

There are specially printed sections for recording colour codes, blood groups, special investigations, cervical smear dates, x-ray results, etc. As well as trying to organize the medical record to make it simpler for the general practitioner's use, I have tried to avoid over-direction of recording.

There is only one serious objection to this new double-pocket wallet and that is its size: 9 in. high and 6.5 in. wide. It will not go into the usual metal drawer cabinets.

If any practitioners wish to have some of these wallets perhaps they would get in touch with me.

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Routine induction of labour at term in domiciliary obstetric practice

Sir,

I should like to compliment Dr White on his most interesting report on routine induction of labour in the September number of the *Journal*, but at the same time add a note of caution.

Dr White's practice of routine induction is

a brave attempt to overcome the problem of the personal obstetrician and midwife being available at the time when their patient goes into labour.

It is very tempting when he suggests that an obstetric practice can be so well organized as almost to eliminate the unexpected and the night work, but such ideas must be carefully scrutinized. It is in the routine use of oxytocin buccal tablets that Dr White is most liable to criticism. His own results are good, but in his factual paper he seems to make light of the dangers in such a way that others with far less experience may be encouraged to use this product which can still be responsible for rupture of the uterus and foetal death.

His report mentions some of the hazards such as the way in which pupil midwives and relatives were liable to amend the instructions. Other practitioners who have used oxytocin outside hospital can recount similar experiences. A doctor who would follow his example should think carefully about these risks. The makers of buccal oxytocin tablets certainly recommend this product for hospital use only, and have the support of the Safety of Drugs Committee (Dunlop) on this.

Warrington.

P. O'BRIEN.

Book reviews

Patterns of performance in community care.

G. F. REHN, B.A. and F. M. MARTIN, B.A., Ph.D. London. Published for the Nuffield Provincial Hospitals Trust by the Oxford University Press. 1968. Pp. 235. Price 21s. 0d.

This is a report of a PEP study of community mental health services in different areas of the country. Three contrasting areas are chosen for intensive study, and what in particular emerges is the variety of concepts of functions and aims, and of standards of performance, that at present exists in this country. The aims and work of the mental welfare officer come particularly under the authors' searchlight; they can vary from the old 'duly authorized officer' to the MWO who is also a psychiatric social worker and whose aims are therapeutic. One of the areas under discussion is Worthing, an area of special experiment, where hospital psychiatrists, through domiciliary visits and a day hospital, do much work ordinarily done in other areas through MWOs.

The authors regard the local authority social work services as perhaps the crucial element in community care, and they do not discuss the role of the family doctor except as a referring agent. They view the division of the National Health Service, especially the separate organization of hospital and local authority services, as a brake on efficient organization and deployment of scarce resources. The authors have provided facts and figures in an area not well covered previously, and within the limitations they have imposed on themselves they have, with an elegant lucidity, given valuable background information for future planners.

Having reviewed this book, the reviewer would like to amplify what he means by "within the limitations they have imposed on themselves". By avoiding consideration of the role of the family doctor, not only do they ignore his role in the early and after treatment in the community of the psychoses and organic mental illnesses, but they also ignore his role in the treatment of the less