FEES AND ENCROACHMENT ON PRIVATE PRACTICE

To the Editors of THE BRITISH JOURNAL OF OPHTHALMOLOGY.

DEAR SIRS,—I write to congratulate those responsible for the Annotation—Fees—in your Journal of July, which gives timely support to the long-established custom of doctors engaged in private practice being free to name their own fees and modify them to meet their patients' circumstances. As there can be little doubt that the pre-eminence of British medicine is largely due to the freedom this custom gives to patient and doctor alike, I wish to draw attention to facts and figures which apparently have not been seen by the writer of the Annotation, who does not appear to have appreciated how the scope for private practice has been greatly curtailed.

Unfortunately, many of us are to blame for the present state of affairs, by the maintenance of an eighteenth-century taboo which has resulted in little consideration being given to the fact that there has been little, if any, decrease in the calls for gratuitous service, in spite of the increase in social services. In 1913, these cost the country £63,000,000; in 1939 £531,000,000 and are now in the region of £1,400,000,000.

Nor was this the only encroachment on private practice, for in July, 1912, National Health Insurance came into operation and, owing to the conservative policy of the Government, medical benefits were restricted in favour of capital reserves which reached £150,000,000 in 1940. They must be much greater now owing to the low incidence of sickness during the war and the fact that 2,000,000 previously unoccupied people have been brought into industry. State funds are liable to be, and indeed have been, appropriated for purposes other than that for which they are collected, and the profession's high ethical code makes it particularly vulnerable to such a policy, for politicians are very sensitive to the claims of a majority, which is never likely to be obtained by the sick. A further blow to private practice was suffered from the extension of National Health Insurance to include those with incomes up to £420 per annum, and it must be remembered that there is no income limit for manual workers.

The most recent encroachment on private practice is the extended powers given to education authorities under the Education Act of 1944, which imposes on them the duty of making arrangements to secure the provision of *free* medical attention for pupils from the ages of 2 to 15 years, in any school or county college maintained by such authorities. The successful opposition of most of them to the B.M.A.'s recommendation of a 20 per cent. increase in the fees of part-time doctors in their employ, as a war-time measure, is significant, for "sparing justice feeds iniquity."

Fortunately, the public has been as slow to appreciate the

changing circumstances as those to whom we have entrusted our material interests and, therefore, the full consequences have not yet been seriously felt, chiefly owing to the war-time increase in earnings from £1,734,000,000 in 1938 to £2,930,000,000, that is, approximately 70 per cent. The following figures show that the lower income groups have benefited most, and therefore, there is no justification for the doctor-patient-fee relationship to be discarded, at a time when the public has been able to save £9,000,000,000, of which £3,500,000,000 were "small savings," in spite of more being spent on beer, tobacco, clothing and entertainment.

Range of Income after Tax Deduction		Increase or Decrease		
£		1938-39	1942-43	
150- 250		4,500,000	7,000,000	+2,500,000
250- 500		1,820,000	5,300,000	+3,480,000
Total		6,320,000	12,300,000	+5,980,000
500-1,000		450,000	550,000	+100,000
1,000-2,000		155,000	117,000	- 38,000
2,000-4,000		56,000	31,750	-24,250
4,000-6,000		12,000	1,170	-10,830
6,000 or over		7,000	80	-6,920
Total		680,000	700,000	+20,000

In view of these facts, one is left wondering what is the real aim of those who seem intent on undermining the spirit of independence which was such an estimable characteristic of the British people until a multiplicity of grandiose schemes were announced as being "free for all."

Yours faithfully,

H. RICHARD BICKERTON.

LIVERPOOL,
July 20, 1945.

HETEROPHORIA AND NEUROSIS IN FLYING PERSONNEL

To the Editors of THE BRITISH JOURNAL OF OPHTHALMOLOGY.

DEAR SIRS,—We have read with interest the above article which appeared in the *Brit. Jl. Ophthal.* of March, 1945, but feel that the