

Electrocardiography (1973). OWEN, S. G., pp. 180. London: English Universities Press. Price: £1.15.

The object of this book is to provide a programmed text for self tuition, in the principles of electrocardiography and the interpretation of electrocardiograms; the programming method is branching and scrambled. Hence the learner's own response to a question determines the course to be followed—an incorrect answer leads to explanation and a return to the original question. A random distribution of units of information (scrambling) ensures that units are not read consecutively.

The result of this method is that by hard concentration the principles of electrocardiography can be understood. However, the reviewer is uncertain whether this book is really of value in the interpretation of electrocardiograms, because the complex index system defeats ready reference. The book does not attempt to discuss the relevance of electrocardiograms to the practitioner's needs in general practice; however, some clinical details would make the reading of this book easier. It would also have been helpful if opinions had been given on the specificity and sensitivity of certain abnormalities found on the ECG (e.g. ischaemic heart disease).

General practitioners are increasingly realising the diagnostic potential of the electrocardiogram in unravelling the cause of dyspnoea, chest pain, tiredness, and in assessing the effects on the heart of hypertension and chronic obstructive pulmonary disease. They will benefit by understanding the principles of ECG recordings provided in this book. However this volume is not recommended for reference purposes or as an aid in difficult clinical situations in general practice. It would be worthwhile to borrow the book from a library, but does not merit a permanent place on the practitioner's bookshelf.

B. T. B. MANNERS

Complaints against Doctors. KLEIN, R. (1973). Pp. 193. London: Charles Knight. Price: £4.00

This book is the outcome of research carried out by the author while a member of the Organisation of Medical Care Unit at the London School of Hygiene and Tropical Medicine. The doctors are general practitioners; the complaints, those made by members of the public.

A general practitioner opens this book with understandable trepidation. Will Mr Klein turn out to be the Ralph Nader of the NHS patient? He seems critical, even scathing. He refers to "the martyred practitioner"; he writes that doctors "can get rid of patients"; he draws attention to an "interesting asymmetry" in the right of appeal as between patient and doctor; he believes the dice are loaded against complainants; and he suggests it would be "interesting to rank doctors, as well as patients, on the neuroticism scale." When he describes the medical profession's exaggerated reactions to real or supposed threats

to its independence, the clinical counterpart—behaviour in the paranoid individual—is immediately suggested.

Yet this book is not itself a complaint against doctors: far from it. It is a perceptive and not unsympathetic appraisal of the doctor's dilemma. Mr Klein is a shrewd commentator and an entertaining writer. His ideas are closely argued and his sources fully documented. He has made a penetrating analysis of the weaknesses of the complaints machinery as it applies to the general medical services in the NHS, and in so doing has produced a fair and balanced account of the problems besetting the general practitioner; a feat the more remarkable coming from a non-clinician—and a layman. It is a tribute to the author to reflect that it is hard to see how this book could have been improved had he in fact been a doctor with personal experience of the system.

Mr Klein's thesis is that the complaints system fails in its main functions. Created largely with a view to preventing abuse of public funds, it has been perpetuated in an age preoccupied with improving the quality of medical care. It does neither of these things well. Nor, since it was intended to police the contract between the Service and the doctor and to secure value for money, does it deal properly with a major source of stress—the dissatisfactions of the patient.

These "grievances" are classified as formal "complaints", informal "grumbles", and covert "frictions", and are estimated to occur with a frequency, respectively, of nine, 1,100, and 4,000 per million patients annually. The 500 or so complaints which are made annually lead to about 200 hearings before disciplinary committees and breaches are found in fewer than 100. Doctors would regard this as the efficient use of a filter system but the figures raise in the author's mind the question whether the machinery is serving instead as a barrier to the patient obtaining redress.

Most of the cases he has studied do not conform to the stereotype of bad doctor or vexatious patient but appear to arise out of a clash of conceptions about their roles. The patient may see callous neglect, while for the doctor it is merely an acknowledgement that nothing more can be done medically. The lesson: medicine must be seen to be done. But the terms of service do not legislate for tact, sympathy, kindness, or wisdom; "there is no consensus on how far a general practitioner is expected to fill a human as distinct from a technical function." One recalls Michael Balint's aphorism: It is the patient's privilege to behave as a patient; the doctor's duty to understand the meaning of that behaviour.

Mr Klein is commendably reluctant to erect "a pretentious superstructure on suspect foundations" but he thinks the "friction rate" may be a fairly accurate indicator of overt doctor-patient tension, and finds that it correlates with list size. Analysis of the grumbles revealed that half were

about the way the doctor organised his practice, a third were reflections on his manner, and only a sixth found fault with his technical competence. An increasing number of complaints seem to be about deputising arrangements, appointments systems, the receptionist, and the doctor himself. This book might well have been sub-titled, "Pathology of the doctor-patient relationship."

It is however, sub-titled, "a study in professional accountability," and this is the main theme explored by the author, and for which the micro-study of general practice serves. The concept of professionalism is closely examined. Its hallmark today is recognised expertise rather than an elaborate code of ethics; professionals are no longer regarded as an elite by virtue of the qualifications and general background; they cannot now rely on charismatic authority; it is what they do rather than what they are that matters.

At the same time the professional holds himself accountable not to the consumer but to his fellow-experts. Paradoxically, those, like NHS general practitioners, who give up some part of their independence may be seen by the public to have gained in power because the fully independent ("private") practitioner must trim his sails somewhat to the consumer, while the professional who provides free-at-the-time service as part of an organisation—even if he is an "independent contractor"—tends to pay far more attention to colleagues and superiors. In medicine, the con-

sumer is especially vulnerable: not only is there the role of ignorance which is common to all professional confrontations, but the patient is often literally in no position to argue or to shop around.

The question is posed, accountability to the individual client, or collective accountability to the community? Professionals resist the idea of their work being evaluated by outsiders; even more so by consumers; (the opposition of university teachers to the suggestion of student assessments is cited). If the consumer could be relied upon to complain when he gets poor service, a complaints machinery would be an effective means of quality control. But the patient cannot be relied upon, hence the need for some other means of maintaining standards. The power of professionals is very great, says Mr Klein, and is growing. Power should be accompanied by responsibility, and he concludes that the best guarantee for an effective system of individual accountability is an effective system of collective accountability.

This stimulating book displays many insights into the nature of general practice, but every medical man will find in it food for thought. Doctors take the question of their responsibility seriously. While wrestling with the ever-present problem they may gain a crumb of comfort from the remark, quoted in this book, "Professionals are the people whom we hire to make our mistakes."

J. S. NORELL

CONTINUING EDUCATION HABITS OF SASKATCHEWAN GENERAL PRACTITIONERS

In a report of a 1970 survey of the continuing education habits of a sample of 66 Saskatchewan general practitioners, journal reading was their method of first choice in keeping up to date. 'Casual contact' conversations and audio-digest tapes ranked second and third.

The authors concluded that "information retrieval programs are by no means the complete answer to the problems of keeping up to date. The majority of the obstacles are personal ones. Physicians feel that although the medical profession is faced with a deluge of information, educators are responding with a deluge of methods rather than exercising adequate selectivity in conveying information that is relevant to general practice."

REFERENCE

Buchanan, K. & Laxdal, O. E. (1971). *Canadian Medical Association Journal*, **105**, 1328-1333.