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Lay volunteers

It is particularly interesting that Miss Stockwell notes that some of the unpopular patients ultimately received the care they needed from other patients. The best role for lay volunteers in health services is not yet known, but this kind of observation suggests that where professionals fail, lay people will move in to fill the vacuum.

Wider relevance

The significance of this booklet lies more in its central idea than in its presentation because the numbers were small and the methods used could have been improved. Miss Stockwell, however, has done well in approaching a difficult subject with courage and determination and in giving her colleagues in all the caring professions an idea which might well be applied in other settings. How much is known about 'difficult' or 'bad' patients in general practice? Since the patient's personality is the major factor in determining unpopularity, research on the way doctors and nurses react to varying personalities might prove profitable. Caring for people with personality problems will always be a significant part of community care and as it must often be given in the patient's home it may be correspondingly more difficult.

The Unpopular Patient will help many doctors and nurses towards a greater awareness of their own attitudes and behaviour. The Royal College of Nursing can be congratulated on publishing a document which, although it attracted press comment critical of nurses, nevertheless seeks to raise the quality of care and is in the highest tradition of British professional organisations.

REFERENCES

Hunt, Lord (1957). British Medical Journal, 1, 1075-82 (Reprinted in The Journal of the Royal College of General Practitioners (1972). Supplement Number 4). Schwartz, D. R. (1958). American Journal of Nursing, 58, 75-77.

Stockwell, F. (1972). The Unpopular Patient. London: Royal College of Nursing. Price: 60p.

CONGRESS IN FAMILY MEDICINE

THE Congress in Family Medicine held at the Central Hall, Westminster, London I from 3-7 April, 1973 was an interesting, exciting, and useful occasion. The meeting was in return for the previous meeting in Toronto, between the College of Family Physicians of Canada and the Royal College of General Practitioners and was well attended. It was ironic that there were more Canadian general practitioners present than those from Britain although the visitors had travelled thousands of miles. About 850 registered but far more than this number attended some of the highlights and it was estimated that over 1,200 were present when the President, H.R.H. The Prince Philip, Duke of Edinburgh, presided at the ceremonial meeting. Dr George Swift delivered a memorable William Pickles Lecture and proved himself once again to be a quick-thinking chairman.

The topics ranging as they did from Oral contraceptive research to A better deal for patients, Psychiatric problems in family medicine, Virological hazards, and Coronary heart disease, covered several of the important and developing areas of general practice, and were of equal interest to doctors from both sides of the Atlantic.

As always at such congresses, discussion continued long after the formal meetings were over and the contrast between the different forms of practice were debated at length. It was noticeable that several of the Canadian visitors had qualified in the United Kingdom and many expressed surprise at the great changes that occurred in general practice during the last 10 or 15 years.

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The Canadians were particularly impressive in their firm base of internal medicine whereas in turn they seemed most interested in the development of the community health team in Britain and in the various research methods evolved.

One topic however occurred continually wherever doctors from the two Colleges were together and that was the position of medicine in society and the kind of relationship that ought to exist between governments and the profession. It is clear that big meetings of this kind can be of considerable value in creating opportunities for wide-ranging discussions on these difficult problems.

Dr B. C. S. Slater was chairman of the organising committee and bore a heavy load throughout. Geigy Pharmaceuticals should be thanked for contributing substantially to the cost of the meeting.

JOURNAL SUBSCRIPTIONS

During the year ending 31 December, 1972 the number of private subscriptions to the *Journal of the Royal College of General Practitioners* increased by 98.

Many of the new subscribers in the United Kingdom are hospital libraries, postgraduate medical centres, executive councils and medical and nursing staff in local health authorities.

NEW DISCOUNT FOR JOURNAL PUBLICATIONS

During 1972 several orders of up to 150 copies were received for the *Journal* and some of the Journal publications. These came from British local authorities, universities in the United States, and European pharmaceutical organisations. Some of these publications, especially the *Reports from General Practice*, are being listed as required reading in some North American universities and some pharmaceutical organisations are distributing them to their representatives.

A new discount has recently been introduced for those who are able to order 50 or more copies, provided that they are all sent to one single address at the same time. Application should be made to the publishers: The Longman Group Ltd, 43 Annandale Street, Edinburgh EH7 4AT, Scotland, or to the Honorary Editor, Alford House, 9 Marlborough Road, Exeter EX2 4TJ, Devon.