

CAR COMPETITION IN AID OF BENEVOLENT FUND

Through the initiative of Mrs. E. Gétaz, a member of the Medical Wives' Association of the Natal Coastal Branch of the Medical Association, an opportunity has arisen for a considerable sum of money to be collected for the Benevolent Fund of the Medical Association. A Triumph Herald Coupé motor car has been donated as a prize in a competition by the Standard Triumph S.A. (Pty.) Ltd. company, and the competition is being organized on a national basis by the advertising consultants Lindsay Smithers (Pty.) Ltd. All proceeds from the sale of tickets, without any deduction whatsoever, will go to the Benevolent Fund.

This is a great opportunity for the Benevolent Fund, always hard-pressed to meet the many urgent and often tragic demands on its resources, to obtain R20,000 or more. A minimum of 75,000 tickets, to be sold at 25c each, will be issued. It is hoped that all members of the Association will cooperate both in buying and selling these tickets. Already a good deal of interest in this project has been shown by many Branches. The Natal Coastal Branch, of course, where the idea originated, will sell many tickets, and the Southern Transvaal Branch has asked for 40,000 tickets for sale in Johannesburg and elsewhere in its area. The Cape Western Branch hopes to sell at least 20,000 tickets.

The competition, the details of which are set out in an advertisement on page xiii of this issue of the *Journal*, is a simple one; further details of the rules are on the entry forms sold with each ticket. It is hoped that the winner of the competition will be presented with the motor car at the 43rd Medical Congress in Cape Town in September. Tickets will be on sale during July and August.

Dr. E. W. Turton, Chairman of Federal Council, has acknowledged that this competition, while a novel idea in the fund-raising activities of the Benevolent Fund, will be an excellent means of increasing its revenue, and calls on members of the Association and their wives to do all they can to sell the maximum number of tickets possible.

It is the wives of members who can probably do the most towards making this project a great success. Ladies' committees have already been formed, or are in the process of formation, in all the large centres in the country, and all doctors' wives who have not yet been called upon to help are earnestly requested to come forward to try to sell as many tickets as possible.

Some members may have reservations about this method of raising money for the Benevolent Fund. We ask them to remember a few important facts which we feel will put the matter in its correct perspective. Let there be no mistake about it—the Benevolent Fund needs money and needs it urgently. We know only too well how many doctors are cut

off in their prime, before they have been able to make suitable provision for their dependants. We know, also, that too many of our colleagues die in circumstances amounting almost to poverty, after years of hard work, selflessly done, leaving their widows and children often in need of food, housing and essential care. A review of the claim forms received by the managing committee of the Benevolent Fund makes heart-breaking reading. It is sad that so many claims have to be denied, or a few rands a month given where far more is required. The old belief that 'all doctors die wealthy' has long been shown to be no more than a myth. There have, up to now, been but few avenues open to the Fund to obtain capital for its needs. They are, briefly, contributions *in memoriam* and for services rendered, bequests by doctors, and donations. During the last few years many Branches have held special functions, such as dances or cinema shows, at which fairly large sums have been collected for the Fund. These efforts, worthy though they are, have not been sufficient to meet all the demands on the Fund.

The present competition can go far towards helping the Fund to help dependants of members who urgently need financial support. Doctors, more than any other members of the professions, possibly, give the public unstintingly of their services. With good reason, Medicine has been called 'the noble profession', and the amount of unpaid, honorary arduous work done willingly by the bulk of our colleagues does not go unremembered by their patients. Many *in memoriam* contributions are received by the Fund from grateful patients who know what sacrifices individual doctors have made for them in their life-times. We are certain that the response from the public to the sale of these tickets will be overwhelming when they know that all money received will go to the Benevolent Fund. There must be many members of the public who would wish to do what they can to help in some small way the dependants of those doctors who have died, after a life-time of hard and altruistic work, in poor financial circumstances.

For these reasons we are sure that the public will respond wholeheartedly to the appeal behind this competition—to support a Fund which caters for the dependants of our less fortunate colleagues.

Every Branch and Division of the Association will be informed about this competition and will be supplied with posters giving details about it, which can be placed in consulting rooms, hospitals and nursing homes. We are sure that members and their wives will see to it that no ticket is left unsold, indeed that further tickets will need to be printed to meet the demand for this magnificent gesture on behalf of our Benevolent Fund.

WYER OMVANG VAN MEDIESE DIENSTE

In 'n besonder interessante boek onder die titel *Concepts of Medicine*,¹ wat onlangs verskyn het en waarin 'n hele aantal besonder belangwekkende artikels deur vooraanstaande

medici dwarsoor die wêreld voorkom, is daar 'n hoofstuk wat deur elke geneesheer gelees behoort te word. Hierdie hoofstuk word genoem *The greater medical profession*, en dit is 'n

uittreksel uit 'n referaat wat dr. T. F. Fox 'n tyd gelede by die jaarlikse vergadering van die Mediese Vereniging van Manchester gelewer het. Die referaat is in die *Lancet*² gepubliseer.

Die tema van dr. Fox se verhandeling kom daarop neer dat die mediese dienste wat aan die publiek gelewer word, gedurende die afgelope aantal jare radikaal verander het, óók wat betref die persone wat daarby betrokke is en die beroepe wat hulle beoefen. Tot nie so lank gelede nie was die geneesheer min of meer die alleenheerser op die gebied van die beoefening van die medisyn. Vandag is dit anders. Om bevredigende dienste te lewer, moet die geneesheer nou in die hospitaal saamwerk, en is hy afhanklik van die hulp van biochemici, fisici, aptekers, laboratorium-werkers, röntgenografiste, fisioterapeute, arbeidsterapeute en verpleegsters. En buite die hospitaal moet die geneesheer saamwerk en rekening hou met die dienste van die vervaardigers van medisynes, kraamverpleegsters, distriksverpleegsters, maatskaplike werkers (en veral psigiatryes-gekooolde maatskaplike werkers), sielkundiges, psigoterapeute, ens.

Sommige van hierdie groepe lewer dienste wat ons groepeer as goedgekeurde mediese hulpdienste. Almal van hulle maak egter 'n deel uit van wat dr. Fox noem 'lede van die groter mediese profesie'.

Omdat die mediese opleiding so veeleisend en moeisam is, en omdat die werk wat ons doen so uiters verantwoordelik is, is ons as medici nog altyd geneig om onself as 'n klas op ons eie te beskou. Daarmee is daar as sodanig niks verkeerd nie. Trouens, hierdie verhewe opvatting van ons doel en strewes en status dien as spoorslag om ons eie ideale en maatstawe van diens hoog te hou.

Waarmee daar egter wel iets verkeerd is, is die neiging wat soms by sommige van ons kollegas voorkom om die hulpdienste, waarna ons hierbo verwys het, as relatief minderwaardig te beskou. Dit is 'n opvatting wat met wortel en tak

uitgeroei moet word, reeds al aan die universiteit. Studente en geneeshere moet daartoe opgevoed word, deur voorbeeld en daad, om in te sien dat die geneesheer nie noodwendig 'n besondere begenadigde is wat, daáróm uit die hoogte op ander onmisbare lede van die span wat ons genoem het, kan neersien nie. Die geneesheer is weliswaar 'n leier, maar in die ware sin van die woord is hy 'n leier onder die gelykes. In hierdie gesindheid moet die lewering van mediese dienste dan ook beskou word. En met hierdie gesindheid moet ons ons kollegas wat die hulpdienste lewer, ook bejeën.

Ons wil die gedagte hier noem dat dit miskien goed sou wees om by geleentheid algemene kongresse te belê waarop geneeshere sowel as lede van die hulpdienste wat ons genoem het, verteenwoordig kan wees. Samesprekings op so 'n breë vlak sou veel kon doen om almal die relatiewe belang van elke lid van die span te laat insien. Veral sal dit goed wees om hierdie soort gesindheid aktief te propageer aan ons universiteite en opleidingskole.

Elkeen wat 'n insig het in die omstandighede van die samelewing waarin ons leef en in die menigvuldigheid van menslike probleme, sal besef hoe groot die omvang van die behoefte aan hulp en leiding aangaande gesondheidsake by die groot publiek is. Dit is ons plig om in al die vertakkinge van daardie behoefte te voorsien. Omdat daar egter nie genoeg van ons is nie, en omdat ons as geneeshere so dikwels byna uitsluitend besig is met ernstige liggaamlike siektes, is die hulp van al die lede van die terapeutiese span waarna ons verwys het, nodig. Laat ons dus in alle opregtheid en waardigheid meewerk aan die skepping en instandhouding van daardie groter mediese profesie waarsonder die gesondheid en geluk van die mensdom as 'n geheel nie nagestreef en bereik kan word nie.

1. Fox, T. F. in Brandon, L., red. (1961): *Concepts of Medicine*. Londen: Pergamon Press.
2. Fox, T. F. (1956): *Lancet*, 2, 779.