

if they entered pleas before a full disciplinary enquiry.

'You can draw the analogy of a traffic offence. There is a *prima facie* case of exceeding the speed limit and you can either pay an admission-of-guilt-fine or fight it in court. If you pay the fine, you don't appear in court and thus your name is not a matter of public record, nor can it be treated as a previous conviction.'

He said both disciplinary matters were 'not dealt with in any kind of unique or special way — this all falls well within the current professional conduct regulatory environment'.

This meant that the Exco of the MDPB was empowered to authorise the registrar to enter into plea bargain negotiations with respondent doctors.

A veteran medical insider said that while plea bargaining was 'admirable' as a tool for resolving matters, 'the fundamental fact remains that guilt has been established by admission and a penalty being imposed'.

'Surely the logical consequence of this is recorded on their files in case similar charges are brought against them in future, just like others found guilty in professional conduct enquiries?'

Letlape said such matters should be probed by the police or the Scorpions, so that punitive measures could be appropriate to the crime.

'When professional activity turns criminal, it's easier for the health professions to act appropriately if people are tried as fraudsters. At least then they can even face jail terms that the HPCSA simply can't impose. It becomes an entirely different ball game.'

Chris Bateman

## The South African Medical Journal

### 100 years ago:

As a consequence of the parlous condition of things medical in South Africa, we are now witnessing a phenomenon which is entirely novel, in the considerable numbers of departures from the country of medical men some of whom have been here for some years. None but those who like ourselves come into contact with the whole body of the profession and get behind the scenes which a somewhat exaggerated self-respect hides from most people, know to what an extent this phenomenon is justified. It is not the difficulty of getting the initial 'bread-and-butter' that is the trouble, but the hopelessness, for the great majority, of ever getting beyond the bread-and-butter. The average income may be quite sufficient for the bachelor of twenty-five, but it is when he blossoms out into a family man of forty-five that the South African practitioner bewails alike the lack of progressiveness as compared with British practice and the enormously enhanced expenses. And when the realisation comes it is often too late to commence afresh, unless one is fortunate enough to drop into the Public Service, which the wise men do whilst young, and the unwise ones regret not having done, when it is too late.

### 50 years ago: The problems of old age

The health and welfare of the elderly is a subject which looms large in modern life. With the continuous fall of the death rate the people over 60 years old constitute a proportion of the population that grows greater year by year. In periods when the falling death rate is accompanied by a decline in the birth rate, as has been the case during recent times, this 'aging' of the population is still more marked.

If people over 60 cease from work the economic effect of the change in the age-constitution of the population is very great. Production is limited to the younger age groups, and the consumer needs of the growing mass of the elderly or aged, with those of children and young persons, become a growing charge on the producer age groups. The policy of 'retiring' healthy and capable people merely because they have reached a prescribed age is clearly one of promoting scarcity rather than plenty. Many people at 60 are at the peak, or very little below the peak, of their capacity; what they may have lost in certain phases of vitality is often compensated for by experience and judgment; and although their future years may be years of decline the productive capacity of these years may add up to a very substantial total...

The control of the aging process and the maintenance of the health of the aged is a subject that is assuming greater prominence in medicine, and promises valuable results.