

A Surgeon General without an army.

KOOP D'ETAT

AT AGE 65 most people slip into obscurity with a retirement check and some golf clubs. But Dr. C. Everett Koop, a world-renowned pediatric surgeon, is on the brink of a new career. On October 28, the Senate Labor and Human Resources Committee approved Koop's nomination as Surgeon General of the United States. Despite a request by Senator Charles McC. Mathias, Republican of Maryland, that the full Senate postpone its vote to allow time for further research into the candidate's background, the nomination is expected to go through. The appointment is a controversial one. Dozens of newspapers and national organizations oppose Koop on the basis of his doctrinaire anti-abortion stance, his backward views on women's and gays' rights, and particularly his inexperience in the field of public health. Koop's colorful way of expressing his moral convictions has made him

an easy target for media attacks that ignore more pertinent issues. A fundamentalist Christian, Koop has compared legalized abortion with "the beginnings of the political climate that lead to Auschwitz, Dachau, and Belsen." He has denounced most main-line Christian denominations as "depraved." And he predicted, in a 1979 commencement speech, that 20 years hence the Rockefeller Foundation will be funding homosexual test-tube babies to give the gay movement more political clout. Perhaps he was kidding, but President Reagan isn't. The President is determined to have his man, even if it means making ineffectual the position the Philadelphia surgeon is intended to fill. In an attempt to make two wrongs equal one right, Reagan is placing an unqualified man in a job whose legitimacy is itself increasingly questionable.

THE position of Surgeon General, which slowly evolved from the "supervising surgeon" for the Merchant Marines in 1798 to the nation's chief spokesman for public health issues in the 1920s, has always been nebulous. The power of the office peaked in 1964, when the influential report on the health hazards of cigarette smoking was issued. In 1966, all decision-making functions of the post were transferred to H.E.W.'s office of the Assistant Secretary for Health, and the Surgeon General became more of an advisory figure than an administrator. President Nixon abolished the position in 1973 when, unable to find a candidate, he simply neglected to appoint anybody. President Carter reinstated the position, but combined it with the job of Assistant Secretary for Health. In whatever form, the job has managed to survive as that of the national counselor for public health matters. The three previous Surgeons General all had backgrounds in public health. Dr. William Stewart specialized in epidemiology and public administration in the Public Health Service before his appointment in 1965. His successor, Dr. Jesse Steinfeld, was a scientist and a deputy director of the National Cancer Institute before his nomination in 1969. And Dr. Julius Richmond, who served as both Surgeon General and Assistant Secretary for Health under Carter, had been chairman of Harvard Medical School's department of preventive and social medicine.

Koop, on the other hand, has virtually no experience in the field of public health, the function of which, according to the American Public Health Association, is preventing disease and promoting the health needs of the population as a whole. The A.P.H.A. says that most of Koop's admittedly impressive achievements—including new surgical techniques and the treatment of childhood cancer—are in the field of "patient care," which concentrates on the treatment of illness rather than its prevention. At his confirmation hearing in October, Koop pointed to his experience curing various epidemics and coordinating programs for medical fellowships abroad as public health qualifications. But

the A.P.H.A. says that these do not constitute the "specialized training or significant experience in public health programs" required by law for the position of Surgeon General.

When Koop was nominated in September, the main part of the job was supervision of the 6,000-member Commissioned Corps, a medical team that staffs the Public Health Service hospitals and clinics and the Indian reservation health centers. The corps is on hand in case of a national medical emergency such as the eruption of Mount St. Helens. But several weeks ago the government announced it will no longer fund the eight hospitals and 27 clinics. The hospitals, which were originally set up to treat commercial seamen and to keep communicable diseases out of the country, over the past 40 years have gradually become health centers serving low-income communities. According to Health and Human Services Department spokesmen, the Surgeon General's main job, aside from directing the pared-down corps, will be to advise the Administration on policies regarding the elderly, including overseeing the White House Conference on Aging, which will be held at the end of the month.

FOR THIS kind of job, it makes little difference whether or not Koop has the requisite experience in public health. If he did, he would have little opportunity to apply his knowledge. Government health officials acknowledge that the position is most important for symbolic reasons. "The Surgeon General is more tradition than anything else," says Jim Buchan of the Public Health Public Affairs office. "We've had a Surgeon General since the 1700s." But such a cavalier attitude angers some in the field of public health. Dr. William McBeath, executive director of the American Public Health Association, says he would rather have no Surgeon General at all than one who does not have adequate background in public health. "That would be preferable to pulling a travesty on the public, by passing off a leopard as a tiger," he said.

The President's motives in appointing Koop appear to be more those of self-interest than of concern for the public health. The nomination is a way to appease the anti-abortion forces who backed Koop and who opposed the appointment of Supreme Court Justice Sandra Day O'Connor. Koop's lack of public health qualifications may also help pave the way for further erosion of the already diminished Public Health Service. As for the nominee himself, the title of Surgeon General will provide a pleasant way to keep busy after the mandatory age of retirement. If Koop is to be a mere figurehead, President Reagan should follow his own preachings on the size of government and abolish the position as Nixon did. But if the post is to be a viable one, it should be filled by somebody with the necessary qualifications.

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