Six years ago I wrote favoring a national single-payer health care system. Since then, little has changed—and given the content of President Bush’s State of the Union address and subsequent campaigning, it seems that nothing positive can be expected from this administration.

Shame on us for allowing 47 million people to go without health insurance and countless others to be underinsured. Meanwhile, health care costs inflate in a category by themselves—well above the general inflation rate.

Some facts that might clarify this problem:

We are the only major nation without government insurance.

According to the World Health Organization, we do not have the best healthcare in the world—we are far down the list.

An authoritative article in the New England Journal of Medicine on March 6 discloses that, on average, Americans get mediocre care.

The cost of medical care per capita here is much higher than in other nations.

The people of Canada, for example, are happy with their health care, as are many Americans who have moved there for medical care. Canadians are guaranteed healthcare. Americans are not.

The new federal drug benefit program is poorly understood, unwieldy and fashioned to enrich drug companies.

The public relations efforts of the insurance and drug companies have succeeded in scaring average Americans away from single payer through an enormous expenditure on advertising and lobbying.

Family bankruptcy is most commonly related to healthcare debt, and now big corporations such as the automotive industry may suffer this fate.

Polls show that the majority of our population and their physicians support national health insurance.

Programs such as Dirigo are stop-gap initiatives serving few in need and engulfed in controversy. The insurance and drug companies must relish this diversion while lining up at the trough.

Activists usually favoring universal health care and single-payer coverage have compromised their goals by supporting Dirigo—perhaps feeling a few slices are better than a loaf that is still out of reach.

The new “solution” offered by the governor in Massachusetts has a fatal flaw—no money.

Our government already demonstrates its administrative ability by paying over 50 percent of our entire health care costs.

Virtually everyone opposing single-payer already has insurance and is not faced with inadequate coverage.

Need for single-payer health care growing

The list of reasons why the current system and its attempted fixes are inadequate continues to grow.

The cost of medical care per capita here is much higher than in other nations.

The cost of medical care per capita here is much higher than in other nations.

Some facts that might clarify this problem:

We are the only major nation without government insurance.

According to the World Health Organization, we do not have the best healthcare in the world—we are far down the list.

An authoritative article in the New England Journal of Medicine on March 6 discloses that, on average, Americans get mediocre care.

The cost of medical care per capita here is much higher than in other nations.

The people of Canada, for example, are happy with their health care, as are many Americans who have moved there for medical care. Canadians are guaranteed healthcare. Americans are not.

The new federal drug benefit program is poorly understood, unwieldy and fashioned to enrich drug companies.

The public relations efforts of the insurance and drug companies have succeeded in scaring average Americans away from single payer through an enormous expenditure on advertising and lobbying.

Family bankruptcy is most commonly related to healthcare debt, and now big corporations such as the automotive industry may suffer this fate.

Polls show that the majority of our population and their physicians support national health insurance.

Programs such as Dirigo are stop-gap initiatives serving few in need and engulfed in controversy. The insurance and drug companies must relish this diversion while lining up at the trough.

Activists usually favoring universal health care and single-payer coverage have compromised their goals by supporting Dirigo—perhaps feeling a few slices are better than a loaf that is still out of reach.

The new “solution” offered by the governor in Massachusetts has a fatal flaw—no money.

Our government already demonstrates its administrative ability by paying over 50 percent of our entire health care costs.

Virtually everyone opposing single-payer already has insurance and is not faced with inadequate coverage.

About the Author

Richard Dillihunt, M.D. (e-mail:dillihunt@aol.com) is a resident of Portland, ME (www.dillihunt@mainemall.com)