



History's lessons

Michael Seear

SCENE: Hippocrates and Asclepius are together in an idle moment on Mount Olympus.

HIPP: I do wish you'd stop calling me Hippy. It tends to wear a bit after 25 centuries.

ASC: Don't be so touchy. I know you call me Clap behind my back.

HIPP: Hardly surprising, considering those dens of iniquity you used to run. Hospitals for spiritual handicaps indeed! The only reason we introduced an oath of good behaviour for our students was to counteract the bad habits they picked up working part time as dream interpreters over at your place.

ASC: A bit of smoke and mirrors perhaps, but hygiene was a good earner, and it certainly did no harm. I even named my daughter after it.

HIPP: Ah, Hygieia. I remember she had a rather good act with that snake wrapped around a stick, a stage prop she pinched from a local theatre.

ASC: Medicine is, after all, a branch of show business. Whether you want to cut HIV transmission, stop neonatal tetanus or get girls into school, it's largely a matter of changing behaviour on a large scale. Modern doctors just don't have the training.

HIPP: You're exaggerating. Science has done a lot for the health of poor people. Take immunizations, for example. As soon as that young fellow Jenner spread the word about smallpox vaccinations, the Spanish government made it compulsory throughout its colonies, and the disease was finally removed entirely.

ASC: Could you sing a new tune? I admit you're almost there with polio and leprosy, but there's still plenty of measles, hepatitis, yellow fever and tetanus. And what about that Egyptian architect who used to dabble in medi-

cine? Imhotep? He was always mixing up some potion or other trying to keep the workers free from TB and malaria. Since then, your precious science has had 4500 years to deal with those problems, and it's not looking so good.

HIPP: Well, widespread DDT spraying had malaria on the run 50 years ago. We just didn't follow up on the advantage when we had it. Mass penicillin programs just about stamped out yaws from the whole of Africa. Tsetse fly control did much the same for sleeping sickness.

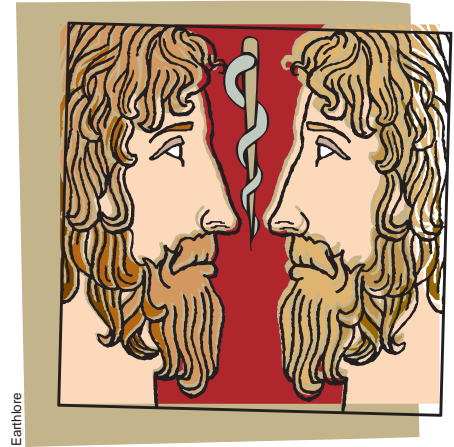
ASC: Sleeping sickness is back with a vengeance, and they gave up talking about malaria eradication 20 years ago. Planners just aim a bit lower each year. You think that if technology doesn't have the answer, there can't possibly be an answer.

HIPP: You may have a point there, but all your "touchy-feely" initiatives haven't reduced maternal mortality. Just look at the numbers dying each year in labour. The only solution is widespread access to modern medicine.

ASC: I agree that clean water, peace and education won't solve everything, but if these basics aren't in place, then technology will achieve nothing. If you cram humans together without basic rules of hygiene, they start to die in about 2 weeks. During the siege of Harfleur, 200 British soldiers died in combat, but 10 times that died of uncontrollable dysentery.

HIPP: We offered the military many scientific advances, they just wouldn't listen! Antisepsis, for example, was used in the Franco-Prussian war of 1870, but the British army didn't adopt it until decades later. You just can't help some people.

ASC: Still, you must tip your hat to Florence Nightingale. Yes, I know you find her a bit bossy, but she deserves her place up here.



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HIPP: I'm well aware that disillusionment with medical solutions led to the Alma Ata meeting 25 years ago. You should be pleased — your side won. Primary health care carried the day, but it doesn't look to me as if public health, when acting alone, is any better than technology when it comes to changing complex, socially based medical problems. We're still left with the same question: What can be done to improve the lives of the world's poor?

ASC: Don't be so pessimistic. There are positive changes; they're not fast, but they are coming. Things began to change with the fight against HIV. We started to see epidemiologists, doctors, public health workers and even patients going to the same meetings. It hasn't spilled over into medical schools yet, but give them time. People are starting to talk about health in the same breath as peace, education and good governance these days.

HIPP: I suppose you're right, but they should make public health and epidemiology central parts of the medical curriculum, right, Clap?

ASC: Oh, stop calling me Clap! ...

Michael Seear is a pediatrician in Vancouver, BC.