

PERSONAL POINTS OF VIEW

BOOKS AND THE GENERAL PRACTITIONER

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IT HAS ALWAYS BEEN CHASTENING for me to think back to my student and school days and to realize how much reliance I placed on reading the text and reference books and how relatively little I use books today. Surely this is wrong and I should be using books almost as much now as in the past to read up my cases and to keep abreast of progress.

Why read?

I imagine that it is possible, and some doctors pride themselves on the fact, that there is no need to look at a book after qualification—surely this is the greatest self-condemnation and a betrayal of one's profession. But why read? As Osler said, we must be perpetual students and go on studying and learning for our patients' sakes let alone our own personal professional esteem. Unless we continue our student habits from the start and maintain them through the years it becomes easy to slip and to take the easy way and become so confident and self-satisfied that we assume that no further study is necessary; and in general practice it is by no means impossible to become so deluded.

We must therefore all inculcate habits of regular reading of books and journals and we must make this a regular daily and weekly part of our professional routine. I reckon to read my current *British Medical Journal* and *Lancet* by Tuesday and my *Practitioner*, *Medical World* and *College Journal* within two weeks of their arrival. I read to keep up-to-date and to refresh and revise.

Over the years my reading techniques have changed and I have become more discriminating. I read the summaries of all papers—this is why the summary of any paper is in my opinion the most important section. I read the papers that interest me in full and tear out and file them if I feel they are likely to be useful later. I do not have any journals bound—I use this selective filing system instead.

Books—I buy lots of books but do not necessarily read them from cover to cover. Some are intended for reference and others for revision and pleasure and some for sentimental reasons—such as collected papers of Sir James Spence and Lord Brain and Sir A. Bradford Hill.

How much do we read?

It is sad to report the abysmally bad reading habits of general practitioners. There are 23,000 British general practitioners in 10,500 practices. Books specially written for general practitioners sell around 500–1,500 per edition. This means that less than ten per cent will buy books although a few more will read them. I guess that no more than one-half the general practitioners read their *British Medical Journal* or *Lancet* with any regu-

larity. Unfortunately they get by.

Books and journals

Medical books are of four types—textbooks that we know from student days—books that, if successful run through 10–20 editions—such as Conybeare, Price, Illingworth, Hamilton Bailey and Gray. Reference books such as various encyclopaedias, French's Index and the special regional books on skins and so on. Monographs on more special subjects such as Morris's *Use of Epidemiology* and my own *The Catarrhal Child*. Then there are other books such as general reviews, year books and collected papers. All these have their places on my bookshelves. We must buy these books and I suggest that each practice set aside at least £10 for books and a further £10 for journals each year.

Journals

For me the essential journals are the *British Medical Journal*, *Lancet* and *Medical News*, the 'weeklies'; *Medical World* and *The Practitioner* the 'monthlies'; *The Journal of the College of General Practitioners*, bi-monthly; and *Medical Care*, quarterly. I read all with great enjoyment and profit.

Buy or borrow?

We must all build up our personal and practice libraries but we must also use the libraries. I usually borrow a new book from a library before I buy it. I use libraries a lot for references and for reading up background papers for research and other writing, but they have a more limited use for me than my own collection.

To summarize

We owe it to ourselves and our profession to become good doctors and we can do so only by reading of medical progress in books and journals. Our reading habits must be formed in our early days in medical practice and unless an active effort is made we will tend to slip and give way. We must decide what we want to read and read regularly and selectively. We should all build up our own libraries and keep them up-to-date and in constant use.

A STUDENT PRIZE ESSAY

A FATAL CASE OF CARCINOMA IN A YOUNG MAN **Public Welfare Foundation Competition Prize-winning Essay 1964**

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THIS IS THE TRAGIC CASE of Mr George H., who was born in Poland on 23 April 1927 and prematurely died from carcinomatosis on 10 December 1963. He was 36 years old. With his parents and two sisters, Mr H. lived