

## **“JEW-ISH” MEDICINE**

Text of a Zoom talk given by Dr. Michael Nevins for the Museum at Eldridge Street, NYC, November 19, 2024.



**TWO JEWISH DOCTORS IN CORDOVA, SPAIN**

When I was growing up in the Bronx during the 1930s and 40s, the only doctor I ever knew happened to be our Jewish next door neighbor Jack Berkman. His family and mine were close friends and sometimes late at night when my brother or I had a cold, Dr. Jack would trundle over in his bathrobe and slippers and carrying his little black bag. He might have asked my mother to borrow a teaspoon to use as a tongue depressor or perhaps a flashlight so he could take a look inside — and he must have known what he was doing because nearly nine decades later, I'm *still* here!

When I began studying medical history long ago, I realized that not only had my brother and I, and also Dr. Berkman's two sons, gone on to become physicians but so did a bunch of our friends — and I wondered whether they too had never known another doctor? And if that was so, this familiar GP certainly would have been an influential role model. Perhaps all of us wanted to be just like Dr. Berkman.

Some seniors among you may remember family docs like him and, if so, may think that you *already* know a great deal about tonight's subject — but have you ever heard the expression “Jewish Medicine” used before? And with a hyphen no less! Here's a hint about what's to come: All Jewish doctors *don't* necessarily practice Jewish Medicine as I will describe it here, whereas doctors with other religions and belief systems *may* do so. And if that sounds confusing, it's intentional — so tonight I hope to explain what I mean.

Incidentally, when I refer here to “doctors,” no offense is intended to dentists, podiatrists, Ph.Ds and the like, but this evening I'll be talking exclusively about physicians. Perhaps there's a Jewish doctor among your family or friends, but even if not, I'm sure every one of you at some time has been treated by a Jewish physician. Therefore, like I've just suggested, you may think you already know a great deal about this subject. Right? Wrong!

To prove my point, I'll begin by asking all of you a simple question. *With two exceptions that I'll mention in a moment* — can you name a single Jewish doctor who mainly worked BEFORE 1900? Before the 20<sup>th</sup> century. The two exceptions are Maimonides and Sigmund Freud because *everybody's* heard of them: Maimonides lived mostly in the 12<sup>th</sup> century (1138-1204) but Freud's career straddled the 1900 line and his most important work came during the 20<sup>th</sup> century.

So repeating my challenge — with those two exceptions, can you name a single Jewish doctor who worked before 1900? Since we're zooming, I won't ask for a show of hands, but I've often asked this question to various groups and no one has ever answered correctly. Think about that. Every year at the seder table we vow never to forget, yet whenever I've asked Jewish groups this question I'd get blank looks — Although I can't see your faces on screen, I suspect it would be the same tonight — It's like a *black hole* in our collective memory.

Throughout Western history Jews were drawn to the study of medicine far out of proportion to their numbers. Probably most of you know of the remarkable preponderance of Jews among Nobel Prize winners in medicine. The first winner was the German immunologist Paul Ehrlich in 1908 and during the next century about thirty percent of all Nobel laureates in medicine and physiology came from this people that constitutes far less than 1% of the world's population.

Although we're rightfully proud of all those Nobel Laureates, it's interesting that hardly any seem to have been religiously observant – in fact, a few were apostates. An extreme example was Karl Landsteiner who won the Nobel Prize in 1930 for discovering the major blood groups. He converted to Catholicism and threatened to sue the publishers of "Who's Who in American Jewry" for \$100,000 if they mentioned his Jewish roots because, as he explained, he didn't want his son to learn about his family's shameful background.

Earlier I mentioned Maimonides who served as chief physician to Sultan Saladin in Cairo and, as you can see here (see photo), I met him about twenty years ago in his home town of Cordova, Spain. Although at the time he didn't say much to me, I understood that he considered medical practice to be a religious activity because maintenance of health and preservation of life were necessary so that individuals could pursue study of God and learn how to follow his ways.

During the Rambam's lifetime (Rambam was an often used acronym for Rabbi Moses ben Maimon) medical knowledge mirrored what was prevalent in the culture which back then was Greco-Roman and Arabic science. Maimonides sometimes complained that his day job at court was so exhausting that it left little time for anything else — he often worked late into the nights replying to people throughout the Islamic world who'd solicited his advice in medicine, religion and philosophy. Although today few people remember their names, at certain times and places throughout history Jewish doctors were ubiquitous and sometimes seemed to have a certain mystique. Gentiles often referred to them as "Jew doctors" either out of respect or as a pejorative — here's what Martin Luther wrote in 1543 in a 65,000 word treatise titled "On the Jews and Their Lies":

*If the Jews could kill us all, they would gladly do so, aye, and often do it – especially those who profess to be physicians. They know all that is known about Medicine in Germany, they can give poison to a man of which he will die in an hour – or in ten or twenty years. They thoroughly understand this art.*

If in general Jews were reviled, Jewish doctors often were revered — sometimes even feared. Dozens of popes and crowned heads employed "Jew doctors" in their courts and, naturally, this didn't please their gentile rivals. Those were superstitious times and Jews were thought to be expert in avoiding the Evil Eye; Kabbalists used obscure incantations and the so-called "great art" of alchemy may have been introduced during the second century CE by a woman known as "Maria the Jewess."

During the 16th century there was a legend about the French King Francis I that illustrates my point. This was the same *Francois Premier* who brought Leonardo and the Mona Lisa to France and, not only was he a patron of the arts, but as described in a delightful short story by Balzac (*The Continence Of King Francis The First*) he was a world class *lecher!* There were several variations of the legend but apparently King Francis suffered from an ailment that his doctors couldn't cure — and considering his nocturnal predilections it may have been syphilis.

Because Jews had long since been banished from France, the king asked his cousin and battlefield rival, the Holy Roman Emperor Charles V, to send his best “Jew Doctor.” When the selected physician arrived, in order to break the ice the King jested — “Aren't you tired of waiting for the Messiah to come?” The Spanish doctor wasn't amused because he was a *converso* — a so-called New Christian — and answered that *now* he believed in the *true* God. Well that wasn't what the king wanted to hear and he said, “I took you to be a Jew who in my opinion have a natural ability for cures.”

So without even allowing the Spaniard to feel his pulse or examine his urine, the king dismissed the imposter and sent to Constantinople for a *real* Jew doctor and when the authentic doctor arrived from Turkey, he prescribed his most potent medicine — *not* chicken soup (“Jewish penicillin”) but *ass's* milk! And reportedly King Francis was cured.

Since this story was written less than a century after the supposed event, there may have been some truth to it and although I have my doubts about the efficacy of *ass's* milk, as they say, it couldn't hurt, could it? By the way, Maimonides had written about the benefits of chicken soup for various illnesses and said that “these procedures are verified and their usefulness is clear.”

During the late 18<sup>th</sup> and 19<sup>th</sup> centuries, with Emancipation and then Enlightenment, although some Jews were accepted into European medical schools, that wasn't necessarily good news for certain orthodox Jews for whom the notion of having a doctor in the family was a mark of shame — not pride. For example, when the famous Lithuanian Rabbi Israel Salanter's son left home to study medicine, his family sat *shiva*. After all, upon entering the gentile world, a young man might shave his beard or violate Shabbat or worse. Nevertheless, for most young Jews, if the chance presented itself, the passion previously spent on learning Talmud transferred to secular study and this provided opportunity for upward — and *outward* — mobility.

Various explanations have been offered for why so many Jews entered the medical profession — at least until recently. In very early times some Jews had language skills which allowed them to translate and then transmit Arabic and Greek texts. Some scholars suggested that it was hereditary intelligence or perhaps may have involved Jewish reverence for learning — and, certainly, there was the matter of economic opportunity because Jews frequently were banned from other ways of making a living. But, especially important from my perspective was that in early times most Jewish doctors viewed their work as being a *joint venture* with God — although they did the hands-on work, God was the *true* healer. In 1665 a Roman doctor, Jacob Zahalon, urged all Jewish doctors to recite a poem he'd written at least once a week and here's just a little of what it contained:

*Thou art the physician, not I. I am but as the clay in the potter's hand....I pray that I may discover the secrets of Thy wonderful deeds and that I may know the peculiar curative powers which Thou has placed in herbs and minerals...that through them I shall tell of Thy might to all generations to whom Thy greatness shall come.*

A Jewish doctor's responsibility included being sensitive to the special needs of the most vulnerable and a fundamental precept, called *pikuach nefesh*, was that to save one life is akin to saving the world. Our bodies are *not* our own — we only are tenants — so we're obliged to take care of what doesn't belong to us. But as medical science evolved, a dilemma for Jewish doctors became how to reconcile the past with the present, and one of my favorite examples of this concerned the odyssey of Dr. Tuviah Kohn who was born in France in 1652.

At the age of twenty-six Tuviah entered the University of Frankfurt to study medicine, but because of rampant antisemitism he met there, he moved to Padua which was notably tolerant of Jews. After receiving a medical degree in 1683, he briefly returned to Poland, then picked up again and moved to Greece and later on to Constantinople where he prospered while serving as court physician for five successive Ottoman sultans.

In 1707 Tuviah published a medical encyclopedia called *Ma'aseh Tuviah* (The Work of Tuviah.) Because he wished to bring the so-called "new science" to his compatriots, it was written in Hebrew and here's a little of what he said in the introduction:

*Those who permit themselves to be treated by a physician who has not studied the entire theory of medicine can be likened to those who, when journeying on an ocean, entrust their fate to the winds; sometimes the winds drive the ship to its destination, but more often they cause it to sink. Those who think any kind of practice makes a good physician are sadly mistaken.*

At age 62, Tuviah Kohn retired from the Sultan's court in Turkey and moved to Jerusalem in order to spend his remaining days studying what he called "the crowned texts" — meaning Torah. He wanted to retreat from stressful medical work in favor of quiet contemplation of Jewish wisdom, but Tuviah couldn't have picked a worse time to make *aliya*.

The tiny Ashkenazic community in Jerusalem was being extorted by corrupt Ottoman caliphs and in 1720 their synagogue was burned down with all forty Torah scrolls destroyed. Tuviah did what he could to help, both materially and medically, but after fourteen years of chaos and having spent his entire fortune, he died and was buried somewhere on the Mount of Olives.

Tuviah Kohn recognized that assimilation could be challenging for Jewish students who came from European backwaters so, in order to preserve their identities if they delved too deeply into secular studies, he offered this caveat in his book: "No Jew in all the lands of Italy, Poland, Germany and France should consider studying medicine without first *filling his belly* with the written and oral Torah and other subjects." (I just love that Jew-ish gastric metaphor.)

It's unlikely that Tuviah Kohn achieved the tranquility he yearned for in the Holy Land and his attempt to reconcile Jewish tradition with new science met with only limited success. Indeed his experience was encountered by many others because by his time the "people of the book" were reading different texts — I like to imagine that the *locus* of their learning shifted from the traditional bookstand (*shtender*) to the laboratory bench.

During early times, very few "doctors" of any religion attended medical schools as we now think of them. And in the typical East European *shtetl*, if there was a "doctor" at all, probably he *wasn't* a physician but, more likely, was what was called a *feldsher* -- originally that meant someone who works in the field with shears. Have you ever even heard of a feldsher?

Starting in the 13<sup>th</sup> century, the German and Swiss armies had developed a class of barber surgeons who worked in the front lines – like modern military corpsmen — who in addition to cutting hair and shaving whiskers, practiced blood-letting, applied leeches and glass cups (*bonkas*) and sometimes even performed amputations. The custom spread eastward until in rural Russia feldshers outnumbered trained physicians by two to one; sometimes by five to one. They were licensed by the government and nearly a third of them were Jewish. So if a Jewish mother in the shtetl bragged about her son the doctor — most likely, he was a *feldsher*!

I once had a Christian patient whose name was Joseph Felcher. He was born in Cracow, Poland and told me that sometimes late at night his family was awakened by loud banging on the front door. Someone outside was shouting “Feldsher, Feldsher.” No one in the family had any medical background, but no matter – someone had a toothache or a bellyache and saw that name written outside. My patient also told me that he had an uncle with the same surname who when he was drafted into the Russian army, naturally, was assigned to the medical corps. He was afraid to confess that he had no medical knowledge lest they send him to the front, so he kept quiet — and gradually he rose in the ranks until he was appointed the head of a large army hospital — indeed, one day he was personally given a medal by Joseph Stalin. So, you see, names *do* matter!

With the coming of Emancipation and Enlightenment Jewish doctors had to choose sides and most chose science — so if they appreciated a behavioral framework at all, now it was likely to favor human reason which was based more on results than on relationships. But to my mind, loss of Jewish specificity was unfortunate because modern medicine was becoming increasingly depersonalized and technical. Many books have been written about Egyptian or Chinese or Indian medicine but, as far as I know, until mine appeared in 2006 none specifically talked about what I like to call “Jewish Medicine” — or better, “Jew-ish Medicine.” To be sure, I know of three books that were titled “Jews *and* Medicine.” In truth, if you were to insist on pinning me down and asking, is there now or was there ever a specific Jewish medical approach to warrant such a label? I’d give a classic Jewish answer: well it *depends*.

No doubt, others will disagree with me -- which is fine because I’m not militant on the subject, in fact, I coined that term in order to be provocative. These days, with few exceptions I’m sure that doctors go about their daily work without giving any thought to spiritual matters or religious traditions — or even to the Hippocratic Oath.

Probably most would be reluctant to discuss what factors influence them, but a few have tried. For example, several weeks before his death in 1995, the famous virologist Jonas Salk was honored at a testimonial dinner and here's a little of how he concluded his remarks:

*We are all influenced by our ancestor's tradition and heritage. For me it was not a conscious influence, but there is something in my Jewish genetic or cultural lineage. Part of it may be the Jewish educational tradition. Part may be the Diaspora for nomadic in spirit, we Jews seem to be constantly searching for ways to make the world a better place for all human beings...[Our task] is to take the best from tradition and use it to build a world that is closer to our heart's desire.*

As I've already explained, in early times Jewish doctors saw themselves as doing God's work as in a joint venture, and, by so doing, they drew closer to God. But Hillel added, "If I am only for myself, who am I?" Justice, mercy, humility, social action all are fundamental to Jewish morality, but are *not* uniquely Jewish values – other religions preach the same things and many of these ideas were embedded in secular codes of medical ethics ever since the time of Hippocrates. But the trouble with ethical codes is that they often use abstract terms — words like virtue, altruism, non-maleficence, beneficence — and although they sound good, these ideas are difficult to apply in the real world or at the bedside.

Because it's challenging to encapsulate them in an easily understood way, several years ago I came up with a term that's rooted in Ashkenazic Jewish *culture* — as opposed to prayer or ritual. It's what I call being a "medical mensch" which I believe neatly expresses what I mean when I speak about a "Jew-ish" *approach* to medical behavior as opposed to rely strictly on medical science.

A medical mensch is not necessarily the wealthiest or most prestigious doctor, but they're someone whom you'd trust with your own or your family's life. The word "mensch" means man in German and it is familiar to almost everyone; it's become part of our vernacular. Being a mensch is very much in the eye of the beholder and when someone's behavior is described as being "menschlichkeit", it suggests that their actions speak louder than their words, that they are trustworthy and human in the best sense of that word. Additional qualities that characterize a mensch include humility and empathy and these are traits to which any physician should aspire.



Humanistic values also are fundamental to other religions so you don't have to be Jewish to be a mensch – you don't even have to be a man -- because whether in Yiddish or German, mensch means “man” in the universal sense, like “All men are created equal.” To my mind, medical menschen take the time to listen and they look beyond the patient to the person. Although there are other models of virtue, at least Judaism provides an ethical framework which has stood the test of time and when I use the term Jewish Medicine, it's meant as a standard of behavior rather than a specific body of knowledge and a simple prescription for any conscientious physician, regardless of their religion or gender, is to be a medical mensch — and because such an approach is not exclusive to Jewish doctors, I prefer to qualify the concept by hyphenating *Jew-ish* Medicine.

Value based medicine has been promoted in different ways, but common to all is the notion that doctors are most effective when they go about their daily work within a moral framework. Dr. Rachel Remen, a Jewish pediatrician in California, contends that the root cause of medicine's “crisis today” is that it has lost its meaning. She's written, “We need something stronger than our science to hold on to, something more satisfactory and sustaining ... We need to help all students to find meaning as skillfully as we educate them to pursue medical expertise.”

I'd like to describe a colleague whom I consider to be a paragon of the medical mensch. His name is Rick Hodes and for about three decades he's practiced in Ethiopia where he heads the Joint Distribution Committee's medical operation. Rick had a conventional upbringing on Long Island, attended Middlebury College, then the University of Rochester's medical school and he trained in internal medicine at Johns Hopkins. He always had a hankering to travel and in 1990 he wound up in Ethiopia at a time of civil war and famine.

It was the time of the covert rescue mission called Operation Solomon in which 14,000 natives were airlifted by El Al to Israel in giant cargo planes. Rick Hodes helped supervise the medical aspects of that exodus and then stayed on to work for The Joint and by now, more than 160,000 of these people who trace their origins back to King Solomon's time have made *aliyah*. Only a few are left in Ethiopia but the Joint still provides non-sectarian medical services in Addis Adaba and Rick still heads their operation. He likes to say that when he visits Israel, about 1% of the population there once had been his patients.

“Doctor Rick,” — that’s what his Ethiopian patients call him — has become a beloved figure. He treats an amazing array of sickness, things hardly ever seen in this country and, although he works in the third world, he has a global network of specialists with whom he consults on-line. Under his leadership, the Joint opened a Spine Center which has treated more than a thousand of what Rick describes as “the most distorted backs in the world” — he’s sent more than a thousand of them to Ghana for complex orthopedic surgery and some who couldn’t walk before, now can.

Perhaps most amazing is the fact that Rick Hodes has often boarded orphan teenagers in his own home and — get this -- he *adopted* five of them as his sons in order to get them onto his health insurance plan so they could come to the United States for complex surgery. Rick Hodes once described his mission this way:

*I perceive my role on this planet as helping people at the margins whom nobody else would help. I’m a believer in the Woody Allen school of thought: showing up is a lot of the job. At the end of the day, what keeps me going is knowing that a few more people may be alive because I went to work that day.*

Rick is unmarried and during his years in Africa he became religiously observant. He keeps kosher by being vegetarian and every Friday evening his adopted children and extended family, and visitors from all over gather in his cottage; they stand together in a circle, hold hands and then sing Pete Seeger’s song, *If I had a Hammer*. You all know the last line — *I’d hammer out justice. I’d hammer out love between my brothers and my sisters ---All over this land*. Next they sing *Shalom Aleichem* and then all sit down and enjoy a Shabbat meal.

In my opinion, Rick Hodes is a medical mensch who’s concerned with people as much as with disease and, although few of us can follow his example, we all can aspire not only to talk the talk, but to walk the walk.

Returning now to this part of the world, something that I’ve observed in recent years is a movement of Jewish college students *away* from the medical profession — yes, some of our grandchildren seem to be choosing other professions and opportunities while their places in the medical profession are being replaced by Asians and Indians among others. So recently I’ve begun tracking the *names* of graduates from my own Tufts medical school and have observed a steady decline in Jewish *sounding* names.

Obviously that's a totally unscientific method — indeed, if I'd come across my own last name, NEVINS, it wouldn't have sounded Jewish but when my grandfather arrived at Ellis Island in 1891, his surname was Neviadomsky. Admittedly my methodology is seriously flawed, but it suggests that Jewish names among graduates, at least at my former medical school, are down from nearly 50% in my time to about 6% this year! So are Jewish doctors a vanishing breed? And does it really matter? Incidentally, the most recent data indicates that last year women constituted 55% of incoming medical students and 38% of the physician workforce — of course there's no reliable data about their religions.

I don't suggest that Jewish doctors are smarter or more ethical than others, but if in the future they may be fewer in number, all the more reason for us to cherish our legacy. One reason is that our tradition teaches the importance of being part of something larger than oneself and making the world a better place — *tikkun olam*. Perhaps a late 19th century German physician, Julius Preuss, said it best when he arranged to have inscribed on his tombstone the Hebrew words *rofeh v'lo lo* — which means physician and *not* for himself. I believe that Dr. Preuss had the right idea.

About twenty years ago an NIH survey (Curlin, Arch IM, 2007) reported that nearly one third of primary care physicians believed that their work sometimes was influenced by their own religious beliefs — it was disturbing to me that Jewish doctors lagged far behind their Christian colleagues in this respect. I don't know how to account for that but wonder whether today's doctors practice “Jew-ishly” at least as I've described that? I once had the chance to explain my concept of being a medical mensch to a group of mostly Asian and Indian men and women, and afterwards several came up and told me that they also aspired to be medical menschen.

My concern is *not* with individual doctors but with the *system* in which they have to work. Many practitioners have burned out or sold out and over the last decade nearly 80% of American physicians have shifted away from independent practice and into employed models. Having lost their autonomy, many complain of being hurried and harassed by the bureaucracy, dislike having to employ electronic medical records and all hate constantly arguing with insurance companies. Primary care, as I knew it, is a dying discipline — few enter the field because it requires longer hours for less pay. From the patient's perspective, modern medicine seems to be transforming the trusted healer of yesteryear into a technician who's difficult to see, and often difficult to understand.

At the end of the 19<sup>th</sup> century the great Johns Hopkins physician William Osler advised colleagues to “care more particularly for the individual patient than for the special features of the disease.” Similarly, Harvard’s Francis Peabody famously told his students, “The secret of the care of the patient is in caring *for* the patient.

Rabbi Abraham Joshua Heschel, professor of Jewish Ethics and Mysticism at the Jewish Theological Seminary, sometimes described medicine as being “prayer in the form of deed.” Sixty years ago he received an unusual request from a Presbyterian clergyman Reverend McCleave. He explained that he was writing on behalf of the American Medical Association to invite the rabbi to participate in a symposium titled “The Patient as a Person” that would open the AMA’s annual convention in San Francisco in 1964. The rabbi began his talk by saying that we cannot speak about the “patient as a person” unless we first probe the meaning of a *doctor* as a person.” I’d like to read several long selections from Rabbi Heschel’s speech to the AMA and please pay attention because although it was made sixty years ago his words remain applicable today.

*It’s no secret that the image of the doctor in the mind of the public and in the profession itself is deteriorating...Should the medical profession lose its nobility of purpose, the doctor becoming as status-seeker, it will lose its attraction and only inspire gifted students to prepare themselves for better paid positions in business and industry.*

*Technology is growing apace. Soon the doctor may be obsolete. [In the future] data about the patient may be collected by camera and dictaphone, arranged by typists, proceed into a computer. Then diagnosis and treatment may be established by a machine. Who, then, would need doctors?*

*The mother of medicine is not human curiosity but human compassion, and it is not good for medicine to be an orphan. Physics may be studied as a pure science, [but] medicine must never be practiced for its own sake....*

*Medicine is more than a profession. Medicine has a soul, and its calling involves not only the applications of knowledge and the exercise of skill but also facing a human situation. It is not an occupation for those to whom career is more precious than humanity, or for those who value comfort and serenity above service to others.*

*While medical science is advancing, the doctor-patient relationship seems to be deteriorating. In fairness to physicians, the relationship has changed because medicine has changed. Many of us fear a collapse of the old and traditional esteem for the character of the doctor, an increasing alienation between the healer and the sick. The doctor is alleged by many people to act like an executive, viewing the patient as a consumer. The doctor is not simply a dispenser of drugs, a computer that speaks.*

*[But] what transpires between doctor and patient is more than a commercial transaction, more than a professional relationship between a specimen of the human species and a member of the AMA; it is a profoundly human association, involving concern, trust [and] responsibility....The crisis in the doctor-patient relationship is part of the ominous, unhealthy, livid condition of human relations in our entire society, a spiritual malaise, a disease of which high-powered commercialism and intellectual vulgarity are premonitory symptoms.*

*The mechanics of medicine must not be mistaken for the very essence of medicine, which is an art, not alone a science....In our democratic society, where every individual insists upon being independent and authoritarianism is abhorrent, the doctor is the only person whose authority is accepted and even cherished and on whose judgement we depend.*

In his speech to the AMA Rabbi Heschel never used the word God or specifically mentioned Judaism — it was a universal message that's still applicable today, sixty years later..

Several years ago I had occasion to ask Rabbi Heschel's daughter Susannah what experiences her father might have had prior to that AMA conference that could have influenced his feelings about the medical profession? She suggested that perhaps it was his close friendship with a humble immigrant physician who practiced in an *old-world style* on Manhattan's Upper West Side whose office was more like an intimate living room than a clinic.

Susannah Heschel's anecdote reminded me of my former Bronx neighbor who I opened this talk with — that familiar GP who made house calls late at night in his bathrobe. Although Doctor Jack lacked the technical skills and expertise of present day physicians, my parents trusted his judgement and would never consider making an important medical decision without first consulting him.

To my aging mind, our current system resembles a large orchestra that lacks a conductor and although I'm not proposing that we entirely return to those good old days, perhaps some of its better features could be restored. Perhaps you may agree with me and many of my contemporaries that the malaise that currently afflicts our medical system resembles dismay some of us feel since the recent presidential election and believe that this is a good time to take a fresh look at where we've been, where we are and where we're going?

Our current medical system has become bureaucratized and millions of Americans are dissatisfied with their individual care because doctors seem to have little time to talk to their patients — sometimes even to each other. For one thing, I believe there should be financial incentives for more young doctors to pursue careers in primary care or geriatrics and perhaps recent trends toward eliminating medical school tuitions may prove to be a step in the right direction.

Also I believe that universal coverage — Medicare-for-all — should be implemented here like almost everywhere else. No doubt we'll be hearing more political talk about this going forward. Many Americans believe that our system is the best in the world — and no doubt it is in certain respects — but also it's by far the most expensive and citizens in many other countries live longer and healthier.

Finally, although you may or may not agree with my ideas about “Jew-ish Medicine” that's not the point — as I said earlier, I deliberately coined that term in order to be provocative. At the very least, I hope that I've provided you with some Kosher food for thought about both the past and the present — and perhaps even may have helped fill that “black hole” in our collective memories about Jewish medical history.

ATTACHED BELOW IS THE RECORDING OF MY TALK. (CLICK ON PHOTO)

