Injustice in Health Care

BY BRAD COTTON, MD

Dr. Cotton made these remarks at the Ohio State College of Medicine Single-Payer “Medicare for All” debate on May 3.

I am honored to have almost 40 years of service in emergency medicine. In the ED, we try to care for all those cast aside by our profits-before-care health system. Speaking out for single-payer improved Medicare for all to protect my patients is part of that caring.

Most of you will end up as employees. It will become eminently clear — it will be made in-your-face clear — that you now work for the CEO of a large hospital corporation. To the CEO, you are a revenue producer. The amount of cash per hour you bring in will be flow-charted and front-and-centered for you monthly, and you will be told to produce more.

We are here to debate this most critical of subjects: Is health care a commodity to be sold to the highest bidder on the market or is it a human right to be guaranteed by a civilized society?

Anthropologist Margaret Mead was once asked what archeological signs portend that a society has become civilized. She answered that a healed femur fracture proves compassion and civilization because they are one and the same. Someone did the hunting and gathering, the feeding, the caring for this injured proto-human. Even under the Affordable Care Act, the citizen with a femur fracture today had better be prepared to be a player in the market, with insurance, deductibles, and co-pays. Which society was more compassionate? The tribal community or the avaricious market?

Tim arrived by EMS aphasic and hemiplegic. As is so often true, Tim can say formulaic speech like “hello” and “how are you,” but all other attempts result in frustrated flailing of his left arm. Tim’s right arm is stilled, likely forever. He had used that arm as an auto mechanic to support his wife and two teenage girls. Now he can’t even talk to them.

Tim’s wife arrived, still in her Bob Evans server uniform. I always tip servers well; they have a hard job. I am a server also, waiting on beds in the ED instead of tables at Bob Evans. Takes the same set of skills.

Tim’s wife says, “I’m glad you’re our doctor. You were so good with Tim last time.” Tim was here three months earlier, here for AFib with RVR. He had wanted to sign out of the hospital, knowing his insurance had a $10,000 deductible. A good man, he was worried about braces for his girls. Tim’s wife had helped me talk him into being admitted that time. Her thankfulness on seeing me is genuine.

Tim has missed the window of opportunity for tPA. The CT perfusion studies show no penumbra — a completed stroke. A good man to his wife and children. Now he is nearly helpless, can’t even talk. I think of the pride I take in doing emergency medicine in the third busiest ED in Columbus. How would I deal if that were taken away?

Tim’s horror has a name, has a cause. It is profits-first, market-based health care, the only civilized nation in the world that trusts corporate boardrooms to look after our health. Remember Margaret Mead’s definition of civilization: compassion.

Tim’s family was financially destroyed by his first hospitalization for AFib. Tim could not afford the co-pays for follow-up care; he could not afford the meds that kept his blood from clotting in his fibrillating atria. His heart spit up a big ugly clot (ugly because it was preventable) and plugged up his middle cerebral artery. Tim’s stroke was preventable. Markets, profits, “American exceptionalism,” and our stubborn refusal to learn from other nations that
take care of every single one of their citizens for about half the cost took away Tim’s speech, his job, his everything.

Every single shift in the ED, I see good Americans, our neighbors who fix our cars, who wait on us at Walmart, who cut our hair. They have nowhere else to go. They suffer from untreated hypertension, diabetes, arthritis, COPD. These are people who untreated even with Medicaid, while Ohio conservatives work to extract more cash from those who have none. Even with Medicaid, many physicians refuse to treat them.

The evidence is overwhelming, clear, and inescapable: U.S. health care is among the worst in the civilized world as measured for outcomes, and repeatedly rated dead last for equity and fairness. The United States has the highest financial barriers to care and the highest rates in ability to afford needed care, meds, and follow-up. Sixty percent of all U.S. bankruptcies are from medical expenses. Prior to the ACA, 50,000 Americans died each year as a result of having no health insurance. Properly implemented, the ACA cuts the number of uninsured by only about 50 percent, but that isn’t happening because many governors are refusing to expand Medicaid.

I have very little tolerance for Ayn Randian armchair theories about the role of free markets and limited government. Neither does Tim, my stroke patient, nor his wife and family.

I share three favorite quotes:

Martin Luther King: “Of all the forms of inequality, injustice in health care is the most shocking and inhumane.”

Marcia Angell, MD, the former editor of the New England Journal of Medicine: “We’ve engaged in a massive and failed experiment in market-based medicine in the United States. Rhetoric about the benefits of competition and profit-driven health care can no longer hide the reality: Our health system is in shambles.”

Wendell Berry, novelist, environmental activist, and farmer: “Rats and roaches live by competition under the laws of supply and demand; it is the privilege of human beings to live under the laws of justice and mercy.”

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