

Seminars

Learning in groups or seminars is establishing itself as a method of importance both for principals and vocational trainees. It is, however, but one way of learning; many will continue to learn from books and medical journals and others prefer tape/slides or lectures.

But in the subtle art of the analysis of attitudes and relationships the seminar remains supreme.

REFERENCE

Balint, M. (1957). *The Doctor, His Patient, and the Illness*. London: Pitman Medical.

THE PREVENTION OF CORONARY HEART DISEASE

THE recent publication of a report prepared by a joint working party of the Royal College of Physicians and the British Cardiac Society, on which the Royal College of General Practitioners was represented, has received widespread publicity. This is probably more the result of mounting public interest and concern than of the nature of the report.

“The Working Party set out to evaluate critically the available information and to give brief and clear advice, indicating those areas of knowledge that remain controversial.” On the whole they have succeeded.

The particular importance of this report for general practice is its emphasis on the role of family doctors. It is refreshing to read that “General practice should provide the main means of identifying those at high risk” and that “mass screening is not recommended”.

The advantage of detecting those at high risk within general practice is that advice, counsel, and intervention can be tailored to individual needs and individual risks. It does not, however, follow that such intervention alters risk status, or that it delays or prevents the appearance of clinical manifestations of disease. It has been shown that stopping cigarette smoking reduces risk, but the effects of weight reduction, small reductions of serum cholesterol, and the treatment of mild and moderate hypertension are as yet unknown. A prospective study which would correlate alteration of risk status with ultimate outcome is overdue: such studies require the recruitment of large numbers and long term follow up, and they are relatively expensive. Nonetheless, the success of the Oral Contraception Study (Royal College of General Practitioners, 1974) prompts the question, is this a new task for the Research Committee of the College?

REFERENCES

The Journal of the Royal College of Physicians (1976), 10, 213.
Royal College of General Practitioners (1974). *Oral Contraceptives and Health*. London: Pitman Medical.