

Editorials

THE PILL AND THROMBO-EMBOLIC DISORDERS

ON 4 April last the Minister of Health, Mr Kenneth Robinson in a written reply to a question by Mr Kenneth Lomas, M.P. for Huddersfield (West) stated, "A series of investigations has been undertaken by the Committee on Safety of Drugs, the College of General Practitioners, and the Medical Research Council in order to examine the possibility that the use of oral contraceptives might be associated with an increased risk of thrombo-embolic conditions.

"The Medical Research Council has recently reported to me that the results of these studies suggest that a woman taking such contraceptives incurs a slightly increased risk of developing thrombo-embolic disorders but that the risk is small and less than that which arises from the ordinary pregnancy and delivery which these contraceptives are intended to prevent. It must, moreover, be realized that all women of child-bearing age are at risk of developing these conditions whether or not they are taking oral contraceptives—as are men of the same age group." The Minister further stated that the risk of thrombo-embolic conditions arising from the taking of oral contraceptives could not be precisely quantified at the present time but other data were being collected with this object in mind and that the report of the preliminary studies would be published as soon as possible. The Committee on Safety of Drugs, he wrote, did not feel justified in recommending the withdrawal from the market of contraceptive pills on the grounds of thrombo-embolic risk. These two last statements aroused considerable disquiet in the medical press. On 8 April the *British Medical Journal* stated that "doctors who have the task of advising women taking oral contraceptives or contemplating doing so have now been placed in a position of some difficulty. They will remain so until the detailed results of these investigations are published". This was well understood by those working on this subject but certain preliminaries have always to be considered before a paper can appear in print. When the Medical Research Council and the College of General Practitioners had collected sufficient evidence to arrive at a statistically viable conclusion they were bound to inform the Minister's advisers. Once the information was in the hands of the Minister he considered that it was of so great importance that it should be made public. At this

stage neither the Medical Research Council nor the working party of the College of General Practitioners had completed the preparation of the reports on the data on which their findings were based. The College's evidence is now presented in a paper from the Records Unit and Research Advisory Service on page 267. The material collated by Dr Richard Doll and his colleagues is being published in the *British Medical Journal*. It will be appreciated that this work is in its early stages and the present report can only be regarded as preliminary. The planning of studies of this nature in general practice on a sufficiently large scale is time consuming and expensive.

Both the working party and the Medical Research Council are to be congratulated on the speed with which they have completed the first part of their labours. Practitioners should now be better able to give informed guidance to women on the still vexed question of oral contraception. At present there seems to be no justification in withholding the prescription of the pill provided the recipient is made aware of the very small risks entailed.

MEDICAL GROUP PRACTICE DESIGN

ONLY THOSE who have designed practice premises know into how many traps they may fall. Architects can give guidance in the problems of drainage and water supplies, and they will help with the size of the rooms, the type of flooring and the heating; they will be able to say where the lavatory ought to be. With few exceptions they know little of the work to which the premises will be put. For these reasons we welcome the publication of a working manual on the designing of medical group centres.*

It has been the policy of the College through its Practice Organization Committee to explore the problems of general practice step by step. When it became apparent in 1965 that capital from public funds might be infused into general practice it seemed important to get together information on general practice buildings, and, with the aid of a grant from the Nuffield Provincial Hospitals Trust, studies were undertaken jointly with the National Building Agency. This manual is the result. In the foreword Lord Platt writes that its publication

... shows that there is a substantial body of practitioners who believe that their future lies not in further shedding of their work on the hospitals but in a

* *Design guide for medical group practice centres*. London. National Building Agency; College of General Practitioners. 1967. Pp. 64. Illustrated, with many plans and working drawings. Price £1 1s. 0d.