

To the uxorious state

Opinion

I wrote a letter about women in combat and it was published in September, 1992 in the Cleveland *Plain Dealer*. While some considered the letter humorous and innocuous, others thought it obnoxious. Yet, I received many referrals from military organizations as well as good-natured chiding from most of the women colleagues with whom I work. A few really wimped out and a pejorative “woman’s touch” were evident at times, as may be the case in this experience to be described.

Some seven months after the letter was published, on April 28, 1993, an “enforcement investigator” from the Board of Medical Examiners of the State of Ohio appeared in my office. She was in my waiting room where a colleague asked if he could be of any assistance and she gave him her card. He indicated to her that I was here and then gave me the card. To her surprise, I welcomed her into my office and she expressed mild disbelief that I could give her some time. (I believe that she had come by the office previously when I was not there and the same colleague had given me the card but, being pressed for time as usual, I threw it away thinking it was just a pharmacy salesman or nothing of significance). I indicated to her that a patient was late and I was running early. She clarified that she was investigating me because of the letter about women in combat, copy of which she held in her hand. She expressed concern that “I might have some detrimental effect” on “children and families” under my care.

I asked if some formal complaint had been registered and she indicated that such was not the case. She volunteered concurrence that “muscle power” did have a bearing at times in combat, but she was puzzled about my statement concerning “even a child could help in some tasks” in a military operation. We spoke briefly and she shared “off the record” (she said that twice) that she did take offense to the letter. I asked if she had seen Ms. Murray’s letter which had provoked my letter and she said, “No.” I indicated I would respond with Ms. Murray’s letter to her and I would be providing other materials to help clarify my position as well as my non-dangerous type of practice for children and families. I indicated my need to stay fairly close on schedule and we shook hands and she left. The total time was probably 7 to 10 minutes. She left me her card indicating that she did not work out of the Columbus office but preferred that I send materials to her here in Cleveland.

Busy, I got around to putting together materials for her on May 3rd, but I noticed that her card only contained the Columbus office and phone number. So, I called (at my expense) the Columbus office asking for her local Cleveland address so that I could send her materials here in Cleveland as she requested. I gave my voicemail number so that she could just leave me the address. On the morning of May 4th, a message was received from her on my voicemail indicating that she would call me in the afternoon to try to tell me how to get material to her, but puzzlingly, she did not leave her local address. On May 6th, I received a voicemail message from her asking if she could possibly pick the material up on a Thursday, but then she went on to instruct me to let Columbus know when she could pick up the material. So I called Columbus on May 7th (first trying to reverse the charges because “why should I pay for all this?”) and then told the Columbus secretary

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Samuel A Nigro M.D

Retired, Assistant Clinical Professor Psychiatry, Case Western Reserve University School of Medicine, USA

Correspondence: Dr. Samuel A Nigro M.D., Retired, Assistant Clinical Professor Psychiatry, Case Western Reserve University School of Medicine, 2517 Guilford Road, Cleveland Heights, Ohio 44118, USA, Tel 216 932-0575, Email sam@docnigro.com**Received:** April 19, 2014 | **Published:** June 16, 2015

to let the investigator know that I was running into some delays and would have the packet of material available for her on Wednesday, May 19th at 10:30 A.M. in my office. On May 10, 1993, I received a phone message from her that she will “pick up the correspondence” on the morning of May 19th and there “is no need to call Columbus.”

This whole experience has brought into focus the function of the Ohio Medical Board and many concerns come to mind. Some of these concerns are explained in the 4-page letter I wrote responding to the investigator. Even though it focuses on me and women in combat, my letter questions strongly the propriety of the Medical Board responding to a complainer over “a letter to the editor” being transposed into the ability of one to practice medicine. (If copies of my response do not accompany this, write to me for a complete set, if desired).

Other important questions are: Just how entrenched has the Medical Board become? How far afield have they gone? How heady are they in the negative effects of power contamination? How far beyond the mission of the Board do they allow themselves to go? Has Ohio law unwittingly created a medical retirement clique which has become a menacing, oppressing, predatory, retaliatory, better-than-thou, isolated and therefore out-of-touch with all but them, inflated self-important, arbitrary, non-practicing, pompously defensively arrogantly feigning “concern” cabal in an ivory tower? Has Ohio law created a police state conducted by the Medical Board? Has Ohio law created a monster which shields and kingdomizes Medical Board members so they can act out their private vendettas and their own public policy preferences under the guise of “concern”? Feigning concern, cannot Board members do anything to anybody? And what about the First Amendment in my case? Are they above the Supreme Court too? Does a dissident, like me, have any rights at all? After all, I merely wrote a letter and it was published. It seems to me that several recommendations need to be presented:

1. The composition of the Medical Board should be randomly selected from active, good-standing members of the Ohio Medical Association every two years staggered, such that the membership changes completely every several years. There should no longer

be the cronyism nepotism style of political appointment for this Board. No one should hold a position on the Board for more than one two-year interval in their lifetime. This is a corrupting experience and it deprives the public of Board Members' medical practice.

2. The executive administration of the Board, likewise, should change every six years with a clean sweep of administrators, investigators, secretarial staff, etc. Entrenchment beyond a six-year interval is quite simply dangerous as this experience shows. Power corrupts, without a doubt.
3. The Physician Impairment Program should be continued to be supported with members of disciplines present likewise being active for two-year intervals at most in one's lifetime. The consultants, too, can be corrupted and I believe the psychiatrists, if any, involved in this experience of mine, have also been co-opted into a disingenuous state. The only exception might be the director who could have a six-year term.
4. No person should be on the Board if retired (this should not be a retirement home), if ever convicted of a felony, if continuing medical education is not completed, and if they do not spend one thousand patient hours per year in active clinical practice, even during the time on the Board. Something must be done because this is a run-amuck, semi-fascist experience from my perspective.

I wrote a letter and it was published. Because of lost objectivity and lost commonsense discernment, because of the snooping secrecy, because of the obvious scheming, because of the misuse of ethics as a Procrustean bed to force conformity with the latest socio cultural cant, because of the contrived "medicalization" of a non-medical topic, because of the grandiose ignoring of fundamental American rights, and because of the abandonment of the supervision of the practice of medicine for pseudolegal fictions and political propaganda, it is difficult to conclude anything other than the Medical Board and consultants have abused their power and discredited themselves. Is there any other conclusion possible?

With which member of the Board should I clear my next letter?
About which topics do I need permission to write?

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None.

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