

Editorials

EPIDEMIOLOGICAL DECAMERON

AN outbreak of communicable disease, bubonic plague, occurring in Italy in 1348 led to the collection and publication by Boccaccio of a number of interesting papers by the lords and ladies of the city of Florence. Interest and concern with the prevalence of non-communicable disease in the United Kingdom in 1970 led to the collection and publication by the British Council of a series of papers by the lords and ladies of British epidemiology. The tales in this are well and clearly told by the Pampineas and Philostratuses of today, a group of colleagues well known to one another and universally regarded as representing the best of our orthodox epidemiology. The selection of papers, too, gives a good indication of the lines on which they are thinking and working.

Epidemiology is a subject in which there is no immediate and obvious benefit. This is in contrast to patient care where, if all goes well, there is a visible end-product in the recovered individual. Perhaps this may in part explain the paucity of resources devoted to the subject in general, the concept of prevention based on knowledge being a harder sell than the idea of cure of suffering. Orthodox epidemiology, then, finds a place in certain universities, in departments of social medicine by this or some similar title, and in research institutions of established eminence maintained by government funds on not unlimited budgets.

In these departments the academic influence is inevitably strong and there is temptation to concentrate on problems which are remote from those of medicine as it has to be practised and it is interesting that in this compilation¹ a number of papers are on earthier themes than usual. Childhood respiratory disease, hypertension and the epidemiology of some common conditions are among subjects with which the writers are concerned. So far so good. The practitioner may hope to find help with some of his pressing problems in papers on these themes but his hopes will not be wholly fulfilled.

A possible reason for this is the preoccupation of the epidemiologist with death—something which the citizens of Florence sought to escape. Deaths of children from respiratory diseases and of adults from strokes following hypertension do undoubtedly occur. The fact of these deaths is undeniable, the cause of each may be equivocal, and the frequency of their occurrence is small. For every child who dies of respiratory disease there are thousands who experience and recover from respiratory affections every year. For every hypertensive who dies as a direct result of hypertension there are many who die from other causes, perhaps after many years of hypertensive life. The epidemiologist in the isolation of his department is beginning to recognize this and to seek sources of data on morbidity which he can interpret in practical and useful terms.

The breadth and range encompassed by the storytellers is wide, from international studies of functional psychoses and respiratory disease to geographical distribution of cancers in Africa and cardiovascular disease in Britain, the last of these relating deaths and arterial sclerosis to localities of hard or soft water. This study is not without rele-

vance to work in which our College is concerned, a field in which morbidity studies may in the end prove even more revealing.

It is not surprising that in a small country the circle of research workers should be limited and that there should be a tendency for mutual quotations of references between the departments, an inbreeding relieved by evident awareness of work in progress in comparable academic institutions in the USA. Work done outside the established departments and relevant work in other sciences than medicine seems under-represented in the extensive bibliographies which are a feature of this compilation. The defences of orthodoxy were penetrated by this journal in one instance, by a paper concerned with morbidity in a particularly sensitive context, that of the oral contraception pill.

On the eleventh day the lords and ladies of Florence returned to the city, exchanging the remoteness of romance for the realities of the plague. Perhaps an effort is required of orthodox epidemiology also, that it apply itself to matters of immediate concern as well as to those less frequently encountered. There are problems in plenty which urgently await attention.

REFERENCE

1. *British Medical Bulletin*. 27, 1. Jan. 1971.

THE MEDICAL RECORDING SERVICE

THE Third Conference On the Use of Audiotape in Medical Teaching was held on 14 October 1970 at the Royal College of Obstetricians and Gynaecologists, and its proceedings have recently been published by the Medical Recording Service Foundation from Kitts Croft, Writtle, Chelmsford, CM1 3EH. It is one of the signs of the great success of John and Valerie Graves that Kitts Croft is an internationally-known address. Slides and tapes are now lent by the service all over the world and do much to foster international goodwill as well as postgraduate education.

The first conference was held in 1963, and the second was a tenth-anniversary assessment of progress and an attempt to find new and better ways of fulfilling what had become a very worth-while task. The cost to the Graves must have been enormous, and if they felt at any time like complaining, it must be evident that they were too busy to do so. Backed by a devoted staff, which has increased to keep pace with the growing activities of the service, and helped so far as was possible from college resources, the work has flourished.

The service is non-profit-making and is not exclusive to members of the College. Any doctor, para-medical worker or teaching organization anywhere in the world may make use of its services. Those who are interested in the production of taped teaching material cannot do better than read the verbatim report of the conference, and those who wish the service well may feel it appropriate to remember the Medical Recording Service Foundation which finances it.

A thought should also be spared for Smith, Kline and French, Ltd, which financed the service through its developing stages, and thus made a most generous contribution to the evolution of the Royal College of General Practitioners of which the Medical Recording Service is an important part.
