that its policy in connection with assistance at operations should also apply in the case of psychiatrists administering anaesthetics for patients subjected to electroconvulsant therapy and other procedures. In essence this means that a medical practitioner, in addition to the psychiatrist, must be present to administer the anaesthetic, attend to the patient, and safeguard the patient against possible complications.

DISCIPLINARY MATTERS

Council confirmed the action and findings of various Disciplinary Committees in respect of three doctors and one dentist. In all cases the persons concerned were either cautioned or cautioned and reprimanded.

Council discussed the action and findings of the Disciplinary Committee which enquired into the conduct of Drs. J.L.H.

and W.A.M. It confirmed the findings and sentenced both doctors to be suspended from the register for a period of three months.

Dr. M.N.G. had his name restored to the register.

MISCELLANEOUS

Treatment in hospital by a general practitioner and a specialist. Following a request for a ruling on treatment in hospital of a patient by a general practitioner after the patient had been handed over to a specialist for treatment, Council ruled as follows: 'That when a practitioner places a patient in the hands of a second practitioner, the first practitioner is entitled to charge for visits made or services rendered only at the express wish of either the patient or the second practitioner, with the consent of the patient.'

1960 addendum to British Pharmacopoeia, 1958. Council agreed that the 1960 addendum to the British Pharmacopoeia should be recognized for the purpose of section 79 of the Medical, Dental and Pharmacy Act, 1928, from a date six months after the date of publication of the 1960 addendum.

Intern training. Council adopted a motion to the effect that the criteria pertaining to the training of interns be referred to the Medical and Dental Education Committee for review.

Requests for information. The following motion was carried in connection with requests by the Council for information: 'That in replying to requests for information from medical practitioners, the Executive Committee be requested to attempt as far as possible to answer the questions on general principles, while at the same time indicating specifically that it is not prejudging a particular case, rather than refusing information on the grounds of prejudging.'

Preclinical courses. The courses in botany, chemistry, physics and zoology at the various non-European University Colleges of the University of South Africa, were accepted as suitable under the relevant regulations for these courses.

Next meeting of Council. The next meeting of Council will be held in Cape Town, beginning on Monday 12 March 1962.