

EDITORIAL

PRESIDENTIAL ADDRESS *

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ONE year ago, at the annual meeting banquet in St. Louis, I accepted an invitation to appear on the program as president-elect and prepared a formal speech. I made reference to a few plans and ideas of my own which I proposed to put into operation during 1949. As I look back to that occasion I realize what a political neophyte I was, compared with my present successor, Dr. Whitacre. I failed to realize that I had already been duly elected and was not compelled to put myself on the spot by making campaign promises of big dimensions. I did muster up the courage, however, before I prepared this statement, to dig up the former manuscript and see how far short I had fallen. I took particular account to compare some of the ambitions I had expressed with my present views, gained after a year of numerous and varied experiences. I was impressed and encouraged to find how closely we had kept to the general plan of outlined activities and how many of our ambitions had either been realized or were in the process of being accomplished to some degree. I felt particularly good that we had honestly advanced the long range society activities and objectives which we have been developing for many years. I had a decided feeling of satisfaction that we had met with success in some of the experiments launched during the year. I was mildly disappointed here and there at our failure to solve some of our old stubborn problems. I realized how true my statement was, that the success we attained in various directions depended almost entirely on how well certain committees functioned.

Our greatest effort as a society and our greatest accomplishment by all odds has been educational—providing facilities for the training of the part-time anesthesiologist. The Committee on Medical Schools and Post Graduate Education has done a magnificent piece of work planning and perfecting this effort. No bigger undertaking was ever instituted in this society and within the period of this one year the plan and the results are astounding. The project was indeed timely and the results are far reaching in the fields of education, professional relations, public relations and economics. As a society we shall feel the results of this program for many years to come. It could easily be

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the most productive effort, from every standpoint, we have ever initiated. The plan has received wide publicity and acclaim from the Rural Health Committee of the AMA and from the American Academy of General Practice. The institution of a daily series of one-hour lecture courses, by qualified instructors, at the 1950 annual ASA meeting, will provide valuable and much needed instruction to our membership. All these educational efforts are far reaching and long range programs which are getting under way and must be continued and encouraged.

The officers of the past year decided not to attempt a publicity program for consumption by the lay public but asked the section on Public Policy and Relations to direct their efforts in improving intramedical professional relationships through several media. Short releases of scientific interest were prepared and distributed to state medical societies as material for newspaper articles and radio broadcasts. The preparation of two admatic projectors, depicting the role of anesthesiology, for use by both medical and lay gatherings was another phase of public policy and relations. All these and many other controlled projects should be developed and continued as a permanent program.

A very important questionnaire was circulated by the Economics Committee, the results are all tabulated and analyzed and will be furnished to the membership presently. This big job, well done, will give us much needed and heretofore semi-secret data concerning fee schedules. Friendly liaison with Blue Shield and Medical Care Plans are currently creating a wholesome atmosphere of cooperation.

Active work by the Library Committee has accomplished the job of cataloging and bringing up to date all files, new books, essays, journals and rare books. The binding of all journals has also been finished.

The Committee on History has made notable progress in securing early history of anesthesiology from various regional areas of the United States, from manufacturers of early anesthesia equipment and from drug houses.

The Committee on Membership has devised plans which are in operation to materially enlarge our membership. This effort shows steady results through efforts of the component society surveys, state membership committees and the executive secretary.

These are a few of the highlight activities which account for a good share of the time devoted by the Executive Secretary, your officers and committee members in society affairs. Time will not permit more than mere mention of numerous other society projects, all enlarged and improved from year to year. The News Letter, revamped and with a new face, represents much time and effort for those who compile it. Instruction, advice and help to the component state societies accounts for many hours of work from the executive offices. The work of program committees, motion picture reviews and clinical records means

hours of work for those involved. Six Regional Conferences of society officers and Committee Chairmen of state societies were held in San Francisco, Kansas City, Washington, D. C., Chicago, Boston and New York throughout the year. New plans were discussed, ideas were exchanged, problems were aired, new suggestions were presented and a mutual understanding was affected. This represented considerable time and expense for individuals who took part. The American College of Anesthesiologists is moving at an accelerated speed to accomplish one of our foremost and important society objectives, high standards and certification of specialization. The Journal of Anesthesiology, admirably fulfills our publication objective. A new society directory, paid for by advertising, represents long and tedious hours of work.

As I arrive at the end of my term of office I should like to record a few impressions which have been formed over the last thirteen months. In general I might say that I feel our society is in excellent condition from organizational and financial standpoints. Our executive secretary and his headquarters staff have developed into a very efficient machine. We have a sizable financial reserve which is well guarded by our treasurer. Our membership is growing steadily and will continue to show steady increase from our efforts. Most of the states have organized component societies and are accomplishing results previously directed from the executive offices. Most members who have been asked to accept responsible assignments this past year have done so willingly, enthusiastically and unreservedly. There is a vast reserve of personal talent in the society that could not be called upon specifically for help but have offered many valuable ideas for future use. The potentialities within the membership indicate a most wholesome outlook for things to come.

I feel very keenly that the present policy, both public and professional, should be enlarged, perfected and perpetuated. Education within our ranks and for the part-time anesthesiologist is most important. Dignified public relations with other professional societies and groups is the only safe long range policy. Propaganda, especially of a controversial and antagonistic nature, has no place in good public relations, either lay or professional. It behooves us as a society and as individuals to keep up and extend our good liaison relations with medical care plans and other medical groups. We need more scientific and general articles in state and county medical bulletins. We must appear on more county, state and regional medical society programs.

There is much to be done in the field of economics, a field which has been sadly neglected. This year's committee has broken the surface and I hope the revelations from the survey will be so enlightening we will be encouraged to go all the way. Surely there is a need for wide spread education within our ranks on the economic aspects of the practice of anesthesiology. Many of our serious problems would dis-

appear if we were educated in prudent economic thinking. Our residents must be taught some of the basic principles of the practice. More of them must be encouraged to enter practice and avoid becoming entangled with institutions who exploit them. We need more trained men in medium sized towns and less concentration in the large centers. Those of us who can make friendly contacts with Blue Cross Boards must carry on a relentless campaign to remove anesthesia benefits to Blue Shield Plans. This will be a slow process but will come with time and perseverance.

I should like to endorse the recommendations made by the standing committees, in their annual reports to the recently convened House of Delegates of this society. Every delegate should not neglect to inform his constituency of all actions and plans presented at this annual meeting. I am especially hopeful that the long range programs in the various categories can be intensified and can proceed uninterruptedly. Some of them are most worthy and far reaching. I know next year and succeeding years will see old problems solved and useful activities accomplished. May we never be satisfied with the scope of our usefulness and proceed to "stand still." As a part of organized medicine we must stand together to win back favor of the masses of people who have become indifferent to the threat of socialized medicine.

In conclusion may I take this opportunity to thank each and every individual who helped me and your society this past year. I should also like to publicly express appreciation on behalf of the society to the E. R. Squibb Company for their \$1000.00 donation toward the maintenance of our New York office. I can assure you it has been a genuine pleasure to serve this society as its president. May I just say "thank you" in appreciation of the honor you have seen fit to bestow upon me. My very best wishes are with my successor, Dr. Rolland J. Whitacre.