

or two weeks, are arranged to suit practitioners' individual requirements. Doctors eligible under Section 48 of the N.H.S. Act (1946) may claim expenses from the Ministry of Health for attendance at these courses. Whole-time or part-time clinical attachments in particular departments can sometimes be arranged. Special arrangements are made for doctors who have not been practising for a period and now wish to return to active work.

Applications for clinical attachments (normally two weeks) in the following departments will be considered:

- Obstetrics:* Mr J. A. Stallworthy and Mr E. A. Williams, resident attachments, Churchill Hospital.
- Psychiatry:* Dr G. O'Gorman, Warneford Hospital. Dr B. M. Mandelbrote, Littlemore Hospital, outpatient attachments.
- Paediatrics:* Dr H. Ellis and Dr B. Bower, clinical attachments.

Enquiries to the *Director of Postgraduate Medical Studies, 43 Woodstock Road, Oxford.*

University of Sheffield

Refresher courses for general practitioners

- July 8-13 *Obstetrics*, Jessop Hospital and Northern General Hospital, Sheffield.

Applications to the *Postgraduate Dean, Faculty of Medicine, The University, Sheffield 10.*

Correspondence

Congress

Sir,

The 47th Biennial Congress of the Medical Association of South Africa will be held in Pretoria on 6-12 July 1969. Preliminary plans are well advanced and a particular feature of this congress will be a colourful and extensive section on general practice or family medicine.

We aim to make it lively and practical with short papers, panel sessions, research communications and ample time for discussion. Suggestions will be most welcome as a guide in the planning of the programme, and we are anxious to have a list of potential speakers and subjects quite early.

Visitors from overseas will probably have an opportunity of visiting the world-renowned Kruger National Park during the week following congress, and we hope to arrange tours of the gold mines and other places of interest in the Johannesburg-Pretoria area. We will probably also arrange a visit to newly-developed areas to see the development of health services there. It can be arranged that colleagues from overseas stay with local general practitioners during their visit to Pretoria, should they so wish.

The sub-department of general practice of the University of Pretoria also wishes to announce that a seminar on family medicine is to be held

at the Medical Faculty of the University on 4 and 5 July 1969. This seminar will deal with vital educational and administrative aspects of family medicine. It should be a stimulating introduction to congress week.

We most sincerely hope that members of the Royal College of General Practitioners will find it possible to attend our congress.

H. F. Verwoerd Hospital,
Pretoria, S. Africa.

HOWARD P. BOTHA.

Medical education

Sir,

The symposium on Education for General Practice held in Manchester was very stimulating and exciting.

Professor Anderson rightly stressed the need to act quickly on the proposals of the Royal Commission on Medical Education.

It seems to me that the most important action to take involves making new regulations as follows:

1. That new principals in general practice appointed after 1977 must have attended an approved training course, and must hold a qualification from the Royal College of General Practitioners.

2. That new principals appointed between 1974 and 1977, who have not attended an approved course, should get a somewhat lower rate of remuneration than those who have.

Training posts as envisaged in the Royal Commission's report must be made available as the demand for them arises. This demand may not be very great until the increased numbers of students now being admitted to medical schools begin to qualify in the 1970's.

I feel we should do all in our power to persuade the British Medical Association and the Ministry of Health to agree to new regulations on these lines.

Wilmslow.

D. T. PRICE.

Coeliac Society

Sir,

Coeliac disease (and the associated gluten-sensitive enteropathies) are increasingly being diagnosed. As a consequence coeliac disease which was at one time a rare disease has now become a relatively common one.

It is felt by several coeliac sufferers that there is a need for a society to look after sufferers of this disease. Its aims would include authoritative guidance on gluten-free diet, giving sufferers simple information about the condition, as well as endeavouring to promote further research in this disease.

I would be grateful if any of your readers who have patients with coeliac