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## **As I See It: The ethical choice on health care**

Bruce Thomson, M.D. for the Corvallis *Gazette-Times*  
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The notion of health care as an essential public service of society is increasingly becoming a part of our everyday awareness. This includes some of the more conservative groups among us.

The *National Catholic Reporter* recently highlighted an editorial, "Take the Lead on Health Care as a Right." The January 2017 edition of the *Journal of the American Medical Association*, a group not known particularly for its "liberalism," includes an editorial entitled "Health Care in the United States: A Right or a Privilege." The author concludes with the hope that "all physicians, including those who are members of Congress, other health care professionals, and professional societies would speak with a single voice and say that health care is a basic right for every person and not a privilege to be available and affordable only for a majority."

As we learn of numerous other countries that have evolved to embody health care as an essential human service, we enlighten ourselves of our own failings. By many measures our country lags at least 10 other countries in a number of health outcomes. Patient satisfaction in these countries is greater than among patients in our health systems. Health care costs in our system are three to four times that of these other countries. What has prevented our health care from evolving in a measurably better direction?

For one thing there is institutional inertia: just doing more of the same, tweaking this or that, plodding along step by step trying to make things better. Some of it is business as usual, influenced by the financial enormity of the medical insurance and pharmaceutical industries and the economic opportunity which they have come to represent.

For health care professionals providing care in this type of economic environment, complex and costly infrastructure becomes necessary to manage the policies of health insurers regarding in-network rules, co-pays, deductibles and pre-authorizations, thereby adding to health care costs.

Unfortunately, for many health professionals there may be contractual "discouragements" to public disclosure of their inner sense of ethical dilemmas regarding our present health care system. These physicians and other health professionals may feel restricted in their freedom to speak with a single voice.

As a society we enjoy the benefits of numerous publicly funded services and programs including education, public transportation, fire and police services, state and national park systems, a military to protect our national security. For many Americans the notion that health care is an essential aspect of human dignity and that access to health care is a public good is as fundamental as police and fire security.

However, presently for our health security, we are left to subscribe to increasingly unaffordable premiums and medicines. Each year, more and more Americans die prematurely because they can no longer afford health insurance premiums and medications.

Now is the time for each of us to check our moral compass and decide for ourselves, personally, if health care is a commodity available only to those who can afford to pay. Without empowering

an ethical value that holds health care to be fundamental to our own human dignity, we will continue to pay for escalating health care costs, at least until we too can no longer afford those costs.

Before studying medicine at Oregon Health Sciences University, Bruce Thomson was a researcher at Oregon State University from 1972-1986 where he studied the effects of Ultraviolet B radiation on a variety of marine micro-organisms. He worked at Corvallis Family Medicine and in 2001 he was recognized as the Oregon Family Physician of the Year. He served as Benton County Health Officer from 1999 until retiring in 2013.