

near future. The replies from younger correspondents reinforce the opinions of health educators that an integrated curriculum for schools should include the subject of contraception.

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REFERENCE

Birth Control Campaign (1972). A Birth Control Plan for Britain. London.

QUALITY IN GENERAL PRACTICE

Sir,

The paranoid squeal when someone stands on a doctor's corns is deafening and unbecoming.

Maybe Mr Honigsbaum (*July Journal*) did make an overstatement but his article should serve to remind us that some of us are not very good: some of us who think we are good could be a great deal better, and that none of us are good all the time.

We have made a lot of progress since many of Mr Honigsbaum's references were originally penned but we have no room for complacency; no time to rest on laurels.

The paper was depressing and unfair but it nevertheless needed to be said.

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QUALITY IN GENERAL PRACTICE

Sir,

I write about the article by Mr Honigsbaum in the *July Journal*. Like many other people his article seems to me unbalanced, out-of-date, and amateurish; not really worthy to be regarded as serious criticism.

He makes very simple deductions from his statistics and is clearly able to relate in his own mind, for instance, the rise in the number of tests performed each year in laboratories as a sign of increasing excellence amongst certain doctors, and, by the same reasoning I suppose, the opposite in his mind would indicate a lower quality of care.

We have recently started doing our own haemoglobins and E.S.R.s in the surgery and there would be no doubt that this very common test, which could have previously shown on statistical figures given by the hospital laboratory, would indicate that we were practising a lower standard of medicine.

Many of his arguments seem to me to be very naive. He mentions a grey-wedge photometer as being an essential part of a general practitioner's equipment, which is so often lacking. By July of this year the grey-wedge photometer was out-of-date and anybody wishing to do their own haemoglobins would normally be advised to get a more

modern haemoglobinometer. Criticism is very necessary for us, but it is of little value when made at Honigsbaum's level.

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REFERENCE

Honigsbaum, F. (1972). *Journal of the Royal College of General Practitioners*, 22, 429-451.

DIETICIANS IN GENERAL PRACTICE

Sir,

I am studying, with the financial support of the Department of Health and Social Security, and the full approval of the British Dietetic Association, the use of dieticians on the community.

In order to obtain information concerning the current experience in general practice, I should be grateful if any reader who is a general practitioner and who employs a dietician in his practice would contact me at the Health Services Research Unit, Cornwallis Building, University of Kent and Canterbury.

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Sir,

Dr M. J. Whitfield (*October Journal*) reports his findings in a study of the relationship between the year of patients' registration and morbidity in his practice. A number of conclusions are made in this publication which cannot be allowed to pass without further comment.

(1) The paper is presented in a haphazard manner with methodology, results, and part of the discussion all coming under the heading 'Method'.

(2) There is no indication of which system is used for disease classification, i.e., was it the International or the College of General Practitioner's Classification of Disease?

(3) Two groups of males and females matched by date of birth are compared to ascertain differences in consultation rates by year of registration. This cannot be a valid comparison as the groups are not matched by social class which is known to have a significant effect on consultation patterns.

(4) It is stated that "12 of the female patients who registered in 1970 consulted during the first week of registration; only two of the males who registered in 1970 consulted in the first week. This indicates the tendency of patients to register only when they are ill". There is no evidence presented to support this conclusion.

(5) The results in Table IV are not tabulated and no totals are given. If one calculates the