tive to students even though they provide less income than elite specialties like cardiac surgery.

However, Kassebaum notes that about 20% of private school graduates heading into surgical and subspecialties cite debt as a strong motivator for their choices. Gener-

US goes public with list of health care's deadbeats

With US medical graduates facing an increasing debt load because education costs, some have found themselves in deep trouble. A recent announcement by Health and Human Services (HHS) secretary Dr. Donna Shalala indicates how deep these troubles can run. Last January the US government became so fed up with being ignored by doctors and other health professionals who have refused to repay their government-guaranteed Health Education Assistance Loans (HEAL) that it released the names of 1402 professionals who were being disqualified for payment by Medicare or Medicaid. They have also been referred to the Department of Justice for possible litigation and enforced collection.

The HHS publicized all the names and the amounts owed on the Internet (**www.defaulteddocs** .**dhhs.gov**) and during its first 7 weeks the site attracted more than 40 000 visitors. The site, and supporting information from HHS, indicates that defaulters now owe more than \$155 million in educational debt through the HEAL program alone. Of the 1402 defaulters, 737 were chiropractors, who accounted for more than \$72 million in bad debts. Significantly, the list does not include more than 1000 defaulters who have begun to make satisfactory arrangements to repay their loans.

Some of the debts are world class. Not only does a Chicago physician owe \$411 000, but an osteopath in Hawaii was in hock to the government for \$430 000. In fact, 17 health care professionals owe between \$362 000 and \$435 000 each.

The Internet nudge may "encourage" some repayments, because it allows casual browsers to search the site by name, state of last known residence, discipline and school of graduation. And it offers the kind of information that newspapers love. ally, though, the current linkages between debt load and specialty choice are not compelling.

Altruism, not money!

It appears that today's young students have accepted that medicine won't provide the same financial benefits as in the past. Each year the AAMC surveys first-year students and new graduates. The 1996 results indicate that the most powerful motivators for entering the profession were intellectual challenges, the chance to educate patients, the opportunity to make a difference and the chance to exercise social responsibility. High incomes appeared to be a minor motivator — 81% of first-year students felt that medicine will not be as financially rewarding as it used to be.

However, there are some interesting clues that altruism and "wanting to make a difference" may not be popular factors in the real world. Most observers agree that the place where American doctors can really make a difference is in rural areas and small towns, yet only 6.7% of 1996 graduates intended to practise there — an astounding number because 15.6% of the responding graduates came from rural areas or small towns. More than two-thirds of 1996 graduates wanted to live in cities with at least 50 000 residents, with 25% preferring cities of 500 000 or more.

So what does the future hold for American medical students. Dr. Robert Jones, director of institutional and policy studies at the AAMC, does not see much relief ahead for students caught in the current money crunch. He says the curriculum reform movement under way in the US and Canada "offers little solace to those concerned with mitigating the costs of medical student education" because it will still cost between \$104 000 and \$135 000 per medical student per year to cover all faculty and other costs related to a single student's undergraduate education.

"Only by a net reduction of the medical school curriculum might costs truly be reduced," says Jones. But he says that won't happen. "The medical knowledge base continues to increase, as does the range of information and skills required of medical students."

Even the most motivated students do not have a divine right to be physicians, and in time economic realities may dampen some students' passionate desires. For the time being, though, they just keep on coming, and debt be damned. **?**