

he reaches retiring age, know how to use that period of his life when no demands are made of him. It will then therefore no doubt be less necessary to insist on the exercise of a professional activity.

Moreover, people in later life who have learned not only to put up with but to come to terms with old age will be able to find unity and happiness: this period of their life will become the inevitable but not the dreaded stage of every human being's lot.

The Position of the Medically Trained Person in the Administration of Health Services (Summary), by Dr. K. Evang, *Boletín de la Oficina Sanitaria Panamericana*, Washington, 1967, No. 3.

Any health problem of consequence facing a central health administration today will generally present several aspects:

1. The health (medical) aspect.
2. The legal, including constitutional, aspect.
3. The financial aspect.
4. The functional aspect, meaning integration into the machinery of the health services at large.
5. The sociological aspect, relation to other related functions of society.

All these aspects are intimately interwoven and only represent various sides of the same problem. In any other field it would be accepted that the only way to handle a problem of this conglomerate character is to establish an adequately composed team, the members of which among themselves cover the various types of insight and experience. This approach is now called for also as far as the central health administration is concerned. Old traditions, prejudices, and vested interests will have to be overcome to also achieve this on the part of the medically trained administrator.

On such a team the lawyer will be a full member in his own right, as a specialist in legal questions, as will various types of specialists in administration. Since the goal-setting has to do with health, however, all participants will find it only natural that the medical specialist in health administration should be the head of the team. One should also recognize from the very first moment that a team entrusted with administrative and executive tasks cannot in all respects act in the same way as a scientific team. In administration for obvious reasons a ladder of responsibility must be established.

It should also be clearly admitted that the difficulties which we are facing today to a great degree are caused by the unwillingness of the

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medical profession to accept the challenge of administrative medicine. In many countries of the world today, fortunately, the tide is turning in this respect, especially since administrative medicine has now been established as an academic discipline with its own scientific and practical instruments.

One of the greatest dangers to democracies in our day is that we may drown in our own bureaucracy. To follow Parkinson's Law is too easy: each time an administrative problem arises, some are apt to put a new layer of "administrators" and "coordinators" on the top of the already existing machinery, in the hope of thereby gaining in control and efficiency. Experience shows that the opposite is more often the result.

Health services form an entity. The independence of its component parts is growing daily. Since all demands for health services cannot—in fact should not—be met, countries should in their own interest develop a technical authority entrusted with the task of producing the balanced, the "ecological" view.
