

defence of Sir Henry, may I make the following observation? Paragraph 84 of the Willink Committee's Report says "In the evidence given by the Commonwealth Relations Office the opinion was expressed that the opportunities for employment in the self-governing Commonwealth countries have been declining and will shrink still further in the future". Sir Stanley Davidson (1955) writing in the *British Medical Journal* in a convincing article said "there can be little doubt therefore that Australia is rapidly becoming overdoctored". This and other evidence led us to the conclusion that the opportunities for British doctors overseas were declining.

We now know how false these prophecies proved but at the time we had to decide whether to accept or reject what seemed good evidence. We accepted it with disastrous results but I think we had little choice.

May I add my tribute to Sir Henry to that of Dr Hunt. I consider it a great privilege to have known and served with a man who was kindness itself, possessed of an outstanding intellect and who was a superb Chairman.

JOHN T. BALDWIN

REFERENCE

Davidson, Sir Stanley (1955). *British Medical Journal*, 1, 1171.

Correspondence

STUDENT HEALTH SERVICES— GENERAL PRACTICE OR NOT?

Sir,

Your editorial *Student Health Services—General Practice or Not?*, asks a number of pertinent questions from a position of apparently limited information.

Should student health be a separate service? The fact is that in the majority of universities in this country it already is. Some of the early services just after the last war began as consultative or advisory but almost all developed subsequently full treatment services within the National Health Service.

The spate of new services after 1960 was launched in this style *ab initio* fusing both prevention and treatment, physical and mental care in the same doctor—a policy of whole person medicine surely endorsed by the Royal College of General Practitioners. Some have extended this care to all resident on the campus. The latest development of occupational medical care to combat the many physical environmental hazards of radiation, lasers, toxic fumes, microbiological laboratories and animal houses is as yet confined to a handful of universities. University Health Services have indeed led and are still leading in many areas.

The position is not dissimilar in USA where the first Student Health Service was born in 1826. The World Health Organisation Committee endorses their separate development.

Although there is a general pattern each Student Health Service has developed according to the needs of its particular institution. Many of the newer universities and colleges draw the bulk of their students from outside their own areas. As high a percentage as 95 may be strangers and have no family in whose context the student health doctor or the general practitioner can care for them.

Their 'family' becomes for the greater part of the year their peers, their tutors and academic advisers and the members of the university staff concerned with welfare, their 'home' a hall of residence, a student house, a flat or lodgings.

Students are informed clearly and unequivocally of their right to register with any National Health Service practitioner providing services in the area in which they live. The majority choose the Student Health Service which presumably satisfies their needs best—an important fact today when consumer orientated services are in vogue. Students however who live in the area are encouraged to remain registered with their family practitioners with whom student health doctors are always only too ready to co-operate.

A paraphrase of Roger de Coverley's famous maxim 'there is more to be said on both sides' is perhaps a fitting prelude to a suggestion that a joint meeting of the Royal College of General Practitioners of which many student health doctors are members and the British Student Health Association could do nothing but good and assist in the formulation of a policy to be implemented which is in the interests of the patient.

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REFERENCE

Journal of the Royal College of General Practitioners (1973). Editorial, 23, 72-90.

Sir,

Your editorial *Student Health Services—General Practice or Not?* (February *Journal*) gave a broadly