With good cause for pride, medical scientists can review the accomplishments of 1964—as well as several years preceding it—as being among the most significant in the history of mankind. New techniques, new insights, new discoveries have preserved life, reduced its hazards, and extended its duration. Beginning with new ways to lower the rate of infant mortality, medical science has whittled away at mortality in surgical procedures, controlled certain types of life-changing cancers, and generally enabled people to look forward to a much longer life expectancy.

As a result of the spectacular advance of medical science in the past decade, we can expect more people to live and more people to live longer. But what of the people whose lives are saved and lengthened? Are they being preserved to eke out a miserable existence in conditions of overcrowding, economic uncertainty, and in spiritual and intellectual darkness?

Some of the social problems we face are derived from the fact that we are still working under a system that was developed when our material resources was beyond the limit of our imagination. Many of our laws are reflexes of a time when a man forty-five years of age was a senior citizen, and society’s right of control was reinforced and extended by the natural operation of the conditions of life. Now, however, with the conditions of life changed by the advance of science, should there not be another look at the role of our laws affecting the behavior of a population that has changed, if for no other reason than by its sheer numbers?

The tendency to turn back to the “good old days” is always with us. There is a substantial number of citizens in the United States who think that to set the clock back by fifty years would contribute some kind of a solution to a problem they refuse to define. They fail to face the fact that as medical science has changed, so has the reality of daily existence, and that new solutions must be found for problems that have arisen from the progress that has been made under the successful solutions that were found fifty years ago. If nothing else, the spectacular advance of medical science in the past decade forces us to face to the future and honestly confront the consequences of our progress.

What then, can doctors do about the consequence of our own success? Shall we call a halt to medical progress on the premise that we are interfering with a balance of nature? Shall we return to the theory that he who survives is mysteriously “fit” to survive? Most medical scientists would reject some ideas without discussion, for the rationale of science is progressive, outwardly developing. Science can’t be made to regress.

But scientists can take a greater interest in the social affairs of their communities, and it is in the possibility of the scientist becoming socially involved that the salvation of our modern society lies. The logic of scientific method need not be confined to the laboratory, nor is the human condition such that it can’t be studied to find a workable truth on which to predicate a satisfactory control.

If the result of medical progress isn’t to be poured down a cesspool of social and economic calamity, scientists must look beyond their immediate fields of operation and consider the entire environment that they are creating. As they have a stake in the future, they have a responsibility to speak for a total vision of the good life—not one freed from physician ills but beset with moral and social rot.

Plato wrote that the ideal republic of virtue depended on philosophers becoming kings and kings philosophers. Today more than ever our social salvation depends on scientists becoming statesmen—or politicians, if you like—becoming scientific.

—D.N.G
The mission of *WMJ* is to provide a vehicle for professional communication and continuing education for Midwest physicians and other health professionals.

*WMJ* (ISSN 1098-1861) is published by the Wisconsin Medical Society and is devoted to the interests of the medical profession and health care in the Midwest. The managing editor is responsible for overseeing the production, business operation and contents of the *WMJ*. The editorial board, chaired by the medical editor, solicits and peer reviews all scientific articles; it does not screen public health, socio-economic, or organizational articles. Although letters to the editor are reviewed by the medical editor, all signed expressions of opinion belong to the author(s) for which neither *WMJ* nor the Wisconsin Medical Society take responsibility. *WMJ* is indexed in Index Medicus, Hospital Literature Index, and Cambridge Scientific Abstracts.

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