

VASECTOMY FOLLOW UP

Sir,
Dr Jackson (Honorary Director of the Crediton Project) should not allow his temper, or his age, to get the better of his reason (*June Journal*). He has clearly interpreted my letter, written in response to Dr Drury's follow-up study of 175 vasectomised men, as an attack upon the operation his organisation promotes. This was far from the case.

Dr Drury reported an improvement in the physical and emotional relationships of over 50 per cent having used replies to questionnaires (of the simple "better/same/worse" variety) as evidence. The doubts I expressed concerned the fallibility of such questionnaires in the scientific study of the complex field of human emotional responses. To support my point I quoted a paper (Ziegler, 1969), in which a group of workers studied vasectomised men with sexual problems. These men (like Dr Drury's) also reported increased coital frequency and this was interpreted as being neurotic behaviour. The point I was trying to make, therefore, was that "increased coital frequency" may be interpreted either as neurotic behaviour or as "increased libido" depending on the group studied. That such men should not have been vasectomised is obvious now, after the event. The important question is: how can we identify, pre-operatively, those men who would be psychologically harmed by the operation?

It seems perfectly reasonable to me that a vasectomised man should at least wonder whether his sexual abilities have been destroyed or in some way affected by the operation. Why not? Dr Jackson knows that "these things do not occur"—but how can he *know* if he is not prepared to submit his patients to psychiatric investigation? Uninformed assertion by an enthusiast is not only no substitute for scientific truth, it is very worrying. Can he be so sure that 100 per cent of his patients have been "appropriately" vasectomised? I doubt it.

Finally, whether Dr Jackson likes it or not, vasectomy *is*, by definition, a 'mutilating' operation (*Concise Oxford Dictionary*: "render imperfect by excision").

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REFERENCES

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Ziegler, F. (1969). *Archives of General Psychiatry*, **21**, 50.

GENERAL PRACTITIONERS BORN OVERSEAS

Sir,
Please convey my congratulations to Dr D. Irvine on his excellent 'William Pickles Lecture 1975'. I read it thoroughly and carefully in the *June Journal*.

I was naturally interested in his comments on overseas doctors. I am glad that somebody has realised that some of "them" are good.

It seems that the Royal College of General Practitioners, as an organisation has not. After practising for over a decade and after passing two British postgraduate exams (which many of my British colleagues fail) I get letters inviting me to attend a "beginners course" for overseas doctors.

One wonders whether it is the result of incompetence or of maliciousness—"when shall we put our house in order". I would very much wish to know your reaction and that of other members of the Royal College of General Practitioners on this topic.

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- Irvine, D. (1975). *Journal of the Royal College of General Practitioners*, **25**, 399-407.

BOOK REVIEWS

Screening in general practice (1975). HART, C. R., Ed. Pp. 338. Edinburgh: Churchill Livingstone. Price: £5.00.

Now that many of the major diseases have been conquered, more attention is being turned towards the preventive aspects of primary care and the early detection of disease.

Thus the concept of screening a population for a particular illness arose and many enthusiasts have embarked on screening programmes designed to identify many illnesses from anaemia to phenylketonuria. One might say that many screening

procedures have been initiated with more enthusiasm than thought and anyone considering any aspect of screening should read this book with care.

One of the authors states that probably the screening procedure which has saved most lives was the medical examination of men during the First World War before they were sent to the trenches. Anyone with a systolic murmur was rejected as these were all thought, in those days, to be due to rheumatic heart disease.

Some procedures have been of established value