

An example of Problem Solution Order (Manuscript)

Family Medical Histories: A Proven Lifesaver

Specific Purpose: To persuade my audience that they should make a family medical history.

Central Idea: Because so many diseases have genetic origins, a family medical history is often of vital importance in helping to ensure proper medical diagnosis and treatment.

Method of Organization: Problem-Solution

Introduction: The introduction consists of paragraphs 1-3. The story of Gilda Radner in paragraph 1 is an excellent attention-getter and provides a striking illustration of why a person should know her or his family medical history. In paragraph 2 the speaker indicates the importance of the topic and relates it to his audience. Paragraph 3 provides a clear preview statement of the main points to be covered in the body of the speech. All in all, this is a fine introduction except for its lack of a statement establishing the speaker's credibility. Although it is clear from the rest of the speech that the speaker has done a thorough job of research, he should have made reference to his research in the introduction.

1 Actress-comedian Gilda Radner, alias Roseann Roseanna Danna as she's well known to long-time Saturday Night Live fans, gave us laughter and enjoyment for decades before her death at the age of forty-two from ovarian cancer. She suffered through a year of intense pain before her doctors finally diagnosed the problem. If detected early, the survival rate for ovarian cancer is 85 percent, but that drops to 15 to 20 percent if the cancer spreads. Doctors and Radner's husband, Gene Wilder, believe she died a premature death that could have been prevented had she known that her grandmother, aunt, and a first cousin all suffered from the same disease.

2 The importance of knowing your family's medical history is becoming increasingly urgent, as more and more diseases are found to have genetic links. Researchers at the National Institutes of Health are working to isolate all of the body's 50,000 to 100,000 genes and match them to specific diseases, a project they hope to complete by the year 2004. It may be only a matter of time before scientists locate the genes that cause such common illnesses as diabetes and high blood pressure. But unfortunately, time is not on our side. Hereditary diseases are a crisis potentially affecting everyone in this room.

3 In order to better understand this, we'll discuss the scope of this threat, the medical community's reaction or inaction, and finally indicate an easy solution to help you deal with the threat of hereditary diseases.

Body: There are two main points in the body of this speech. The first deals with the need for family medical histories and is developed in paragraphs 4-9. The speaker begins by showing the large number of diseases with genetic links (paragraphs 4-5). He then explains that the medical community has not placed as much importance as it should on family history in diagnosing and treating patients (paragraphs 6-9).

4 First we'll look at the problem hereditary diseases pose to all of us. The number of diseases with a genetic link is staggering, and these are only the diseases scientists know have a hereditary component. U.S. News and World Report states that if a member of your family had ovarian cancer, your risk of contracting the disease increases by 20 to 40 percent. If a family member had breast cancer, your risk increases by up to 50 percent. And if lung cancer runs in your family, your risk increases by 300 percent.

5 The U.S. News and World Report article gives several examples of diseases found to have genetic links—diabetes, stroke, mental illness, alcoholism, allergies, arthritis, sickle-cell anemia, and high blood pressure. Even birth defects and a predisposition for miscarriages can be inherited. Researchers at the University of Utah found that men under age forty in families with histories of heart attack had twelve times the risk of early heart disease, while women from such families had eight times higher risk.

6 Now you may be thinking that your doctor is your best chance of early detection, but unfortunately the medical community has put us at even greater risk, accentuating the problem.

7 The problem lies not only with the severity of the diseases themselves, but also with an historic belief by the medical community that family history is of minimal importance. Doctors have traditionally taken meager medical histories, failing to recognize their importance. Ask yourself if your doctor updated your family history during your last physical. Most likely he or she did not. This leaves a gaping hole in your diagnosis.

8 The New York State Journal of Medicine describes a recent study in New York City designed to determine if data on the family history of cancer patients were being recorded by hospitals. They found that only four of sixty-four hospitals indicated familial recurrence of cancer on medical charts, and no hospital accrediting agency required that this information be recorded.

9 Another study by the same researchers investigated 200 cancer patients under-going treatment in an oncology clinic. These cases showed numerous examples of hereditary cancer syndromes, but their clinical charts demonstrated that the family history of cancer had either been completely omitted or reported as "negative," despite substantial evidence to the contrary. There are doctors, of course, who do take into account hereditary factors, but unfortunately they are still a small minority, as reported by the Hereditary Cancer Institute at Creighton University.

The second main point presents the speaker's solution and runs from paragraph 10 through paragraph 13. After an excellent transition, the speaker notes that he will focus in his solution on what individuals can do to help doctors provide accurate diagnoses of genetically based medical conditions. He then explains, in paragraphs 11-13, how to create a family medical history. His explanation is clear, specific, and detailed enough to give the audience a good sense of exactly what is involved. The speaker also used a striking visual aid in this section of the speech so his listeners could see what a family medical tree might look like.

10 Having heard the problems, we must now look at some solutions. Obviously, one step is for doctors to take better account of medical history in order to ensure that we receive quick treatment and proper diagnoses. But what I want to focus on is what we as individuals can do.

11 You can help your doctor and yourself by making a medical family tree. To assist you in making a medical family tree, U.S. News and World Report offers this chart as a guide. List all medical conditions contracted by close relatives—especially parents, siblings, grandparents, aunts and uncles, and cousins. Include important information about each relative in the space provided, such as age, height, weight, personal habits, and any medical conditions they have contracted.

12 In addition, list the age when each relative contracted that condition; this will inform your doctor of the best time to begin testing for a disease or to begin preventive medicine. Don't hesitate to overelaborate your medical family tree. Trained physicians may see patterns that you cannot.

13 Getting this information is not that difficult. Simply speak to your relatives and include every medical condition they recall having. Not only heart disease and high blood pressure, but even such things as migraines and allergies should be included. Even if you think your family is in good health, a little probing may uncover hidden problems. Consider the few hours required to make a detailed medical family tree as an investment in your health future.

Conclusion: The conclusion consists of paragraph 14, in which the speaker summarizes his main points and reinforces the central idea by referring to the UCLA School of Public Health's 50 Simple Things You Can Do to Save Your Life. He then gives the speech a sense of psychological unity by alluding back to his opening example of Gilda Radner. The closing line is somewhat dramatic and ends the speech by once again relating the topic directly to the audience.

14 Today we learned what an important issue and just how big a threat hereditary diseases are and how you can protect yourself by making a medical family tree. The first item mentioned in the UCLA School of Public Health's book 50 Simple Things You Can Do to Save Your Life is to know your family history. Had Gilda Radner and her doctor known her family's medical history, she might be alive today. The knowledge you gain by investigating your family's medical history may help you fend off future problems and possibly save your life.

Supporting Materials: The speaker uses one extended example—the story of Gilda Radner in paragraph 1, which introduces the topic and dramatizes the need to know one's family medical history. The story of Radner's tragic death hangs over the entire speech and is mentioned again by the speaker in his conclusion.

Unfortunately, the speaker did not have time to present a second extended example—this time of someone whose life had been saved by creating a family medical history. Although this would have been very helpful in demonstrating the practicality of the speaker's solution, it was more important that he include the opening example. If a speaker has time for only one extended example, as is frequently the case in classroom speeches, he or she can usually get the greatest rhetorical mileage out of the example by presenting it in the introduction.

The speaker uses statistics more than any other kind of supporting material. In

paragraph 1 he mentions the survival rates for ovarian cancer as part of the Gilda Radner story. In paragraphs 4-5 he gives figures from U.S. News and World Report and researchers at the University of Utah to support his point that hereditary factors play an important role in many diseases. In paragraphs 8-9 he presents the results of two studies published in the New York State Journal of Medicine to illustrate the fact that doctors often do not include family history as part of their patients' medical records.

The only instance of testimony occurs at the end of paragraph 9, where the speaker quickly cites the Hereditary Cancer Institute at Creighton University in support of his claim that only a small minority of doctors take hereditary factors into account when diagnosing and treating patients. Not only would a stronger citation have been more effective here, but the speech as a whole would have been improved if the speaker had included more testimony in support of his position. Although he uses a fair number of statistics, he should have provided at least a couple quotations from highly qualified medical experts to bolster his view of the problem and of the practicality of his solution.