Before getting railroaded by a Barack bullet train on health care, let's have a White House concert with Medicare Mick wailing wisely, "You can't always get what you want."

This first in a series on health care addresses how blue in the face rhetoric or ruby red slipper clicking will not deliver us from this very real crisis. A non partisan, informed national and hardnosed appraisal of needs, wants and costs is crucial.

Critics of our system have Pavlovian salivation at the mention of the World Health Organization ranking us 37th in health care among 191 civilized nations despite being the most expensive.

However, careful methodological analysis of the five WHO major score categories reveals problems and an inherent bias toward "socialized" health care, independent of quality. For example, removing the homicide and accidental death rate from MVA's gives Americans the best life span. Another measure actually includes the quality of hospital linens. The "Financial Fairness" score favors government intervention. The "Equal Distribution" measure makes it possible that when a majority gets excellent health care and a minority only gets "good" care that system will score lower than a nation with uniformly "poor" health care.

The WHO rankings confirm what we knew. We are very expensive, demanding of choice and first rate in technology, quality, innovations, patents, Nobel Prizes, training and research.

However, the cost crisis is real and health care is not equally distributed. The monstrous imbalance in our business plan between entitlements and income will bury us. Our checkbook is overdrawn about a dozen trillion dollars. Hope seems to be the method wherein all of this reengineering will somehow, like maggots on a wound, clear away the dead and reveal American tissue ready to heal. Our debt is five times our deficit. As our nation grays, entitlements under Social Security, Medicare and Medicaid will hemorrhage our heritage.

Health debt is a leading player in bankruptcies. Insurance premiums have risen 117% and 6-8 times faster than personal income this decade. The proportion of GDP devoted to health care is over 16% and growing rapidly. Government accounts for almost one-half of all health care spending with rising premiums. Medicare and Medicaid spent \$818 billion in 2008 and are projected to reach \$1.7 trillion by 2018. Americans have less choice.

Today there are only 3.3 workers for each Social Security beneficiary and we pay more than we bring as beneficiary numbers increase. Emergency room care and malpractice awards are too common and expensive and defensive medicine costs are obscene. Technological and therapeutic advancements are unparalleled but cost and availability are wildly disparate.

Physicians' inflation-adjusted incomes have dropped over ten percent in a decade, medical school admission requests are falling and complaints of non clinicians rationing and directing care resound from every practice venue. The American model thrives on physician autonomy; remove it and the doctor dies. Businesses offering health benefits have fallen 69 percent. The implementation of non punitive practice guidelines is slow as is enrollment in national clinical trials. Despite massive technological advances and safeguards, we are buried in paperwork rather than informed by instantly available digital data.

Americans prefer choice and such systems seem to have higher quality of care. Central government single payer schemes are more based on volume and cost containment than quality outcomes and access to top technologies. They involve rationing of care, cause treatment delays and engage non clinician's involvement in health care decisions while inviting fraud and abuse.

Members of Congress need our help to negotiate this conflict of wants and needs and dogmatism will be as deadly as ignorance in this national debate. Perhaps before each committee meeting Congress might crank up the mighty Sir Mick to remind all," You can't always get what you want, but if you try sometimes, you just might find, you get what you need" Get informed and engaged

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