

MEDICINE AND THE WAR IN VIETNAM

Each one of us has an individual religious and ethical background which bears upon his decision to participate in the military. In addition, we as physicians have a unique responsibility to humanity which we express in the Oath of Geneva. It is this responsibility which creates for us a non-combatant role in the military. It is this responsibility which requires that we speak out today against the practices of the military.

1. Can the physician practice good medicine in the military?
2. Can the physician practice ethical medicine in the military?
3. Can we as physicians tolerate the actions of our military toward the peoples of Southeast Asia?

In regard to the first question, the Army Field Manual states:

"The Army Medical Service is a supporting service of the combat elements of the Army primarily concerned with the maintenance of the health and fighting efficiency of the troops. The mission of the medical service in a theater of operations is to conserve manpower by recommending, and providing technical supervision of the implementation of, measures for safeguarding the health of the troops, effective medical care, and early return to duty; and to contribute directly to the military effort by providing adequate medical treatment and rapid orderly evacuation for the sick and wounded."

The fact that early return to duty is one of the physician's goals prevents the best possible treatment for an individual soldier. How can a physician wish to speed the recovery of a soldier so that he may again go out into the field and be further maimed or killed?

The answer to the second question is also "No." The realities of the Vietnam war require trained physicians to violate the Oath of Geneva and choose patients and procedures with political motives. For example, according to an article in Military Medicine, "one of the major objectives of the Medical Civil Assistant Program (MEDCAP) is the maintenance of the favorable image of the Central Government of Vietnam and of the U.S. in the minds of the general population...The U.S. Military Hospitals (MEDCAP II) admit selected Vietnamese civilians for 'high impact' (highly visible) surgical procedures such as correction of harelips, while hundreds of war injured civilians have little or no access to medical facilities." In Vietnam, "triage" extends not only to degree of injury but to degree of acceptance of US military objectives -- Americans are treated before ARVN before Vietnamese civilians, and perhaps in low-pressure situations, then also Viet Cong. The Army said it clearly at the 1967 AMA convention: "In the war to win men's minds, medicine can be considered to be a 'weapon'."

Finally, can we as physicians tolerate the actions of our military in Southeast Asia where, as Dr. Henry Kaplan (Chairman, Radiology Dept., Stanford Medical School) has put it, more people are killed in a week than a physician can expect to save in a lifetime? The answer is NO: we cannot and will not stand by quietly while our government, in our name, destroys the lives we are committed by our oaths, our consciences, and our humanity to protect.