

Britain's doctors attack government health policy

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The British Medical Association (BMA) meeting in Belfast this week delivered a series of scathing attacks on the health policy of the Labour government.

Their conference rejected a motion moved by Dr Jonathan Reggler, supporting government proposals to charge a £10 fee for doctors' visits. Many speakers angrily denounced the measure. Dr Colin Smith, Chairman of the BMA's Medical Academics Committee, said: "I don't believe you should punish a patient for being ill." Speaking of his time working in a fee-based health service, he went on, "I never again want to hear a patient say 'I can't afford to see you again—is there anything you can do without charging?'"

In an article for BBC Online, Reggler had argued that patients should pay because, "charges for seeing a GP [General Practitioner] or attending casualty would make people ask the question 'Do I really need to see a doctor?'"

Addressing this issue, Dr Jonathon Fieldon said: "The principle is wrong. It is the wrong time. It is the wrong message. Fees of any sort will have to be high enough to be realistic—a hurdle to frighten away patients. I want to prevent fear being used against our patients."

Dr John Chisholm, chairman of the BMA's GP Committee, welcomed the rejection of the motion. "It would be a tax on the sick, rather than society contributing to the costs of the NHS [National Health Service] based on people's ability to pay".

The rejection of fees for visits was only part of a broad ranging critique of government health policy. Dr Ian Bogle, chairman of the BMA, said the future of the health service had been placed under threat. He warned that the government's reforms, which have established different systems in England, Scotland, Wales and Northern Ireland, threatened a dangerous fragmentation of the health service. Bogle also criticised initiatives

such as walk-in centres and the telephone helpline *NHS Direct* for posing a serious threat to the role of the GP.

Confronted with a "frightening" pace of change, doctors were "apprehensive and fearful for their future", Bogle said. "It seems a government that puts public image ahead of policy initiatives that are properly planned and evaluated has failed to appreciate the consequences of its actions. The mismatch between patient demand and available resources is calling into question the ability of the NHS to provide comprehensive healthcare. Walk-in clinics may pander to public demand for 24-hour access to the NHS. But will they relieve pressure on an understaffed and under-resourced service?"

Describing a government obsessed with waiting list targets that distorted clinical priorities to the detriment of patients, he added: "As a result, hospital doctors are working at greater intensity than ever before as they struggle to cope with rising emergency admission and lengthening queues for outpatient clinics... They are being pressurised into working at ever-increasing intensity, often in order to meet imposed and irrelevant targets.

"I've been a GP for 37 years. I still think it is the best job in the world, but if I were starting my career now I would be thinking twice before signing up for the abuse, exploitation and oppressive bureaucracy that seem to have become part of a doctor's job description."

The conference also heard a debate calling for the government to admit to rationing expensive drugs such as the multiple sclerosis treatment beta interferon, and the anti-impotence pill Viagra. While the government has denied that patients are being denied certain drugs on financial grounds, doctors said that the rationing of health treatment was continuing to hurt patients.

Julian Neal, a member of the BMA's GP committee

said: "Every day I practice substandard medicine. I'm sick to death of working in a health care system where I let my patients down day after day after day".

Speaking of the rationing of Viagra, Derek Machin, a consultant urologist and deputy chairman of the BMA's central consultants and specialists committee, said: "We should not discriminate against patients on the grounds of their condition."

Dr Andrew Green saw the rationing of Viagra as the thin end of a wedge asking: "What next? HRT for hot flushes caused by surgery but not by the menopause?"

After initial support for the general direction of the Labour government, the conference heard that morale among doctors was the lowest it had been since 1992—when they realised they could not prevent the introduction of the NHS internal market by the then Conservative government.

Speaking bluntly of his disappointment with Labour, Dr Brian Potter, secretary of the Scottish BMA said, "We have had far too much spin, and not enough doctoring. These policy people in Millbank are kids—you would not put these people in charge of your own car, let alone anything else."

Blair only increased the feelings of bitterness among health workers towards New Labour when he described people in the public sector as being an obstacle to change. This was followed by an announcement on July 7 that six new hospitals would be built with private finance. The BMA oppose the Private Finance Initiative (PFI). They say it is costing much more than traditional funding of capital developments and suggest that the extra cost is likely to be covered by an increase in private beds in NHS hospitals.

An article in the *British Medical Journal* to be published on Friday says PFI is based on "spurious economic arguments" and "disguises the higher cost of private sector provision". Clearly ruffled by a week-long conference dominated by attacks upon Labour's health policies, Blair lashed out at the BMA in a speech at the site of one of the proposed new hospitals. Suggesting that BMA leaders were out of step with the vast majority of doctors Blair claimed that "the vast majority of doctors across the country are working with us to improve the health service".

Responding to this, BMA chairman Ian Bogle suggested his warning to Blair that he had "alienated the entire profession" had hit home. "Maybe the truth

hurt a bit and they are trying to devalue the message" he said.



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