

SCREENING AND SURVEILLANCE IN GENERAL PRACTICE

C R Hart and P Burke (eds) Churchill Livingstone, Edinburgh (1992) 416 pages. Price £49.50

Screening for disease is becoming an increasingly familiar aspect of health care, with new procedures and protocols regularly being presented and debated in the medical press. Screening and surveillance in general practice provides a welcome overview of the subject; its 41 contributors mainly comprise general practitioners who have practical experience of delivering this care in a variety of settings.

The first section of the book covers the general principles of screening, including its history and economic and ethical aspects. Organizational and administrative issues are considered, including the use of computers and health teams. Subsequent sections review screening and surveillance techniques in a more specific, age based, structure. Topics covered range from preconceptual and antenatal care through childhood issues such as development surveillance, to surveillance in the elderly, including the identification of mental illness and functional impairment. Cardiovascular, gastrointestinal, urological, metabolic and breast and cervical cancer screening are discussed, as well as a miscellany of lifestyle issues such as alcohol and drug abuse. Attention is also paid to occupational and ethnic factors in screening.

Despite such a wide range of topics covered, there is a comprehensive discussion of the relevant aspects of Wilson's original criteria for screening for disease in relation to specific areas and programmes, as exemplified by the chapter on screening for cervical cancer. In doing so, the book fulfils its aim of providing a valuable resource to which individual practices can refer when considering screening programmes in the light of local resources and needs.

A Z KADRI General practitioner, Woolston, Southampton cise in its writing, which is a tribute to its overall editorship.

Its subtitle Balint revisited is apt. Balint's original book The doctor, his patient and the illness, revolutionized general practice and its influence on medicine as a whole. Its principles are now integrated into undergraduate and postgraduate teaching and inevitably, 40 years on, there has been much misunderstanding of what Balintism truly means. Too often it is equated with group teaching and an understanding of the emotional needs of patients but it is much more than this. It explores, and helps general practitioners to understand, their own negative feelings in many consultations. These feelings can either be dealt with by denial that they exist or analysed and understood with a view to offering patients a greater understanding of their own problem. It shows that the hospital principle of therapy, to which we are first exposed in our training, that diagnosis precedes treatment, has to be adjusted in general practice to the recognition that management can be more important than diagnosis. An over-vigorous pursuit of a diagnosis can leave a patient in a therapeutic vacuum. This book attempts to understand and answer negative feelings.

The book also looks back on some of the earlier publications involving Balint research. It demonstrates that qualitative research is as important as quantitative and a new dimension must be found to measure this qualitative aspect of our work rather than rely on the traditional quantitative specialist approach to research work.

It has been said that hearing is to do with the ears, listening with the mind. Those who are hard of hearing can be helped with a hearing aid and those of us who are hard of listening will find this book helpful. It should be read by all general practitioners who aspire to a greater awareness of the hidden agenda in every consultation which otherwise might become no more than a daily chore to be endured between the health promotion clinics which have overtaken our discipline in recent years.

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THE DOCTOR, THE PATIENT AND THE GROUP: BALINT REVISITED

E Balint, M Courtenay, A Elder, S Hull and J Paul Routledge, London (1993) 162 pages. Price £11.99

This slim volume is the latest work arising from the continuing work in general practice inspired by Michael and Enid Balint in the 1950s. As in education, there are the three Rs by which a book is judged, namely readability, relevance and writing. This book encompasses all three and although the difference in styles of each chapter reveals its multi-authorship, each chapter is equally readable, relevant to general practice and clear and con-

LONDON AFTER TOMLINSON: REORGANISING BIG CITY MEDICINE

Jane Smith (ed) British Medical Journal, London (1993) 127 pages. Price £8.95

Through the winter weeks of 1992-93, the British Medical Journal did us all the considerable service of extending and deepening the debate which followed the publication of Tomlinson's Report of the inquiry into London's health service, medical education and research. This was achieved by commissioning a series of articles from a variety of experts about the likely impact of the report on their particular field of expertise. The result was