

Maternity Unit,  
General Hospital,  
Hexham.

## REFERENCES

1. Barley, S. L. (1972). *Journal of the Royal College of General Practitioners*, **22**, 404.
2. *Journal of the Royal College of General Practitioners*, (1972). Report of national conference for trainees, **22**, 415.
3. *Pocket Oxford Dictionary*. Oxford: Clarendon Press.

## ABORTION

Sir,

The method of self-induced abortion described by J. G. Lloyd in his annotation (*May Journal*) was widely known between the wars and in the 1950s.

I myself have recommended it to patients in the bad old days when Alec Bourne was so courageously trying to introduce a little sanity into the legal tangle surrounding abortion. However I always recommended a douch can rather than a Higginson syringe, on the grounds of safety. In those days, a douch can was commonly used in many bathrooms by fastidious females and so would not attract attention. More important the pressure of the injection could be accurately metered by the height of the can above the nozzle. There is no way of gauging accurately the pressure generated by a syringe. I always understood that the method worked because a little soapy water penetrated the cervix and irritated the uterus.

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## REFERENCE

- Lloyd, J. G. (1972). *Journal of the Royal College of General Practitioners*, **22**, 354-5.

## NATIONAL TRAINEE CONFERENCE

Sir,

In reply to the correspondence from Dr Barley, the primary objectives of the conference were:

- (1) To confirm the principle of vocational training for general practice.
- (2) To learn the consumers' view of current training programmes.
- (3) To provide the College with information necessary to improve vocational training.

The Editorial and conference report (*June Journal*) demonstrate that to their authors at least these objectives were attained.

The conference steering committee decided that an introduction by a trainee on each main aspect of vocational training schemes was necessary to allow a balanced, researched view to be presented as a basis for discussion. A total of 2½ hours allotted to paper speakers in a conference lasting

two days was not excessive considering the exceptional nature of the meeting.

Those present at the final training session will know that the principle of regular regional meetings was accepted but representatives of schemes geographically more widespread than East Anglia and Newcastle were quick to point out the practical difficulties of travelling and time.

The current generation of trainees has a duty to future generations and to themselves to ensure that the College sets and maintains standards of training schemes. The college representatives present were left in no doubt of the trainees' feelings on this point and I personally believe that message alone was sufficient justification for holding a National Trainee Conference.

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## REFERENCES

- Barley, S. L. (1972). *Journal of the Royal College of General Practitioners*, **22**, 404-5.  
*Journal of the Royal College of General Practitioners* (1972). Editorial, **22**, 361-2.  
*Journal of the Royal College of General Practitioners* (1972). **22**, 415-6.

## CONTRACEPTIVE METHODS

Sir,

Dr Michael Altman, Chairman of the Vasectomy Society (*June Journal*) has done sterling service in popularizing vasectomy in this country and is obviously one of the many doctors who are seriously concerned about the need for control of population from the national standpoint, and also from that of individual couples seeking to limit their families.

May I suggest that the time has come to clear the air on the subject of methods of contraception? The Health Education Council recently took advertising space in national newspapers listing nine methods of contraception. For the normal couple, seven of these should be forgotten. There are only two reliable methods of contraception, the combined-hormone pill, and sterilization. These methods are virtually 100 per cent effective and other methods should be reserved for special circumstances only.

The 'pill' is ideal for the couple who are newly-married (or are unmarried) and wish to delay their first baby; it is ideal for the couple who wish to space their babies; but once the desired family-size is achieved, they want to be able to call a halt. At this stage, the wife may be only 25 or 30 (and sometimes considerably younger) and not many women, and by no means all doctors, are happy at the idea of the 'pill' being taken for perhaps 15 or 20 years. It is here that sterilization, usually by vasectomy, should be seriously considered as a routine procedure.