

been better spent on others; for example, thyroid function, cervical spondylosis and pathological investigations could have been omitted. Instead, the use of diagnostic radiology might be included. The organizers of one of the courses for medical secretaries could help to point the way to the correct use of these valuable ancillaries. As the number of patients increases the doctor's efficiency must improve by delegation.

One of the greatest values of the course is that by discussion it is possible to clarify problems and simplify methods of working. To find, even occasionally, that ways learnt by trial and error seem logical to others, is a heartening experience.

Most general practitioners have particular interests. The course showed what can be done in general practice and what is the ideal. Under present conditions one has to do what is necessary and to be selective about the rest.

During the two years of this course the meeting-place moved from the board-room of the hospital to the new buildings of the post-graduate centre. Here the friendly academic atmosphere welcomes not only this group, but numerous others.

Perhaps the highest commendation that can be given is that attendance was enthusiastic and remarkably constant. This makes it likely that wherever this type of course is tried, it will meet with success. This would be the greatest tribute to the organizers who have given up so much of their spare time.

Maidstone.

HUGH VAUX.

Chronic neurotic patients in general practice¹

Sir,

I read this article with interest and wonder if it is possible to discover how many of these chronic cases are really 'cancer apprehensives'.

In the course of a year a number of people visit our office or write to us expressing their *fear of cancer*. Some say that they cannot talk to their doctor about cancer for fear that he will laugh at them. Others say that they visit their doctor frequently but he never tells

them that they have *not* got cancer. Obviously it is not easy for the general practitioner to spot these 'cancer apprehensive patients', but if they do and have time to talk to them about cancer, often they will rid themselves of a tiresome chronic neurotic patient.

MALCOLM DONALDSON,
Honorary Director,
Cancer Information
Association.

6 Queen Street,
Oxford.

REFERENCE

¹Sylph, J., Kedward, H. B., and Eastwood, M. R. (1969). *J. roy. Coll. gen. Practit.* 17, 162.

10th International Congress of general practitioners

Sir,

In reply to a letter to the editor in your edition of November 1968, concerning the ability of the interpreter of the 10th International Congress on General Practice, organized by the International Society of General Practice, in Salzburg (Austria), September 1968, I should like to make the following point:

The lady interpreter of 1968 was certainly fluent in English but had sometimes some difficulties in finding the adequate manuscripts because in an international congress with speakers from all parts of the world the sequence of speakers did not always strictly follow the programme. In all other respects the interpreter was very competent.

On behalf of the International Society of General Practice I should like to welcome as many participants from the U.K. as possible to our 11th International Congress on General Practice, this time in Igls near Innsbruck (Tyrol, Austria), which will take place from 18-21 September 1969.

A very good simultaneous translation service English-German and vice versa has been arranged.

FRITZ GEIGER, M.D., LL.D.
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