## Experience and knowledge in general practice

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Three major agencies operate in the education of a general practitioner, pregraduate education, postgraduate education and experience in general practice itself. Since knowledge of medicine is a doctor's main stock in trade, it is important to discover what knowledge is required to perform his task efficiently and how his knowledge varies during his career in practice. The latter could best be discovered by setting long and detailed written and oral examinations. However, it would be difficult to obtain the co-operation of enough practitioners to make it worth while, so recourse must be made to theory. This creates uncertainty.

## Medical knowledge

It is reasonable first to ask what we mean by medical knowledge. There is considerable variety in its nature and it is necessary to have some understanding of it. Aristotle stated that all knowledge can be stated in the form A is B, and despite the complexity in the nature of grammar which Chomsky (1968) has demonstrated all statements can be modified until they adopt this form. The unit of knowledge in the brain has been given a name (the mnemon) and probably involves a change in conduction at a synapse. Its precise nature remains uncertain. We can suppose that the statement A is B means at a cellular level that a connection is made so that when the group of cells whose activity represents the idea A is stimulated, the group of cells representing the idea B is stimulated in turn by a conducted impulse. We can also suppose that all logical thought is of the form, if A is B and B is C, then A is C.

By this means we can suppose that knowledge builds itself into long chains, but that furthermore these chains intersect to make networks. Where chains intersect, we can suppose the statement to have special significance and indeed the brain appears to attach a particular pleasure principle to closing a ring in a network. This may explain the pleasure gained from solving chess problems or crossword puzzles, often called the 'aha' situation. The intersections have another property, namely that they are readily remembered, so that we can see the advantage to the brain obtained by attaching pleasure to the discovery of particularly valuable information and to its preferential retention.

Regarding knowledge generally as having the nature of a reticulum, we can appreciate that the degree to which the reticulum is developed varies considerably from one branch of knowledge to another. French irregular verbs have little reticulum and have to be rote learned. Algebra, at the other extreme, is a network where the branches of the tree are axioms and the nodes are theorems. We can state, hopefully perhaps, that most branches of knowledge are at an imperfect state but all aspire to the nature of an algebra. Further support for the network hypothesis comes from the use of mnemonics or rhyme to supply an artificial network structure where a natural one does not exist. One objection is that if knowledge is like this, what about knowledge about knowledge or even knowledge about knowledge? However, since they will all be networks the problems raised by recursivity are negligible.

Thus much medical knowledge is rote learning, for example, the rash of measles whose appearance, if forgotten, cannot be deduced from first principles. There are also fairly substantial parts of the subject which are worked out logically and form a network. Nevertheless there appears a certain scholastic bias which prevents the formulation of simplifying generalizations such as the relation between infection and pyrexia.

### The importance of repetition

When the student qualifies, he possesses a considerable amount of knowledge of a very heterogeneous character all of which will have an approximately exponential decay. This will be affected by the degree to which the knowledge has a structure and to the amount of reinforcement it receives from practical experience and postgraduate education. In general, learning is proportional to the logarithm of the number of repetitions so that in the absence of any other

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factor one can expect that the knowledge a practitioner has of a particular case is approximately proportional to the log of the number of times he has seen it.

General practice involves many tasks besides diagnosis; however, the quality of the diagnosis determines the quality of the treatment that is subsequently given. Furthermore, although the process of diagnosis may involve logical deduction it is predominantly a process of pattern recognition and therefore a function of the amount of knowledge possessed by the diagnostician.

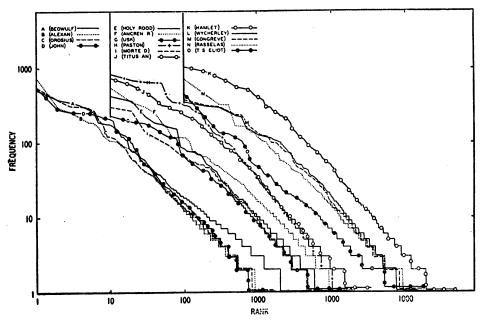


Figure 1. Beowulf to T. S. Eliot. Rank-frequency distributions of the words of fifteen English writers from early Old English to the present day. Copyright: Addison Wesley Press, Inc.

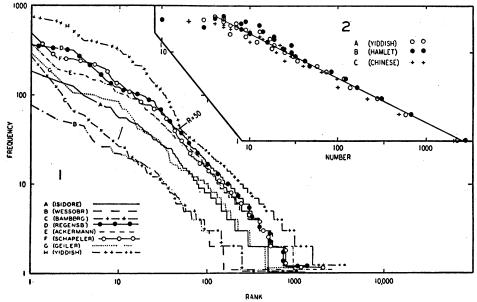


Figure 2. Comparative curves. (1) Rank-frequency distributions of the words of seven Old High German or Middle High German authors, and of Yiddish; (2) the number-frequency relationship of Yiddish, Hamlet, and Chinese. Copyright: Addison Wesley Press, Inc.

It follows that a doctor's knowledge is an adaptation to his work and the amount of this knowledge is closely related to the spectrum of disease that he encounters, being greatest for common complaints and least for rarities.

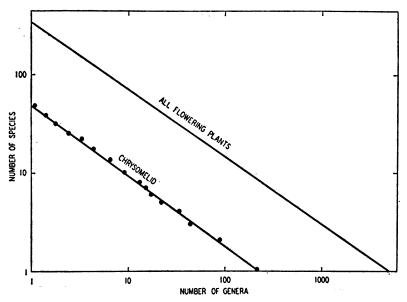


Figure 3. The number of different genera of like number of different species for all flowering plants and for Chrysomelid beetles (from the J. C. Wills data, after reversing the co-ordinates). Copyright: Addison Wesley Press, Inc.

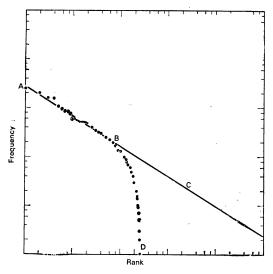


Figure 4.

#### Zipf's Law

If we consider as a theoretical population a large random list of positive integers which are to be described in terms of their factors, it will be seen that all the numbers are divisible by one, about half are divisible by two, about one third divisible by three and so on. If the number of numbers is N, then the product of the factor by the number of numbers it factorizes is always near to N. This is known as Zipf's Law, <sup>1</sup> <sup>4</sup> but it is found to apply to a surprisingly large number of cases notably in human communication (figures 1, 2, 3, 5, 6). Thus the rank frequency curve of the words in Shakespeare or Confucius obeys Zipf's Law. The factors of the integers may be

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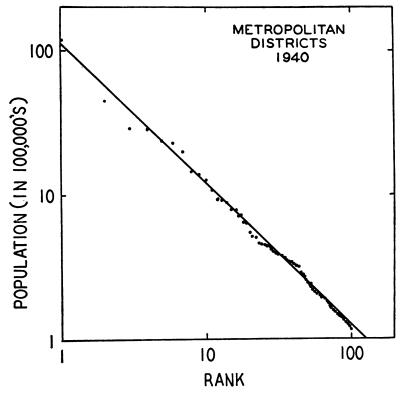


Figure 5. Metropolitan districts. One hundred largest in the U.S.A. in 1940, ranked in the order of decreasing population size. Copyright: Addison Wesley Press, Inc.

regarded as the words that describe them and the names of the diagnoses may be regarded as the words that describe the patients, we might therefore be excused for expecting that the rank frequency curve for disease in general will obey Zipf's Law also.

The statistics which are available (General Register Office, 1958) apply only to general practice. Arranged in order of frequency and plotted (figure 4) it will be seen that Zipf's Law is obeyed down to about rank 130 where the gradient becomes more steep.

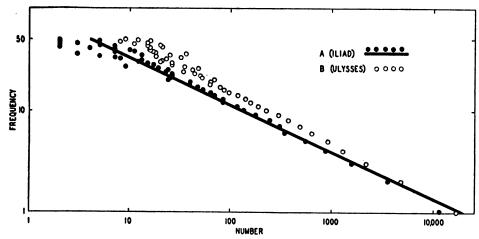


Figure 6. The number-frequency relationship of words. (A) Homer's *Iliad*; (B) James Joyce's *Ulysses*. Copyright: Addison Wesley Press, Inc.

## TABLE I

# G.R.O. Publication No. 14. Vol. I. Table 9. In order of frequency, consulting rates per 1,000 population all ages, both sexes

			,		
1.	Bronchitis	261 · 1	84.		15.9
2.	Arthritis and rheumatism except rheumatic		85.	Cough	15.8
	fever	204 · 3	86.		15.7
3. 4.	Psychoneurotic disorders	165·8 163·3	87. 88.	**	15·6 15·6
5.	Induanza	112.9	89.	Refractive errors	15.2
6.	Bronchitis, not specified	97.3	90.	Appendicitis	14 - 1
7.	Acute tonsillitis	89.9	91.	Debility and undue fatigue	14.0
8.	Hypertension excluding heart disease	86·7 75·3	92. 93.		13·4 13·4
9. 10.	Anxiety reaction omitting somatic symptoms Other chronic bronchitis	60·1	93. 94.		13·4 13·4
11.	Acute bronchitis	59.9	95.	Herpes zoster	13.4
12.	Otitis media excluding mastoiditis	58.8	96.	Pruritis and related conditions	13.4
13.	Other specified and general symptoms	56.0	97.		13.3
14.	Other muscular rheumatism Disorders of function of stomach	55·7 53·4	98. 99.		13·3 13·1
15.		53.4	100.	II	13 · 1
16. 17.	Acute pharyngitis	53.3	101.	Hypertensive heart disease	iž · 8
18.	Acute pharyngitis Asthma	52.5	102.	Ulcer of stomach	12.5
19.	Menopausal symptoms	51.7	103.	Pyrexia of unknown origin	12.2
20.	Sprains and strains of joints and muscles	51.4	104. 105.	Migraine	2∙0  2∙0
21. 22.	Boil and carbuncle Gastro-enteritis and colitis (excluding ulcera-	<b>50</b> ·8	106.		12.0
22.	tive)	47.3	107.	Dermatophytosis	i i · 9
23.		43.9	108.	Lymphadenitis—unqualified	11.9
24.	Acute upper respiratory infections	41.6	109.	Chickenbox	1.9
25.	Osteoarthrosis and allied conditions	40.7	110.	Disturbance of sleep Other injuries and reactions Other diseases of male genital organs Other forms of neuralgia and neuritis Infectious warts	11.7
26.	Vascular lesions affecting CNS Varicose veins of legs	39·8 38·3	111. 112.	Other diseases of male genital organs	1·7  1·7
27. 28.	Contusion and crushing with intact skin	38.2	113.	Other forms of neuralgia and neuritis	1.5
28. 29.	Pneumonia	38 - 1	114.	Infectious warts	11.2
30.	Fractures	36.8	115.	Sciatica	1.2
31.	Rheumatoid arthritis	36.2	116.	Other infective and parasitic diseases 1	1.0
32.	Heart disease involving coronary arteries	35.6	117.	Cholecystitis without calculi	0·4 0·3
33.	Gastritis and duodenitis	34·7 34·5	118. 119.		0.0
34. 35.	Ulcer of duodenum Laceration and open wound	34.0	120.	Other diseases of ear and mastoid process	9.9
36.	Earne	34.0	121.	Phlebitis and thrombophlebitis Other cerebral paralysis	9.9
37.	Other diseases of female genital organs	33.8	122.		9.7
38.	Senility without mention of psychosis	33.3	123.	Pyelonephritis, pyelitis and pyelocystitis	9.7
39.	Complications of pregnancy	32.0	124.	Headache	9·5 9·4
40.	Other diseases of female genital organs Senility without mention of psychosis Complications of pregnancy Obesity, not of endocrine origin Dermatitis	31·8 30·6	125. 126.	Vertigo	9.2
41. 42.	Wax in ear	29.7	127.	Mumps	9.õ
43.	Unspecified psychoneurosis	28.6	128.	Hordeolum (stye)	9.0
44.	'Multiple' bronchitis	28 · 2	129.	Lung, bronchus and trachea (neoplasms of)	8.4
45.	Acute laryngitis and tracheitis	27·9 27·8	130. 131.	Myxoedema and cretinism Psoriasis and similar disorders	8·4 8·3
46.	Pernicious anaemia Other diseases of skin and cellular tissue	27.6	132.	Programs	8.2
47. 48.	Diabetes mellitus	27.2	133.	Bronchiectasis	8.1
49.	Cellulitis of finger and toe	26.3	134.	Other diseases of arteries	8.0
50.	Custitis	25.7	135.	Chronic ulcer of skin	7.9
51.	Congestive heart failure	25.6	136.	Prostate—neoplasms	7.8
52.	Injury—unspecified	25·4 24·7	137. 138.	Multiple scierosis	7·6 7·6
53.	Diseases of teeth and supporting structures	24.7	139.	Depression	7.6
54. 55.	Other cellulitis, abscess and acute lymphadenitis	23.8	140.	Paralysis agitans	7.4
56.	Conjunctivitis and ophthalmia	23 · 7	141.	Infectious hepatitis	7.4
57.	Angina pectoris omitting coronary disease	23.5	142.	Bronchiectasis Other diseases of arteries Chronic ulcer of skin Prostate—neoplasms Multiple sclerosis Left ventricular failure Depression Paralysis agitans Infectious hepatitis Diseases of hair and hair follicles Pleurisy	7.4
58.	Rheumatism, unspecified	23.4	143.		7·2 7·1
59.	Psychoneurosis with somatic symptoms	23·3 23·2	144. 145.	Neurotic-depressive reaction	7:0
60. 61.	Urticaria Lumbago	23.2	146.	Pain in limb	6.8
62.	Synovitis, bursitis and tenosynovitis	23.0	147.	Peptic ulcer, not otherwise specified	6.8
63.	General arteriosclerosis	22.9	148.		6.7
64.	Functional disease of heart	22 · 1	149.	Pain in chest	6·7
65.	Tuberculosis of respiratory system	21 · 4 21 · 2	150. 151.		6.6
66. 67.	Hernia of abdominal cavity	19.8	152.	Thyrotoxicosis with or without goitre	6.5
68.	Iron deficiency anaemias Arthritis, unspecified Uterovaginal prolapse	19.8	153.	Rubella	6.5
69.	Uterovaginal prolapse	19.5	154.	Hysterical reaction	6.2
70	Asthenic reaction	19.2	155.		6.5
71.	Chronic pharyngitis and nasopharyngitis	19.1	156. 157	Stomacn	6·3 6·2
	Anaemia—unspecified	18·7 18·7	157. 158.	Diarrhoea, age two years and over	6.0
73. 74	Impetigo	18.7	159.	Congenital malformations	5.9
75.	Displacement of intervertebral disc	18∙6	160.	Chilblains	5.9
76.	Other diseases of digestive system	18.3	161.		5.8
77.	Other diseases of the bones, joints and mucles	18.3	162.		5·8 5·7
78.	Complications of the numerosium	18·0 18·5	163. 164.	Orchitis and epididymitis	5.5
/y.	Chronic sinusitis	17.6	165.	Cholelithiasis	5 • 3
81.	Impetigo. Superficial injury Displacement of intervertebral disc Other diseases of digestive system Other diseases of the bones, joints and mucles Epilepsy. Complications of the puerperium Chronic sinusitis Constipation Abdominal pain	17·1	166.	Acute heart failure, undefined	5.3
82.		16.8	167.		4.9 4.9
83.	Diseases of sweat and sebaceous glands	16.1	168.	Acute sinusitis	マ・ブ

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It is reasonable to assume that the total task is the line ABC, the sector ABD being dealt with mainly by general practitioners and the sector CBD being mainly dealt with by other practitioners. Since the practitioner's knowledge is proportional to log frequency the Zipf's Law curve becomes the knowledge curve by the replacement of logarithmic units by linear units on the ordinates. It is reasonable therefore to assume that for ranks below 130 the general practitioner's knowledge adaptation is adequate but that for ranks above 130 it falls below this level. It follows therefore that in the absence of other factors postgraduate education would be best directed towards those diseases in the region of rank 130 (see table).

In criticism of this interpretation of the results, it should be pointed out that many of the items in the first 130 of the list are not by any means the exclusive province of general practice; this explanation must therefore be regarded as merely a tentative hypothesis.

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Rates for college accommodation, including breakfast, will be charged as follows from 1 January, 1972:

Flatlet (Bed-sitting room for two, bathroom and dressing room) ... .. ... ... £7 per night, or £40 per week

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