

Twentieth Congress of the International Society of General Practice (S.I.M.G.)

The twentieth Congress of *Societas Internationalis Medicinae Generalis* (S.I.M.G.) was held at the Hilton Hotel, Stratford-upon-Avon, from 29 April to 1 May 1976. More than 350 people attended, including doctors from 17 countries: Austria (27), Australia (11), Belgium (25), Canada (8), Denmark (1), East Germany (2), France (6), Hungary (2), Indonesia (1), Netherlands (25), Norway (9), Sweden (5), Switzerland (6), United Kingdom (47), United States (12), West Germany (19), Yugoslavia (20).

Dr P. I. Frank

Dr P. I. Frank, Chairman of the U.K. Organising Committee, opened the Congress and welcomed delegates, speakers, and chairmen, stressing that while the Congress provided a forum for the presentation of scientific papers, for discussion groups and for practice visits, of equal value was informal assessment and the opportunity which the meeting gave to renew acquaintances with overseas colleagues.

Dr G. Heller

Dr G. Heller, President of S.I.M.G. and co-chairman for the first morning, gave a brief history of the Society. He stressed the unique opportunity the Society gave for doctors from East and West European countries to share ideas and welcomed the recent innovation of having a Spring Conference in a different European country each year. The meetings which had been held in Budapest (1973), The Hague (1974), Antwerp (1975) and this year in Britain helped doctors from these countries to become better acquainted with the idea of international co-operation in general practice.

Professor P. S. Byrne

The opening scientific address was given by Professor Byrne who emphasised the need for closer international co-operation in the development of medical education for general practice.

He outlined the progress which had already been made by doctors from the countries represented at the Congress and indicated the lines along which further development might be expected. In particular he described the work which had been done resulting in the publication of the document, *The General Practitioner in Europe*.

The Family Unit at Risk

Of the many factors involved threatening the integrity of the family unit, the Congress considered the following three topics:

- (1) The management of incurable and chronic disease in general practice,
- (2) Self-inflicted diseases,
- (3) The effects of illness on the family.

(1) The management of incurable and chronic diseases in general practice

While there is general acceptance that this forms an important part of general practice, two speakers—Dr Raes (Belgium) and Professor Aitken (U.K.) claimed that we may not be aware of some of the problems involved. Dr Raes spoke of three aspects of the care of the dying; the first was the doctor's rapport with the patient, secondly with the relatives during the illness, and lastly with the care of the bereaved family, which was the most neglected of the three.

Professor Aitken, speaking of the role of the general practitioner in the rehabilitation of the disabled, said that rehabilitation services in the U.K. are poorly developed. More than 50 per cent of patients discharged from acute medical wards were not back at work three months later. The slow return to work is related to unstable personality traits and emotional disturbance at the time of admission. It is not related to age, nor in the case of ischaemic heart disease to severity

of disease. Psychosocial factors play a larger part in response to illness than is generally accepted or recognised.

Other papers were given by Dr Regalado (U.K.) on the management of rheumatic disease, and by Dr Jork (West Germany) and Dr Kovacic (Yugoslavia) on schizophrenia.

Dr G. N. Marsh

The second session was opened by Dr G. N. Marsh, who described a comparative study of work patterns and the care of patients between Iowa and North-east England. The contrast between private medical care given in unhurried fashion in luxurious surroundings was well contrasted with the more stressful realities of primary care in the British National Health Service.

(2) Self-inflicted disease

Dr R. Wilkins (U.K.) gave an account of the problems of detecting the early alcoholic in general practice. In his study, he had found that the average practice of 2,500 patients would have 25–45 alcoholics of whom only two to seven would be known to the general practitioner. Dr E. Sturm (West Germany) also described his experiences of alcoholic patients in his practice in West Germany. Dr F. Wells (U.K.) gave a paper on drug abuse and the problems of the barbiturates. Problems of obesity were dealt with by Drs D. Craddock (U.K.) and K. J. Bolden (U.K.). Dr Craddock showed that obesity can be successfully treated during the antenatal period and in infancy, while Dr Bolden challenged us to show whether it is worthwhile treating obesity at other times of life. Dr G. R. Tutsch (Austria) said that much self-inflicted disease was largely the responsibility of the doctor when he failed to help the patient to understand the disease or its treatment. This could lead to unnecessary fear and alarm, and the incorrect and dangerous taking of medication.

(3) The effects of illness on the family

Dr Sawchuck

Dr Sawchuck (U.S.A.) gave a summary of a congress held last year entitled, *The Family—Can it Survive?* Further papers by Dr Novosel (Yugoslavia) on how families adapted to a diabetic patient, by Dr Andor (Hungary) on the effect of illness of the elderly on their family, and by Dr Melker (Netherlands) on the family of the hospitalised patient, all provoked considerable discussion. Dr Reynolds (France) gave a number of case histories showing the role of the general practitioner in illness in the family, and in the last paper of the Congress, Professor Verby (U.S.A.) suggested that there might be a place for organising schools to teach family life to young people.

For one complete session the Congress divided into small discussion groups. Each group was presented with two ten-minute papers all on the main theme, *The Family Unit at Risk*, and each of these papers was then discussed for an hour.

One afternoon was devoted to showing doctors from other countries practices in the Midlands. In all, 11 practices acted as hosts to 90 doctors. The social events were well attended and it is hoped that this Society, until recently relatively little known in this country, will gain increasing support from doctors in the United Kingdom.

The next meeting of the Society will be held at Igls, Austria, from 23 to 25 September 1976 and the next Spring Congress will be held at Marburg, West Germany.

REFERENCE

Leeuwenhorst Working Party (1975). *The General Practitioner in Europe*. Obtainable from 14 Princes Gate, Hyde Park, London SW7 1PU.
