

THE VIEWPOINT OF THE PHYSICIAN IN INDUSTRY

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ALTHOUGH it would be rather presumptuous of me to attempt to discuss fully the role of the physician in industry, I have had, for the past 30 years, an opportunity to observe the changes that have taken place in industrial medicine, both within industry and outside it. While there is a great deal of variation in the attitude and the practice of industrial medicine, depending on geographic area, size of the company, type of industry and labor conditions within certain industries, nevertheless there is one general trend which can be observed and evaluated.

The trend to which I refer is the development of more services, not only medical but auxiliary also, for the benefit of the worker. It is true that large industries had long ago instituted many of the services which are today considered to be parts of a total industrial medical program. However, it has been only in recent years in this country, stimulated largely by labor pressure and labor leadership, that we have seen an enlargement of what we consider to be ideal industrial medical service.

Industrial medicine faces the same dilemma that confronts most of us in the problems of living in a world of rapid social change. Can it fulfil the promise held out by the scientific achievements of the past 50 years? Leaders in the field of industrial medicine as well as in management, labor and government will no longer be satisfied with the one-dimensional concept of industrial medical services common to the industrial medical scene of a half century ago. Today all groups recognize the need for providing a full program of medical services, including accident and disease prevention, health maintenance, complete medical care and rehabilitation.

While there is agreement as to the scope of the medical service to be included in a modern program of industrial medicine, there has been, nevertheless, no agreement as to the best means of achieving such a result. Who shall assume responsibility—government, management or labor? It is not enough to admonish the physician that he is to assume the roles of physician, spiritual leader, educator and arbitrator. These responsibilities, however desirable, can never be realized so long as the physician is beholden to any one group, be it government, management or labor.

It is interesting, therefore, to observe the changing status of the industrial physician and the methods employed around the world to obtain a full program of industrial medical services. I should like to describe three different methods of delegating responsibility for industrial medical services—(1) by a totalitarian government, as in Russia; (2) by a strong labor union, the United Mine Workers in America, and (3) by labor-management committees, as in Sweden.

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