

## Letters To The Editor

January, 30, 1962

Dear Sir;

I have recently read the following statement in Dr. Atlee's "Gist": "Whereas only about 2% of babies born to women who have had no analgesic or general anesthetic fail to cry immediately and lustily at birth, anywhere from 35 per cent to 67 per cent (according to some authorities) of the doped, make a sluggish response". I have found, after a modicum of research, that the "some authorities" published their findings in 1938.<sup>1</sup> It would take far more space than you could allot to list the work done in this area in the 20 years since then. This fact alone, notwithstanding other references to anesthetics made in the book, leads one to suspect that the philosophy of "natural childbirth" as advocated here at Dalhousie, has as its basis, opinionated views rather than documented fact.

If Dr. Atlee would lead the reader to believe that there has been no advances in obstetrics in 20 years, this is within his realm, but it seems unjust that he imply that such is the case in the field of anesthesiology.

Perhaps the Journal might undertake to commission a paper dealing with more modern concepts of anesthesiology in childbirth so that the student might at least be aware that further study on this subject is indicated.

<sup>1</sup> Schreiber: Apnea of the Newborn and Cerebral Injury, J.A.M.A., October, 1938

Respectfully,  
"A Doped Baby"

January 30, 1962.

Dear Sir;

Please accept my compliments on your new cover, despite the controversial pair of entwined serpents. The appearance of the Journal has been greatly improved.

I should also like to compliment the writers of *all* the articles, and particularly Mr. Boodoosingh, whose original humor was extremely refreshing. Let's have more of it, please.

Your editorial suggests that there is a shortage of general practitioners devoted to the care of clinic patients, and that fourth year students should be used to alleviate this shortage. The design, administration, and responsibility for such a program are not discussed. However, if one spends some time trying to design a useful, workable program he rapidly discovers the huge problems involved. Such considerations are: How is the student assigned a patient? What are his responsibilities and obligations? Where does he stand legally? What sort of liaison system is needed between student and mentor? Does the student care for the patient in the hospital or at home, and if the latter, how are transportation problems met? Furthermore, is the service to the patient plus the learning experience to the student valuable enough to warrant establishing such a complex program? I think not.

May I suggest a more simply administered program which could be fruitful to the public and the student? I have in mind a school and institutional health program. The function of the fourth year student would be to do routine physical examinations, find, report, and refer specific complaints to the child's G.P. or to the Public Health authorities, and to follow up cases to the home environment if such is appropriate.

The same previously suggested battery of questions comes to mind, but in this instance the solutions are far more obvious and simply implemented.

This service would be jointly administered by Dept. of Health authorities and the Medical School. The joint group would determine the appropriate institutions (schools, special school for the handicapped, etc.) and the case load and distribution of students. The reporting and liaison could be handled by already existing routines and channels.

The value of the program to the public is self evident—early detection and early treatment. The student has the value of seeing early cases (rather than obvious, full blown conditions) which he will be meeting in practice, plus the chance of learning what a normal population is like, and finally, he has the opportunity to occasionally investigate home environments and their relation to the disease process.

Respectfully,  
(Name withheld).

We are pleased to receive reader response and look forward to comments on the editorials, letters, literary material or format of the Journal.

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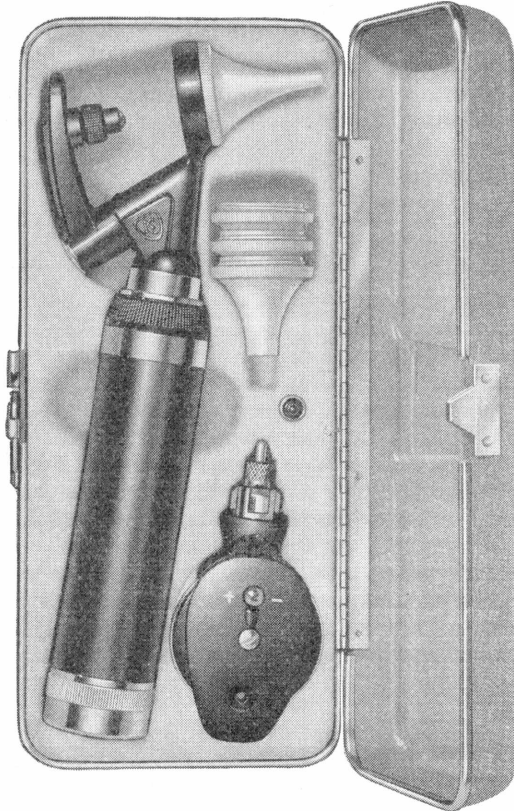
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