

The Product of Medicine: How Efficiency Made American Health Care

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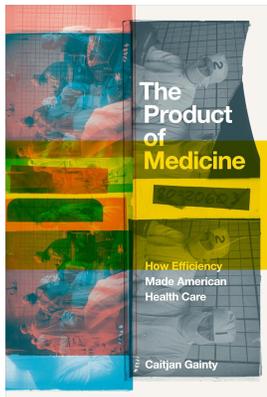
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Book Title: The Product of Medicine: How Efficiency Made American Health Care

Author: Caitjan Gainty

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Henry Ford, industrialist and president of Ford Motor Company, suggested,

He could place tubercular patients in among the hot steel and hotter furnaces, allowing workers the full experience of a therapeutic climate, he said, while also preventing them from doing what he imagined went on in a sanatorium: a lot of thumb-twiddling and illness bemoaning.

(p. 47)

Ford proposed this medical ward for consumptives in the Ford Hospital based on his assembly line innovations from the factory floor. That was early in the 20th century, and because of the revolutionary technologies of steam and electricity, economies were rapidly shifting from agriculturally based to industrialized.¹ Influenced by industrialization, medicine was experiencing efforts to improve efficiency and effectiveness.

Dr Caitjan Gainty, a historian who studies medicine and health care in the 20th century, examines how industrial principles and redesigns motivated medical efficiency in her book *The Product of Medicine*. Gainty's book builds on her career documenting medical efficiency in academic literature.^{2,3} Biographies and analyses of medical history contextualize the early 20th century history of medical efficiency with densely academic content.

The Mayo Clinic is introduced in Chapter one to help readers understand how hospitals were redesigned with the intention to more efficiently process the raw materials or patients in need of treatment. Chapter two focuses on Henry Ford and the Ford Hospital, illustrating the Fordist principles guiding industry at the time and how those principles were used in medicine. The later chapters focus on standardization in medicine, drawing on examples from the American College of Surgeons and the Flexner Report.⁴ Chapter five explores how the product of medical standardization spread across the United States. Gainty's book concludes with the final product of doctors and how the American Medical Association was found to be a monopoly and essentially ended the medical efficiency era of the time.

Chapter 4, “The Labor,” is an example of the way the book is structured to convey messages on the history of medical efficiency. Gainty starts the chapter focused on Abraham Flexner, who is known for *The Flexner Report* and has been a major contributor in the standardization of medical practice. *The Flexner Report*, published in 1910, surveyed medical education in the United States and Canada. Flexner's findings included how new medical schools were springing up rapidly since 1810 and not adequately preparing graduates.

After students finished their education, they often referred their patients back to their instructors because they had no idea what to do themselves. . . . The first thing these hapless proprietary school-educated practitioners did when encountering a patient, even in an emergency, was to call their erstwhile professors.

(p. 97)

Flexner was not focused on the connections between the subpar training of practitioners and health outcomes of patients. Rather, “Where patients as individuals are mentioned in the report, it is not in terms of their potentially untimely demise or continued disability as much as it is the travesty of the unstandardized care they might receive” (p. 99). Gainty relates how this report would remove opportunities for individuals from poorer and more rural regions, or the “poor boy.” Instead, the report aimed to establish control of medical labor for the privileged and criticized medical colleges for women and Black people: “For Black medical practitioners . . . the product of modern medicine was social, political, and economic exclusion” (p. 90).

While Gainty’s book focuses on the early 20th century, the industrial technologies and practices being utilized in medical efficiency can be applied to today’s industrial revolution of artificial intelligence (AI). AI is transforming medicine in the 21st century with innovative technology.⁵ Family medicine can prepare for AI by learning from previous medical responses to industrial change.⁶ Gainty’s book does not go into modern technological challenges. Yet, educators may find the book relevant if developing case studies in curricula examining the impacts of technology and industry on health care.

Academics may find *The Product of Medicine* a gold standard for scholarly reference related to the history of 20th century medical efficiency. Family medicine academics focused on medical history may find the book interesting. Reading “Mr. Gilbreth’s Motion Pictures—The Evolution of Medical Efficiency” or another one of Gainty’s peer-reviewed history articles may help in determining the book’s usefulness.^{2,3} Gainty’s book is an efficient read to learn from lessons past, which we may need when inevitably history inefficiently repeats itself.

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