

Dr. MELTZER. No, the word "medical" is a much more powerful word.

Mr. JACOBS. You do not rule it out, thought, categorically?

Dr. MELTZER. No, I would like to see it in there.

Mr. JACOBS. If the Chairman does not object.

Mr. SISK. I might state to the gentleman from Indiana that all four of these gentlemen here are members of the local psychological association. They all came up here together to testify. And so we were questioning them en masse.

Dr. CUMMINGS.

Dr. CUMMINGS. My name is Dr. Jonathan W. Cummings. I think I would object to the use of the word "disease", to protect all parties to this, in the object that we are trying to achieve. The word "disease" is probably very much in the gray area that the Chairman mentioned before, and I think, although I do not know a lot about writing legislation, I would imagine, wherever possible you would try to write legislation which will not have to be gone over every once in a while. I think that to achieve that, you would try to get the wording which is the more general rather than the more specific.

I think that Dr. Meltzer has said that the use of the term "medical" covers very adequately all of those aspects of "psychological" and "psychology" whichever might come up for issue. The important point is in terms of protection for the public. The bill as presently written allows for the delicensing or the punishing of anyone who is found guilty of not referring to others for appropriate kinds of help whenever they have gone beyond the bounds of their competence.

And because of this, then, I would certainly most highly recommend that we retain the word "medical", because it encompasses the whole thing, and having encompassed then, then we do not tie ourselves to this, because there are large groups of psychologists and psychiatrists who believe this term is quite meaningful, and I do not believe they worry about this. It is a very difficult one to define legislatively, and the like.

Mr. JACOBS. I might say that there are two schools of thought on the question of specificity in the draftsmanship of public law and public discipline. I think it was Huxley who wrote in the "Brave New World Revisited" that it is "the soul of wit may become the body of untruth," and I happen to subscribe to that view. It does not hurt to try to be as accurate as possible and, therefore, as specific as possible, particularly when you are dealing with a technical discipline for public service. I may be a little off in my philology, but "medical" suggests an organic matter to me, and the good doctor has just testified that "mental disease" is not restricted to the organic. Therefore, I renew my question as to whether the term "medical" is sufficient to cover the concept of "mental disease" which should be, as I understand it, the exclusive province of a psychiatrist. What would your response be to that?

Dr. CUMMINGS. It would be that I think that I would restate what I said, that the very fact that there is so much uncertainty that exists in the definition of the term "mental disease", I think that we would not be gaining actually by including it in the legislation. This is just my personal opinion.