

Among the witnesses questioned on this subject there was an overwhelming preponderance of opinion that the time had now arrived for the adoption of notification of all cases of venereal disease by number or symbol, if only for the purpose of getting more accurate statistics; the notification by name of those recalcitrant patients who refused to continue treatment until cured; and compulsory examination of those whom the Director-General of Health had good grounds for believing to be suffering from the disease and likely to communicate it to others, and who refused to produce a medical certificate as to their condition. Only three medical men expressed themselves as being against these proposals. On the other hand, the lady doctors examined (two of them members of the National Council of Women, and the third representing the Young Women's Christian Association) gave evidence in favour of conditional notification, and compulsory examination, and compulsory treatment of recalcitrants. It should be added that all the witnesses who were engaged in rescue work, or other work bringing them face to face with the horrors of venereal disease, were most emphatic in their opinion that compulsory notification and treatment should be adopted.

It is noteworthy that when the notification of ordinary infectious disease was first proposed in England almost exactly the same arguments were brought against the proposal as are now advanced against the notification of venereal disease. Sir W. Foster, member for Ilkeston, and a medical man of standing, speaking in the House of Commons in the debate on the Infectious Diseases Notification Bill, on the 31st July, 1889, said,—

“The Bill calls upon medical men to perform something more than the ordinary duties of citizenship by requiring them to become informers of the occurrence of diseases. The relation of a medical man to his patient ought to be one of complete confidence, and anything that comes to the knowledge of a medical man in the practice of his profession is practically an inviolable secret; and I do not like any Bill to interfere with that relationship. I know myself that one of the results of this Bill, if passed into law, will be that in scores of cases medical men will not be called in to attend people suffering from infectious diseases . . . I admit the difficulty of the position, but I am anxious that no measure should pass into law which will induce the public to keep these diseases more secret than they have been in the past, with the risk of adding to the spreading of them. We must be very cautious not to do anything which will prevent the public from placing full and implicit confidence in their medical man. I can quite conceive it to be possible that, if an outbreak of infectious disease occurs in a populous part of London, the people may, in order to prevent exposure, refuse to allow a medical man to come in, and in such cases we shall have tenfold more difficulty than at present. Therefore, while I am anxious to promote the notification of disease, I do not want the Government to promote rebellion on the part of the public.”

Needless to say, these gloomy anticipations have not been realized. Probably the more enlightened generations to succeed us will wonder how there could ever have been any opposition to the notification of venereal disease, just as we to-day read Sir W. Foster's words and marvel that any person of intelligence could have committed himself to such statements.

Notification of infectious diseases and isolation of patients suffering from such diseases have for many years been compulsory. Isolation, when spoken of by opponents to a similar measure for venereal diseases, is opprobriously described as “compulsory detention.” For twenty years it has been the law in New Zealand that an authorized medical practitioner may examine any person suspected to be suffering from any infectious diseases (save venereal diseases), and the Medical Officer of Health may, if he deems it expedient in the interests of the public health, compel the removal to a hospital of any person so suffering. This long-established procedure as referable to venereal diseases is by antagonists termed “compulsory examination” and “compulsory removal.”

It is contended by some witnesses that notification will drive these diseases underground; but syphilis and gonorrhœa for generations past have been underground.

Under the present system numbers of unfortunate persons either delay calling in medical assistance until the case has become almost desperate so far as the patient is concerned, or they resort to unqualified persons, with the result that in most cases what was in the first instance a simple attack, capable of treatment, results in serious complications most difficult to deal with. In either case the patient may be communicating diseases to others, and should this come to the knowledge of the Health Department it has no effective means of checking him—no power to warn those who are being endangered by his criminal neglect.

The Committee think there is some force in the argument that notification by name, in the first instance, as in the case of ordinary infectious diseases, would tend to discourage some from coming forward for medical treatment. They recommend, therefore, the adoption of what is known as the system of conditional notification embodied in the West Australia Act. Under this plan the cases are notified by the doctor to the Health Department by number or symbol only. The name is not sent in unless the patient discontinues treatment before he is free from infection and refuses either to go to a clinic or to another doctor. In cases of those who “play the game,” the name of the patient is kept confidential, and does not pass beyond the medical man attending him. It is only in cases of those who contumaciously refuse to do what is necessary for their own safety and the safety of others that the name is sent to the Health Department, in order that appropriate steps may be taken in the interests of public health. Even then the name is given only to officers who are pledged to keep it confidential.

Following are the clauses in suggestions for a Bill, drawn up by the Health Department, which in the opinion of the Committee should in substance be adopted:—

“(1.) Every medical practitioner shall forthwith give notice to the Director-General of Health, in the prescribed form, upon becoming aware that any person attended or treated by him is suffering from any venereal disease in a communicable form. The notice shall state the age and sex and occupation of the patient and the nature of the disease, but shall omit the patient's name and address,