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Barbara Wilkins
Administrative Assistant
Committee on HESS
House of Representatives
Pouch V
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Dear Barbara:

Thank you for your letter of February 23, 1982.

As a follow-up to my comments about naturopaths and their desire to be treated as physicians, I would like to say that I do most firmly believe (and have for a number of years) that the word "physician" is not adequately defined in our statutes. I also believe that the practice of medicine is similarly not well defined. Until these two concepts can be well thought out and well defined, we will continue to have a myriad of persons who claim to be "physicians" and who claim to deliver "the practice of medicine". While I by no means believe that medical doctor physicians can claim any glory for the good practice of medicine in this State, I do most firmly believe that to allow anyone to attach the name "physician" or "the practice of medicine" to what they are doing is not in the best interest of the citizens of this State.

I have consistently encouraged the Board of Medical Examiners and other persons involved with these issues to make attempts to define these concepts. To do otherwise is to open the entire arena to a series of people ill-trained and ill-prepared to handle the problems in the practice of medicine. I certainly would be happy to be involved in whatever way I can in defining these two very complicated issues.

On another issue - sponsor substitute for House Bill 500 regarding the use of State monies for abortions: As I understand this Bill, not only are abortions being knocked out from State funding, but also family planning, vasectomies, and other elective procedures related to family planning are being curtailed. This offers some very serious problems in "elective care" and Medicaid funds. I would suggest that if the sponsors of this Bill are being true to themselves, they will look carefully at what they are writing. To carry the Bill's intent through to its absurd conclusion, one should curtail all elective procedures from State funding. This would mean that skin lesions would never be removed unless the patient were in a state of dying. This would mean that gallstones would certainly not be removed

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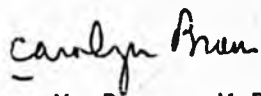
unless the patient were about to die. Any elective procedure should not be paid for by state funds unless the life of the person is imminently in danger.

Of course this is foolish. I fail to understand why family planning is being singled out in this way. I do not believe that abortion should be used as a family planning concept. However, I am much more aware than most of the State legislators that there are situations in which an abortion is much to be preferred in the long run than the perpetuation of countless numbers of unwanted children. To deny Medicaid beneficiaries access to family planning, vasectomies, tubal sterilizations, and other forms of birth control in the interest of propagating numerous unwanted children is even more absurd.

I would much prefer to put efforts in providing family planning services, both interval and permanent, than to deal with the fall-out and pay for the consequences thereof of unwanted children for whom people are neither prepared to care nor financially able to provide.

Please pass these comments along to the appropriate persons who are making the ultimate decisions.

Most sincerely,


Carolyn V. Brown, M.D.

cVB/dd