

student to work through the questions himself before checking the answers. Not only does it give the student useful experience in mastering the examination style for MEQs but provides a valuable learning exercise.

It is a pity that most of the examples of modified essay questions given by the authors are highly clinically orientated. Counselling within the consultation is one of the most important skills of the general practitioner, and more questions aimed specifically at this would have been appropriate in a book by general-practitioner teachers for general-practitioner learners.

The second part of the book demonstrates the development and construction of the MEQ and its use as a teaching tool which stimulates real life situations. The advantages over the traditional essay-type questions are clearly explained.

Throughout, the authors emphasise that in general students will tolerate and possibly enjoy this type of assessment. The technique enables those designing MEQs to modify them in various ways to suit the competence and the educational level of the prospective candidates. Thus questions can be framed for pre-clinical, clinical, or postgraduate students with varying emphasis on factual recall, skills, and judgement.

The authors end by suggesting that the construction of MEQs is a proper postgraduate exercise, providing a useful method of increasing the clinical teachers' awareness of educational objectives and resulting in a convenient means of communication between general practitioners within a peer group.

M. S. HALL

Equipment for the Disabled (1975). Oxford: Oxford Regional Health Authority, Old Road, Headington, Oxford. Fourth edition. Price: £1.50.

One of the biggest problems for a generalist in medicine is to apply the latest advances in other branches of medicine for the benefit of individual patients. Today's general practitioners have a particular difficulty in that few of us received any worthwhile training in aids and gadgets that are available to help disabled people in the community, and furthermore a great number of these have been invented and developed during the last few years.

The vast number of handicapped people live in their own homes, and the range of instruments which have now been developed to help them is impressive and encouraging. Furthermore, many of the ideas described in this booklet are quite cheap and could easily be afforded by thousands of the patients for whom they have been designed. Nor should assistance be thought of only in terms of the home; there is an interesting office section including, for example, information about special typewriters for handicapped typists and a writing aid which is arousing widespread

interest, which will hold a pen or pencil in a normal writing position when the fingers are too weak to grip.

This booklet covers a great many aspects of living and even includes a remote control unit for colour television.

There must be few practices of any size that would not find this booklet useful both for the general practitioners and for the health visitors. I have found it useful to give the booklets to the patients to read through and select what would most help them. The challenge must be somehow or other to devise methods of getting all this information through to the people who need it; there must be many who are ignorant even of the existence of these instruments.

As to suggestions for improvement, the Oxford Regional Health Authority would surely be wise, if they really want these ideas to reach patients in general practices, to include at least one general practitioner on the advisory panel, as there does not seem to be one at present, and it would be helpful if prices could be shown wherever possible.

D. J. PEREIRA GRAY

The Needs of the Elderly in the Scottish Borders (1976). R. GRUER. Pp. 187. Edinburgh: Scottish Home & Health Department. Price: £1.80.

The Measurement of Need in Old People (1976). ISAACS, B. AND NEVILLE, Y. Pp. 167. Edinburgh: Scottish Home & Health Department. Price: £2.20.

Accurate information about the population involved is essential for planning services and allocating resources, and it is also fundamental that the problems posed should be identified. The Scottish Home and Health Department has sponsored research into the needs of old people in Scotland, which are reported in two volumes.

Professor Isaacs and Mrs Neville analysed a random sample of 1,035 people over the age of 65 drawn from two areas of Glasgow and the seaside resort of Largs, for their ability to perform "activities necessary to basic care". They introduce the idea of "clock charts", which describe the interval of time between necessary periods of help. From this, and their data about the living conditions and help received by the sample population studied, they estimate the services required to provide adequate cover for the elderly. Unfortunately, the age-bands presented in the tables are at ten-year intervals, which fail to reveal the changes within these age-bands and make comparison with other similar studies more difficult. It is also confusing to find yet another definition of degrees of dependency among those already current.

The study by Dr Gruer is easier to read. In this project 762 people over 65 were chosen by