

WOMEN AND TOBACCO

C Chollat-Traquet World Health Organization, Geneva, Switzerland (1992) 128 pages. Price US\$23.40

There has never been an epidemic like the tobacco epidemic. It differs from all others in being knowingly sustained by individuals who seem to be completely indifferent to the fate of their fellow human beings. As general practitioners we are confronted every day with the consequences of tobacco addiction and we all have an awareness that an ever increasing number of our young female patients are becoming addicted to the drug.

This book is written by an epidemiologist at the World Health Organization and addresses the problem of women and tobacco in a global context. Dr Chollat-Traquet, with the advice of a large number of eminent colleagues from many different countries, examines patterns and trends, reviews medical outcomes and discusses strategies for prevention on an international scale. All of this is done in a lucid and succinct style. Her global view is a far cry from the general practitioner's dilemma of how to manage the young girl who attends the surgery and smells strongly of cigarettes. But if we are to be effective counsellors we must also be knowledgeable ones. A heavy responsibility therefore devolves on us.

This book should be on the shelf of every teaching practice and will prove to be an excellent aid for a tutorial.

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PLANNING PRIMARY CARE. A DISCUSSION DOCUMENT

Occasional paper 57
Denis Pereira Gray
Royal College of General Practitioners, London (1992)
67 pages. Price £9.00

Health services in the United Kingdom have had a major shake up in the past two years with the purchaser—provider split and the emergence of fundholding general practices and trust hospitals. The new family health services authorities and the regional health authorities have new responsibilities for primary health care.

This paper has been produced to inform the regional health authority of the current state and trends in general practice in the south western region of England. It is a discussion paper rather than a planning document. It contains a number of clearly argued beliefs which the author and his 53 advisers hold strongly, for example that 'the general practitioner must become the most comprehensively educated of all doctors in the health service'.

Fundholding by general practitioners is addressed in a clear statement of the advantages of the experiment, and the fallacy of the 'two tier' argument. A major fault of British general practice is that it is 'multi-tier', varying in quality from very good to seriously unacceptable. The author highlights the dilemma of the general practitioner being both fundholder and patients' advocate, but gives no answer to the problem.

This document represents an enormous amount of work in trying to achieve consensus in a region with a population of over three million, and over 2000 general practitioners. It will present the regional health authority with a clear picture of what is going on, but without stronger arguments about costs and benefits, it may not convince hard-headed general managers of the virtues of investing in primary health care ahead of coronary bypasses and pacemakers. That is the next stage, for which we can look to the south west for a lead. All general practitioners who have an eye on the future could benefit from reading this paper.

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YOUR ULTIMATE CHOICE: THE RIGHT TO DIE WITH DIGNITY

Voluntary Euthanasia Society Souvenir Press, London (1992) 126 pages. Price £6.99

The preface to this selection by the Voluntary Euthanasia Society states that 'It is not the intention of this book to argue the case for and against euthanasia'. In fact, the whole book argues strongly for euthanasia, not merely for patients with terminal illnesses but for a much wider group of conditions. The many cases quoted in support of euthanasia can be answered by good medical practice rather than by killing the patient; there is no mention of the tremendous advances made in the care of patients with chronic and terminal illnesses in the last 20 years.

The brief history of the Voluntary Euthanasia Society is worth reading and makes it clear that it is, and always has been, its aim to get euthanasia legalized. The advanced directive or living will seems to be one way of getting legal involvement in the doctor—patient relationship. All general practitioners should read this so as to be prepared; they may unexpectedly be handed this document. In the chapter 'The situation worldwide' it says, referring to the Swiss society, that 'it is prepared to take legal action against doctors who ignore the directive'.

The dying patient's bill of rights is typical of the book's tendency to mix the pro-euthanasia message with quite reasonable propositions. Sixteen of the rights are non-contentious, medically or ethically. The last one is 'The right to decide when I am ready for death and to have that decision acted upon'. This means that general practitioners have a corresponding 'duty' to oblige. Read this book and be forewarned.

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