

Why should we care? The perils of for-profit medicine

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Is there anything displeasing in the image of your doctor as capitalist? Advocates of for-profit hospitals and clinics are claiming that universal publicly financed health care insurance ["Medicare"] can happily co-exist with American-style corporate health care provision.

The issue is a timely one. The Governments of Alberta and Ontario are pressing hard to introduce or expand the role of for-profit hospitals. Meanwhile, other provinces and the Federal Government are fighting to preserve a system in which hospitals and clinics remain not-for-profit.

The highest ideal of the medical professions, since the time of Hippocrates, has been to heal the sick. Despite this core commitment, the health care debate in contemporary America has come to be dominated by the market metaphor. Physicians and patients are now referred to, respectively, as health care "providers" and "consumers". The language and values of business are subtly infiltrating the culture of medicine.

One danger of applying the market metaphor to medicine is that it obscures the more fundamental truth that physicians are pledged to behave as *professionals*, altruistically committed to their patients' well being. As the wealthy American businessman, George Soros, has commented: "Medicine is too important to be left to the mercy of marketplace values".

In the commercial marketplace, individuals are assumed to be responsible for protecting their own best interests. If you're buying an automobile and you don't want to be "suckered", then consult *Consumer's Report* or some other independent source of reliable information. By contrast, when you consult a cardiac surgeon about a heart murmur, you would be shocked to discover that the surgeon (or private hospital) was viewing this encounter primarily from the point of view of profit maximization.

Patients seldom enjoy equal power with their doctor. Few patients possess the specialized knowledge necessary to make informed choices about risky health care options. Moreover, sick patients often experience anxiety and fear, discomfort and pain; painkillers may intellectually dull them. None of these factors is conducive to the educated "comparison shopping" which figures prominently in the marketplace model of the "sovereign consumer". *Caveat emptor*, let the buyer beware, scarcely seems the appropriate ethos for a health care system.

Good health is not simply one among many components of the Good Life. Health is important for virtually every other life project we may have. Healthcare is such an

intimate part of our lives that it should not be regarded as a mere commodity. When we are sick and vulnerable, we need to be able to count upon health care professionals and health care institutions to serve unequivocally as our impartial advisors and advocates.

It is, therefore, no accident that health care has evolved as the domain of “caring professions”. We absolutely need our physicians and nurses to be trustworthy, to be professionals on whom we can rely to place our interests first. Hence, the highest principle of the physicians’ code of ethics pledges: “The life and health of my patient will be my first consideration.”

Under the guise of such buzzwords as “choice” and “diversity”, advocates of for-profit hospitals seek to bring to Canada the medical-industrial complex that flourishes in America. Several esteemed American physicians, however, are warning us against the moral dangers of such importation. The gist of their warning: When hospitals and clinics become competitive businesses, they increasingly see themselves as “beleaguered businesses”. Patients are viewed as “consumers”, to whom they advertise and sell as many of the most expensive services as the market will bear.

In sum, when our hospitals, clinics and nursing homes become profit-making enterprises, the doctors and nurses who work in those institutions will also tend to become more entrepreneurial, with one eye on their patients’ health, and the other eye on the balance sheet. The corporatization of health care would open many wonderful new opportunities for profit-generation by the business community, but the human price to be paid by the larger community may well include destruction of the doctor-patient relationship. Since trust between patient and doctor is the very soul of medicine, this is not a bargain that most Canadians are willing to make. It’s not a bargain most Canadians should be willing to make. The Canadian public has, instead, a significant interest in *expanding* the values of beneficence and justice in our health care system so as to give them fuller expression.

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