Current Problems of the Profession

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One of the reasons I'm pleased to be here and to be invited to other constituent and allied groups is to establish better communications between you the practitioners and the AVMA which is *your* national organization. It's been said that the AVMA sits in its ivory tower in Schaumburg and doesn't care about the practicing veterinarians and their problems. I'd like to squelch that idea—the AVMA *does care*, and we can help the profession *only* if we get around and talk to you about *our* mutual difficulties.

Since time is extremely short, let me touch on a few items that may be of interest to you.

- 1. Malpractice insurance premiums can be expected to go up about 25% next year according to the AVMA Professional Liability Insurance Trust, but you can still purchase \$1,000,000 liability protection for less than \$80. It is the cheapest insurance of any professional group. The coverage language has been changed to insure members sued for "personal injury"-liability, slander, defamation of character-if such should arise in connection with professional activities. Malpractice is not inevitable but claims can be held to a minimum by: rendering good care, diligence to the best practice principles, and by maintaining clear and complete records and understanding on a case-to-case basis.
- 2. Drugs and the FDA. The AVMA Council on Veterinary Services expressed alarm over the withdrawal of drugs from the limited drugs accessible to practicing veterinarians. The AVMA's policy

relative to drugs, "In today's world we need a good and expanding range of economical drugs and biologics—not less—if we are to be able to practice the sophisticated veterinary medicine that the public deserves and expects us to deliver in this age of advanced technology." Also, the AVMA Council feels that for the FDA to apply the same criteria of safety and efficacy to drugs for veterinary use as required for drugs for human use is unrealistic. The AVMA now plans to disseminate drug information from FDA regularly through the Journal.

3. Policy on Brucellosis. The Council on Public Health and Regulatory Medicine issued in essence the following policy statement to the USDA and states with known brucellosis problems. Official calfhood vaccination with the traditional test and slaughter method should be continued until the goal of complete eradication is reached. In certain problems of high infection rates associated with range cattle, highly concentrated numbers of dairy animals, other approaches must be considered and implemented when the traditional methods have shown insufficient progress.

4. Washington Office Director. Beginning January 1, 1977, the AVMA will have a new Washington office director-Dr. Max Decker, formerly director of the Division of Scientific Activities for the AVMA. In addition, we will hire a legislative analyst, probably a young attorney, to assist in formulating and proposing legislation for the profession, rather than waiting

to react to legislation proposed by politicians and Capitol Hill pressure groups. I believe this is the biggest and best step our profession has taken in several decades.

5. The last item is the major legal entanglements-principally actions with the Justice Departments and the Federal Trade Commission. Their inquiries and suits cover price fixing, ban on advertising, limiting competition, and other encroachments charged against veterinary medicine. Attorneys of the FTC and Justice Departments are looking at veterinary medicine, medicine, dentistry, morticians, pharmacists, opticians and a whole gamut of other of the so-called "learned" professions.

Their interests include, at least for veterinary medicine, these areas:

1. Organizational structure of the profession.

2. Admission policies for students applying to veterinary schools.

3. Licensing of veterinarians.

4. Foreign graduates.

5. Provisions of the AVMA Model Practice Act.

6. Accreditation of veterinary colleges.

7. Training of animal technicians.

8. Manpower shortages of the profession.

9. Price fixing and sliding scale values.

10. Ban on price and other informational advertising.

11. Reciprocity of licensing-state to state.

12. Anything else that would limit competition

within the profession.

Mr. Bruce M. Chadwick, deputy assistant director of the FTC, in a speech to the Health Regulatory Boards in Chicago on September 18, said, "Most of the regulatory efforts that worry me (the FTC) are created and enforced by honest, upright and well-intentioned people just like you-but you are still human. And, as humans, you are subject to the stress and strain of your own predicaments and your own futures. You are, however, imperceptibly and innocently caught in an inevitable and unalterable conflict of interest. You are the regulators and you are the regulated, all at the same moment. We do not

tolerate such conflicts in the traditional business world and specific abuses, if any, will be attacked directly by the FTC.

'For hundreds of years the learned professions have claimed and been granted exemptions from the workings of the marketplace on the grounds that it is in the public's interest that the services they provide not be subject to the pressures of competition. Now the public, more knowledgeable and therefore less trusting than in the past, wants to withdraw that exemption. What the professional sees as selfregulation, in the layman's interest, the layman sees as irritating secrecy and a cozy arrangement that costs him money. It is not easy to slay our own sacred cows, but we can no longer tolerate sacred cows. It is, of course, no fun to lose the status and power and special privileges that competitive exemptions may confer. Indeed, it is painful to the extent that anticipated increases in competition actually occur. I urge you to consider carefully these issues. You can be sure the FTC will not let you forget them."

Mr. Chadwick's speech clearly outlines, for the first time, the philosophy of the FTC toward the learned professions. It may aid us in getting our houses in order before some federal agency does it for us.

We may have another indication for future trends. Governor Carter, in two pre-election speeches, said appointees to Health, Education and Welfare posts would have to be acceptable to Ralph Nader. I believe we can assume from this that the new administration in Washington will be strongly consumer-oriented.

Despite these worrisome problems, our profession is today stronger and more progressive than anytime in its history. We will have to bend some, maybe give up some things, in order to hold our ground on the important issues that make veterinary medicine the fine profession it is. I'm optimistic for a future that I believe holds a bright outlook.

Thanks again for inviting me to your conference, and I wish you all a most enjoyable and successful meeting.