

Greenberg Resumes News Editorship

Daniel S. Greenberg has returned to Washington after 2 years of reporting on science affairs from Europe and will resume his duties as news editor. John Walsh will become foreign editor, based in Washington, with responsibility for developing international coverage in the News and Comment section.

nel that the civilian sector cannot—it can move workers around to where they are needed and can assure itself that exactly the desired number of each kind of worker will be trained. Nonetheless, it seems possible that a health care system with more allied health professionals and fewer doctors, dentists, and registered nurses, if well designed, could be a partial solution to the nation's health manpower shortage.

This solution, if it is to be achieved, will depend partly on a restructuring of the health care delivery system and partly on the development of new kinds of allied health occupations.

The greatest portion of the growth in the employment of allied health professionals has been in the hospital setting. To some extent, this is a natural result of the functions of the hospital: surgery, tissue identification, and elaborate diagnostic procedures require many helping hands. But hospitals also employ more allied health professionals because they are cooperative practice situations, better able to make efficient use of ancillary personnel than the doctor working alone. As cooperative practice becomes a more prevalent mode of care outside of the hospital—a slow but

inexorable trend—an increased role becomes possible for the allied health professional.

One model for the private practice of the future was furnished recently by the Allegheny County Medical Society in Pennsylvania. The Society established a "group" practice consisting of one physician, an office nurse, public health nurse, social worker, technician, and secretary. The practice handled 2500 persons in a low-income area of Pittsburgh and was reported to be successful. Nonphysicians had more than the usual responsibility, and patient acceptance was high.

The Allegheny experiment made use of at least one professional, a social worker, not normally associated with the health team. But the greatest potential for a more significant role for the allied health professional may lie in the development of new kinds of these professionals—generalists whose education and training would place them between the nurse and the physician on the spectrum of workers. One such job, the physician's assistant, already exists on a small scale, and more schools are beginning to offer training for it. The first program for physicians'

assistants began at Duke University in 1965. The Duke curriculum is 2 years, and there are 29 graduates already working in private practices and hospital settings. A survey conducted by officials of the program indicates that these physicians' assistants increase the productivity of the physician 30 to 50 percent. Among his functions—depending on the supervising physician—may be taking detailed patient histories, doing extensive physical examinations, collecting specimen data, applying and removing casts, suturing superficial wounds, and changing dressings.

Several schools, including Duke, are also developing 4-year baccalaureate programs for physicians' associates who would have still greater responsibilities. One economist, Henry Greenfield, has suggested that we need a whole continuum of medical degrees—bachelors, masters, and doctors of medicine—to make the most efficient use of manpower.

While the Administration continues its niggardly approach toward all health programs, it will remain an academic question whether to promote this kind of manpower or that one. But as long as physicians, in whose training the taxpayer invests tens of thousands of dollars, say that one-half to three-quarters of their time is spent in routine burdens, it is clear that something more is called for than just seeking to increase their numbers.

—JOEL KRAMER

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Smithsonian: Natural History Is Undernourished, Panel Finds

To most people the Smithsonian Institution is the national museum, and a museum is commonly thought of simply as a place for the display and safe-keeping of antiquities, objects of art, works of science and technology, or specimens of natural history. The Smithsonian was conceived from the outset, however, as an institution that would be deeply engaged in research—

a function of the Smithsonian that has, in fact, increased substantially over the past decade. On the other hand, the Smithsonian also has devoted substantial attention and resources in recent years to broadening its educational activities, by such means as innovations in the display of exhibits, more tours for school children, the holding of folk festivals, and the launching of *Smithsonian*, its new magazine. In sum, the Smithsonian is a far more complex and diversified organization than most people, including most members of Congress, realize.

As such, the institution, which looks to Congress for nearly two-thirds of its \$55-million budget, could be well served by a sympathetic committee of congressional overseers able to help interpret and explain the Smithsonian's manifold activities to the House and Senate. Now it appears that precisely such a role has been assumed by an obscure subcommittee of the House Committee on Administration. This body, known as the Subcommittee on Library and Memorials, recently completed 7 days of hearings on the Smith-

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