

Marx on Radiology's Future

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The future of radiology: what would Marx say?

To avoid becoming inbred and sterile, radiology needs to be fertilized by ideas from other fields, such as philosophy, political science, and economics. The interactions between radiologists and those they serve are powerfully shaped by such ideas, which often bear important practical implications for the ways in which health care is organized, financed, and evaluated. Radiologists who wish to ensure that the interests of their patients are well served and to function as effective contributors to conversations on these matters need to be well informed, and the quality of their contributions will depend on the quality of the ideas they have to offer. For this reason, it is vital that radiology invest in the intellectual development of its members.

Toward this end, radiologists need to be challenged to look at their work through the lenses of great minds in human history, particularly those whose ideas have powerfully shaped their understanding of the nature and purpose of the work radiologists do. The purpose of such encounters is not to indoctrinate learners but to get them to reexamine and, in some cases, rethink their understanding of radiology and its role in the larger community. Absent such reflection and conversation, they will be poorly armed for ongoing debates over health care practices and policies. Simply put, radiologists' contributions are inevitably limited by the quality of intraprofessional reflection and conversation and encounters with great thinkers can significantly raise this bar.

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To gain a deeper sense of how this might work, let us turn to a particular writer, one whose ideas are often regarded as among the most influential of any thinker's ideas in the 19th and 20th centuries. This is Karl Marx, whose economic analysis of history offers provocative insights into many of the current challenges facing radiology. The point in examining Marx's perspective is not to argue that he was correct on all points. Rather, it is to make more apparent the value of reading, reflecting on, and discussing the works of serious thinkers. Even when radiologists end up disagreeing strongly with the ideas they have encountered, they can gain valuable insights into their own deepest intuitions and experiences by assaying them against works of genius.

Karl Marx was an indisputable genius. Born in Prussia in 1818, he studied at the universities in Bonn and Berlin and then worked for a newspaper in Paris, where he met his collaborator Friedrich Engels, before being exiled and moving to London. He spent the rest of his life in England, dying in 1883. Two of his most significant works were the *Manifesto of the Communist Party* (1848, written with Engels) and *Capital* (the first volume of which was published in 1867). Marx's writings are often invoked in accounting for the histories of the two of the largest nations in history, the Soviet Union and the People's Republic of China. Yet the degree to which the Soviet program of Lenin and Stalin and the reign of Mao in China were true to Marx's vision continues to be a hotly contested topic.

To begin with, Marx believed that economics is the key to understanding the course of human history—past, present, and future. In *German Ideology*, he and Engels described the organization of their thought as “essentially economic.” Human beings relate to one another in many ways—in terms of gender, race, ethnicity, creed, and so on—but the key form of relationship in Marx's view is the economic one, for it explains not just what people think and feel but what they actually do. From his perspective, the course of history can be understood in terms of the relationship between two classes of people—the exploiters and the exploited. By definition, Marx thought economic power rests with the exploiters. As a result, other

social institutions such as the state, the business sector, and even religious organizations tend to serve the interests of those in power.

Because economics holds the key to history, it is only natural that over time, human life itself should be increasingly understood in economic terms. Simply put, those in charge view and value others primarily in terms of the money they can generate. Success and failure are defined increasingly in terms of income and wealth, and decision making is dominated more and more by economic projections. Every walk of life, including the practice of medicine, comes to be regarded as just another means of earning a living. With time, it becomes less and less jarring to hear physicians referred to as health care providers, to see the profession of medicine treated as a sector of the health care industry, and to hear patients referred to as customers or consumers. Everyone, in short, becomes either a consumer or a producer.

In *Wage Labor and Capital*, Marx describes labor itself as merely “a commodity that the worker has auctioned off to another.” In this kind of environment, both the work that health professionals do and the health professionals themselves begin to be treated as commodities. How many bodies (full-time equivalents [FTEs]) will it take to staff the new outpatient center and what is the going rate for a board-certified physician? The employer, whether a group practice of radiologists, a hospital, or a health care system, tends to regard each of its employees as parts of a larger machine of production. There is little or no concern for workers themselves, especially as their idiosyncratic qualities, which should be blunted as much as possible, as they may adversely affect the rate at which they produce. What matters is not the distinctive interests or abilities of the health professional but the throughput, efficiency, and error rates associated with the production process.

From the point of view of the exploiter, it does not matter whether workers have any input or even understanding of the product they are producing or the service they are delivering. Similar to workers on Henry Ford's assembly line in the River Rouge plant of the Ford Motor Company in the late 1920s, the

only thing that matters is whether each worker's particular step in the overall production process is completed correctly and well. As long as this happens, the production line can keep humming along. Each worker, whether a welder or a physician, is merely an instrument of labor whose real mission is simply to increase the capital of the people who stand to profit most from it—those who control the means of production, such as shareholders, board members, and executives.

The more the production process can be fashioned according to an industrial model, the less the knowledge, skill, and experience of each individual worker count for. In Ford's case, for example, the manufacture of automobiles was converted from a form of craft work, in which the skill set of each worker made a substantial difference, to an assembly line model in which each worker needed to perform just a single task in rote fashion day after day. As requisite skill levels dropped, it became more and more feasible to treat each worker as a cog in a machine. When one failed to perform, another could be immediately plugged into the position. Health professionals essentially buy into this mentality whenever they talk about colleagues in terms of FTEs.

From the viewpoint of the employer, who from Marx's point of view generally represents an exploiter, the goal of the production process is to extract as much value as possible from each laborer. Predictably, this approach led to the rise of trade unionism in the first half of the 20th century. Workers had deep concerns about the hours, conditions, and wages associated with their work, but they also felt increasingly alienated, not only from their work but from their humanity. In many cases, workers could recall a different way of working, in which they were once able to see what they were producing as a reflection of their distinctive personality and to see the difference it was making in the lives of others. The assembly line made this largely impossible.

In short, workers were no longer able to see themselves in the products they produced. In *Estranged Labor*, Max writes.

The worker's labor exists outside him, independently, as something alien to him, and it becomes a power on its own confronting him. It means that the life he has conferred on the product confronts him as something hostile and alien.

Each step in the production process could be performed by any number of people, and it made absolutely no difference to the final product. This first form of alienation is the alienation of workers from the product of their work. In health care, the greater the degree of separation that employers introduce between health care professionals and the patients they serve, the more complete this alienation will become. Physicians will begin speaking of their work strictly as a job, something they do to earn a wage, and will cease talking about patients, colleagues, and even themselves as human beings, at least with respect to the work they do.

Likewise, health professionals tend to become increasingly alienated from the process of work.

Symptomatic physicians derive no satisfaction from actually working from day to day, manifest no sense of satisfaction or fulfillment from a job well done, and seem to care only about the money they are earning. In many cases, they begin to equate their professional worth almost entirely with the amount of money they make. This stems from their sense that they are able to express very little of their own identity in work, treat themselves and each other as mere tools of production, and serve no purpose beyond themselves except enriching their employer. Physicians talk more and more about what is being extracted from them rather than what they are contributing.

It does not take long before health professionals are also being alienated from each other. For one thing, they see themselves increasingly as competing against one another for a fixed pool of wages. They begin to act as though the only way one physician can make more is by forcing others to make due with less.

They see one another primarily in terms of their incomes, and those who make less feel increasingly bitter

toward those who make more. Writes Marx in *Human Requirements and Division of Labor*, “Each tries to establish over the other an alien power, to find satisfaction of his own selfish need.” Soon, medical specialties find themselves being played off against one another in ways that tend to keep the house of medicine both divided and weak. Medicine is seen not as a helping profession but as just another means of making money, and the social relations between physicians and their patients and colleagues are treated as nothing more than economic.

Soon, physicians begin to act as though they are the money they make and what they own. They measure themselves in terms of their compensation packages, the sizes of their houses, and the extravagance of the automobiles they drive. In doing so, they think they are asserting their worth and independence, but in fact they are merely contributing to their own subjugation to an economic system that does not even see them. They are like paintings at an art auction, appraised not for their beauty but the price they bring, and no one even looks at the canvases. At this point, the commodification of the health professions is complete. Physicians see themselves as economic actors whose product happens to be health care, rather than health professionals who need to know something about economics.

To repeat, the point of this portrait is not to argue that this Marxist portrait of medicine is correct. Rather, it is to look through Marx's lens at what is happening in health care today to see how it might equip academic physicians and other health professionals to better discern what is taking place and what it ultimately implies about the future of medicine. What Marx sought to provide was not so much a program for historic progress but a way of understanding and critiquing human events, so that people could operate with a clearer sense of what is truly at stake. Marx held that much of the suffering in life is unnecessary. Because it is the product of human decisions, what is needed to make the world a better place is to gain a deeper understanding.