

For these reasons it could hardly be charged that the doctors are thinking only of self-interest if they disapprove state medicine. I cannot speak for all the members of my profession; but as a medical man knowing something of medical practice, I can truthfully say I am firmly convinced that state medicine—particularly under present conditions—is not the solution of our health problems. It just wouldn't work out.

There are certain things the state can do. There are certain things it has done in the past and could continue and extend in the future. There are other activities which could be properly assumed as a public responsibility. I am thinking of research and health insurance, for instance. But within certain limits it should be confined. The source from which medical practice flows, from which it derives its force, is individual effort, and the service is essentially one of personal relationship between doctor and patient.

I have admitted that community health service has failings, that it could be improved. One of my chief objections to state medicine would be that you cannot institutionalize personal relationships. Every doctor realizes it is of primary consideration, if a cure is to be effected, that the patient have full confidence in the doctor.

Under the state system, I am afraid, the tendency would be for too much of the work to become routine investigation, as doctors are only human. People would become human guinea-pigs, instead of patients who are paying for a service and have the right to demand it. The doctor, moreover, would depend for his livelihood no longer on his reputation for efficiency, ability and service, but on his ability to please his superiors, or perhaps the politicians. At the present time a doctor lives by his ability and is recompensed accordingly. Under a state system there is every reason to believe he might be able to subsist or become successful by his ability to "wangle." Nothing could be more disastrous to the medical men themselves, as well as to public health, than that the ability to play politics should determine their rate of promotion. Much as we dislike to admit it, that is the tendency in public service.

What disaster would we not be courting if we permitted our health service to be inoculated with the deadening drug of indifference? That is what we are risking if we take the service from personal initiative and rob proven ability of its just rewards.

There can be no question in the mind of anyone who knows human nature that a state system would kill a doctor's initiative. At the present time, if a government, federal, pro-

vincial or municipal, employs \$2,000 a year men, it obtains \$2,000 a year service.

I cannot see how any state system could make provision for the greatly varying abilities of doctors. It cannot be done on the basis of preparatory training, even as regards the initial salary; for of two men with identical training one may be a "washout" and the other a very capable doctor. Will it be possible to give the majority of work to the competent doctor under a state system? The energetic doctor, who would probably be the capable doctor, would probably do the majority of the work. But if he saw his fellow "washout" getting an equal salary, I fear for both morale and efficiency. Besides, I would wish to know pretty definitely "who" or what was to be the determining factor in a doctor's salary or rate of promotion before I would give any support to a state scheme.

Even for the competent physicians who were sincerely endeavouring to perform their duties, I am afraid cases would become routine assignments instead of a labour of love. The doctor would not have to stake his reputation on every case; he would have to perform only his "duty". He would be robbed of the incentive of doing his very best for the patients under his care. And may I stop to ask this question: Who is to assume responsibility for malpractice, let alone the unavoidable casualties? The responsibility for any person who dies while under state care, any case which does not prove satisfactory to the patient or relatives, would be laid at the door of the government.

Now governments have been blamed justly and unjustly for many things; but is any government prepared to assume responsibility for all the ills of mankind? That one fact alone is enough to make most hon. members vote against this resolution. Imagine a government being turned out of power because an influenza epidemic started during its regime; or one of the members of the house trembling for reelection because the Jones family's myriad members blame a government doctor because little Johnnie isn't getting well fast enough! At that, it might stimulate a campaign for eradication of disease. But until Canada became a disease-free area, I tremble for a parliamentarian's existence.

If hon. members are willing to assume all these responsibilities, to shoulder all the ills of mankind, I wonder if they would consider whether the sacrifice they are ready to make for the public would be really worth while.

I have pointed out that the service which could be expected from a personnel of state doctors would not be of as high a type as under individual competition, because initia-