The Cartwright Legacy

Ron Paterson in an editorial\(^1\) on the Cartwright Legacy has perpetuated the myth that the Inquiry had revolutionized medical ethics and that after the Inquiry the patient had been put first and not the doctor. He states that there has been a “seismic” shift in relationships between doctors and their patients. This implied that there had been a general arrogant disregard of patients by the profession.

I practiced surgery in Auckland throughout the period of the Inquiry and I can assure Mr Paterson that I was unaware of any behavioural change in the management of patients before during or after the Inquiry. My observation of colleagues both within and outside the hospitals was that strict ethical standards were adhered to and that the patients’ health problems were paramount. Also patients had always been consented for procedures done where appropriate.

Since the Inquiry the risk factors have been amplified such that now patients are told that when a general anaesthesia is administered there is a possibility that they might die. Previously this would not have been a routine and the consent would be tailored according to the anticipated risk. One reason was to avoid unduly frightening the patient where the risk was extremely small. What’s new are the many wall instructions in hospitals pointing out patient’s rights.

Recently Linda Bryder, a medical historian, in her book, has brought some balance to the Cartwright Inquiry and the aftermath. She has clearly pointed out the central place the ideology of the feminist movement played in the drama that unfolded. Also the difficulty the Court had in understanding the science of in situ cervical carcinoma. The aftermath had the detrimental affect on the management of childbirth with the rapid rise in the power of midwives and the decline in GP involvement in obstetrics.

The recent death of Mr Bill Faris caused Mr Tony Baird to describe his outstanding lifetime service in the field of Obstetrics and Gynaecology; yet to have inappropriately suffered the indignity of being found guilty of “conduct unbecoming a medical practitioner” by being implicated as a member of the subcommittee that was established in 1975 at National Women’s Hospital to review the care of women with cervical dysplasia. Along with other medical staff he had no recourse to defend himself of this charge

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Reference: