

role of accident and emergency services have been rejected.

#### REFERENCE

Accident and Emergency Services (Cmnd 5886), London: H.M.S.O. Price 14p.

## Obituary

### REUBEN DRUMMOND

Reuben Drummond who died peacefully at the College on 6 January, after a long illness borne with great courage, will be remembered with warm affection by all who knew him. After a long career in the Merchant Navy, Mr Drummond joined the

College in 1968, first as handyman and then as housekeeper/caretaker with his wife Nita. His helpfulness and courtesy endeared him to the membership and the staff and he will be sadly missed. Both Mr and Mrs Drummond have served the College with the utmost loyalty for the past six years.

Sincere sympathy is extended to Mrs Drummond and to their son Peter. Mrs Drummond has received many letters from members all over the country sympathising in her tragic loss, and hopes in time to reply to them all.

His funeral was attended by the President, many members of Council, and staff.

## CORRESPONDENCE

### COMMUNICATIONS WITH PATIENTS

Sir,

When a person visits his doctor he likes to be given, in addition to a prescription, some information on what is wrong with him and some good advice on how he can help his body to get better. It is obvious that a doctor with a large queue in his waiting room has little time to give every patient a detailed lecture on his complaint. Even if he has time to give some advice on such things as diet and exercise there are many hazards that can interfere with this transfer of information, such as:

- (1) The doctor under pressure from a full waiting room or fatigued at the end of a trying day, or simply feeling below par, might easily forget some of the things he should have mentioned to the patient. A doctor nearing retirement might be particularly prone to this kind of oversight.
- (2) The patient might be hard of hearing or even very deaf. Deaf people often pretend to hear better than they actually do.
- (3) The doctor's accent may be one with which the patient is not familiar.
- (4) The doctor's knowledge of English may be limited e.g. an immigrant doctor.
- (5) The doctor may use words and phrases with which the patient is unfamiliar, but is reluctant to admit his ignorance.
- (6) The patient may be too tensed up and ill to take in all that the doctor is telling him.
- (7) The patient may have a bad memory, due to old age for example, and on returning home may be unable to recall correctly all that the doctor had told him.
- (8) It is also possible that the doctor is simply inefficient and out of touch with the latest advances in medicine.

When a patient feels that he has not been given

all the advice to which he believes he is entitled, he will, if he is a sensible person, seek for this in medical books or health magazines or ask for advice from the local chemist (who is not always unwilling to give it). This kind of self-treatment is generally frowned upon by the medical profession, yet doctors, by their failure to communicate fully with their patients, are in part responsible for people resorting to it.

How much happier one would be to come away from the doctor's surgery with a printed sheet containing all that the doctor had told one (or had forgotten or did not have the time to tell one) than to have to carry this information in one's head. It would also be very useful to those at home who have some responsibility for caring for the patient—particularly if the patient is elderly.

Surely doctors are mistaken if they imagine that their patients expect them to carry in their heads everything the patient ought to know, to be trotted out without reference to any medical texts and without omissions, mistakes or misunderstandings.

In universities and colleges lecturers seldom give a lecture without notes to guide them through the syllabus and to ensure that they do not omit important pieces of information. In the academic world the handing out of printed sheets is common practice and in the world of engineering instruction manuals on the running, maintenance and repair of such things as motor cars, washing machines, central heating boilers is a widespread practice.

Accepting that, for most of us at any rate, our bodies are of more importance than our motor cars and washing machines, is it not reasonable to ask doctors to give us, the patients, advice in a more permanent, reliable and complete form than by word of mouth across the surgery desk?