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Look for the 'Broad Street pump' for good public health

Family physicians historically have led the crusade to improve public health, says David Satcher, MD, PhD, an FP and director of the federal Centers for Disease Control and Prevention.

He speaks from experience. During a fellowship in community medicine in 1975, Dr. Satcher conducted a needs-assessment survey in south-central Los Angeles. He went door to door with a list of family practice objectives, asking neighborhood residents how important each objective was to them.

"At the first door, an old black man came out and I told him what I was doing," Dr. Satcher recalls. "He said to me, 'I don't know what you have, but we need everything.' He was saying they don't separate their needs in the inner city. Some needs are so overwhelming that they put health needs on hold. For example, it may be unsafe to leave the apartment, so they won't go to the doctor."

The survey had a major impact on Dr. Satcher's approach to medicine, illustrating for him the importance of treating patients in the context of their community. He notes that children in one particular part of Atlanta are 10 times more likely to die of asthma, and researchers are trying to determine why. Understanding the root of such problems could help prevent illness, he says.

Dr. Satcher tells the story of John Snow, a general practitioner in England. In 1854, Dr. Snow and other doctors were battling an outbreak of cholera.

Dr. Snow determined that many patients were drinking contaminated water from the Broad Street pump, so he left his office and took the handle off the pump. When Dr. Satcher and his staff are faced with complex public health issues, they frequently ask, "Where is the handle on this Broad Street pump?"

Family medicine has always emphasized epidemiology, societal factors, and understanding the populations from which patients come, says Dr. Satcher. And the specialty has successfully incorporated those concepts into its training of medical students and residents. "Family medicine has been the effective liaison between public health and medicine, and the Academy can really provide leadership in that area," he says.

Even 30 years ago, organized medicine was promoting fundamental priorities of family practice, including an emphasis on public health, Dr. Satcher notes. He cites *The Graduate Education of Physicians*, commonly known as the Mills Report, a 1966 study of graduate medical education commissioned by the AMA. The report proclaimed a dire need for more "primary physicians."

Family physicians don't necessarily have to tackle epidemics or research community health problems to make major contributions to public health, says Dr. Satcher. In fact, their focus on preventive care plays a big part in keeping communities healthy.

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"One of the reasons it's not easy to detail the role of family practice in public health is that family physicians are just doing what they do best: keeping people healthy," Dr. Satcher says. "People don't pay attention to public health endeavors that work."

AAFP priorities

The Academy has traditionally addressed public health issues with enthusiasm.

In 1948, the first AAGP Congress of Delegates acted on a resolution calling on the Academy to combat alcoholism. Public health issues addressed over the years include immunizations, Native American health, mental health, preventive care, use of seat belts, tobacco advertising, rural health, child care, drug abuse, heart disease, cancer, diabetes, the National Health Service Corps, and sexually transmitted diseases including AIDS.

The 1996 Congress of Delegates adopted several policies on public health issues, including condemnation of female genital mutilation, support for substance abuse treatment instead of imprisonment for pregnant drug abusers, and support for efforts to ensure that legal immigrants have access to health care.