September 12, 1959

The President
The White House
Washington 25, D. C.

Dear Mr. President:

I very much appreciate your thoughtful and prompt response to my letter pointing out the threat of a shortage of medical and dental manpower in the years ahead. I was particularly pleased to know that you share my concern in this matter and that you agree new measures may be needed if the threatened shortage is to be averted.

Please be assured that insofar as I am able to exert influence on the actions of Congress, in terms of either legislation or appropriations, I stand ready to support any realistic, affirmative, and farsighted proposal that would assure an adequate number of qualified physicians and dentists for our expanding population.

I am distressed that you feel additional studies are needed before an action program can be formulated by the Federal government. This issue was sufficiently clear-cut two years ago for the Administration to propose a program for the construction of educational facilities in the Nation's schools of medicine, dentistry, and public health. That proposal, unfortunately, was not enacted; but I must point out that not only was it not resubmitted by the Administration this year, but the Administration also failed to support legislation I introduced into Congress this year directed to the achievement of similar goals.

There are several other points in your letter that I feel require comment.

1. You rightly point out that the ratio of physicians and dentists to population has remained fairly constant in recent years because of the opening of new schools and the expansion in enrollment of existing schools.

This fails to take into account, however, the fact that the expansion resulted largely from the conversion of two-year to four-year schools. Having capitalized on this potential, we are now faced with the problem of creating new schools for Medical and related education. I am confident that the number of new schools required cannot possibly materialize without Federal leadership and support, and I am advised that despite academic acceleration programs, our present schools cannot substantially expand their enrollment without new construction.

2. You cite the failure of Congress to support payment of the full indirect costs of research projects as one factor contributing to the fiscal plight of research and teaching institutions. I would remind you that although the Administration embraced this in principle, the budget submission to the Congress this year did not contain a request for the funds necessary to pay these increased costs. This maneuver was hardly calculated to inspire confidence in the proposal. I myself believe that for many institutions, the increase in overhead on research grants is requested not so much to subserve a research purpose but rather to provide vitally needed general operating funds -- a problem to which the Administration has thus far been unwilling to address itself.

3. Your letter suggests that the levels of support Congress provides for medical research represent a strain on the Nation's manpower resources for teaching and service. I have heard this fear expressed for years but have seen no evidence that it is based in fact. Indeed, in a recent Public Health Service survey of twenty medical schools, the data indicate that during the period of most rapid growth in medical research support, full-time faculty positions almost doubled although there was no consequential increase in student enrollment. This suggests that medical research support may actually enhance rather than subtract from the teaching process. In terms of the effect of medical research on health practice, only five percent of the graduates of medical and dental schools pursue research careers, and there is no evidence that the percentage has increased with the rise in funds available for medical research. There is evidence, on the other hand, that a substantial part of the new and growing investment in medical research goes to the support of projects using skills and scientific disciplines not heretofore involved in such research. In addition, research training programs supported by Federal and nonfederal funds have added substantially to the medical research manpower pool.

I, too, am looking forward to seeing the report on medical manpower needs prepared by the group of consultants called together by the Surgeon General of the Public Health Service to advise him on this matter. I do not, however, believe such studies are needed to confirm the basic fact that unless some action is taken now, there will be an acute shortage of medical manpower by 1965-70. Studies can refine and extend this basic fact, but they are not a substitute for action. The Administration has had available to it for the past two years, for example, an excellent document prepared by another committee at the request of the Secretary of Health, Education, and Welfare. This report by Dr. Bayne-Jones and his group --

a report with which I understand you are personally familiar -- sets forth in a specific and convincing manner the Nation's needs with respect to medical manpower. It identifies the need to strengthen existing medical institutions and to create new ones. It speaks on the need for the Federal government to assist in this process by support of medical education as well as medical research. Yet, so far, the Congress has seen no action by the Administration on the substantive matters and recommendations set forth in this report, other than an attempt to use it as a blueprint for budgetary purposes to limit the support of medical research, despite its fundamental recommendation that the Nation's medical research effort "should not be restricted for lack of funds".

I am confident that if the Administration would present to the Congress a clear and definite recommendation for action on the part of the Federal government to enlarge our medical manpower resources, such proposals would be accorded urgent priority.

Sincerely,

John E. Fogarty, M.C.