

EIR Investigation

N.Y. emergency rooms a needless nightmare

by Ernie Schapiro, M.D.

Conditions in the emergency room at the Kings County Hospital in Brooklyn, New York have become so intolerable that on Feb. 8, the staff threatened to resign, and were only persuaded to remain after negotiations with the city officials netted promise of more staff, more beds, and higher pay for attending physicians.

EIR interviewed New York physicians Barry Liebowitz and Kildare Clarke about the crisis conditions on Feb. 15.

In the interviews, published here below, the doctors show how New York City maintains a two-level health care system in which the poor and the uninsured have only a very limited access to medical attention. This situation is institutionalized in what is called the "affiliation relationship," in which the medical schools are associated with private hospitals—where those with money or insurance can receive relatively good care—and also provide attending physicians to the city hospitals, for which the medical schools are vastly overpaid and the patients are short-changed.

The "affiliation system" thereby denies funds to the city hospitals to purchase expensive equipment or competitively attract highly paid specialists.

It is the responsibility of an attending physician to oversee the treatment of patients on his or her ward, to make rounds, and to supervise the interns and residents.

New York City's Health and Hospitals Corp. (HHC), which figures prominently in this system, acts as the overall management agency for the city's public and private hospitals. It was set up during the 1970s "fiscal crisis."

In January 1989, during a series by the *New York Post* on the city's hospital crisis, Dr. Clarke caused an uproar by saying that emergency room doctors were being forced to violate their Hippocratic Oath under the austerity conditions imposed by then-Mayor Ed Koch.

The author was given a tour of the emergency room by Dr. Clarke, where I saw the conditions that led to the near-mass resignation. Several of the rooms have been converted into hospital wards where acutely ill patients stay for days, closely packed together. Some of them had had heart attacks and belonged in an intensive care unit.

A week prior to my visit, the *New York Post* reported that crowding was so severe in the waiting area of the Kings County Hospital Emergency Room that one exhausted man suffering from hepatitis and suspected kidney failure had to stand for two hours because there were no available chairs.

Dr. Liebowitz reports, "We've also exposed the flies in the operating room. There were flies landing on the brains of neurosurgical patients! One brave doctor exposed this. He sent his patients to other hospitals and the hospital tried to fire him, but we protected him."

Dr. Clarke described graphically how there are "four kinds of medicine" for whites, blacks, rich, and poor, and went on to tell the story of the chief executive of one leading hospital who had sent out a memo saying who the hospital should not accept as a patient. "He was seriously injured in an accident, but, when he was brought to his own hospital, they turned him away. He was sent away and died here."