COLLEGE NEWS

QUEEN'S COMMENDATION

Dr B. S. Brewster, MRCGP, General Practitioner, Settle, Yorkshire, has been awarded the Queen's Commendation for Brave Conduct. Dr Brewster recently attended on a night call a disturbed patient who threatened him with a 12-bore shotgun. After two hours of persuasion the suicidal man was persuaded by Dr Brewster to put down the weapon.

Dr Brewster is a member of the Yorkshire Faculty of the College.

ROYAL COLLEGE OF GENERAL PRACTITIONERS/UPDATE FELLOWSHIP

The Royal College of General Practitioners is grateful to Update Publications Limited who have endowed a new Royal College of General Practitioners/Update European Fellowship. This will allow the Royal College of General Practitioners to invite a doctor or medical administrator to come to the UK to encourage the exchange of information between British and European general practice.

The first fellow is Mr Frantisek Osanec from Prague, who will be coming to the UK with his wife for two weeks in the autumn of 1977.

ANNUAL GENERAL MEETING

The twenty-fifth Annual General Meeting of the College will be held on Saturday 19 November 1977 at Imperial College, London SW7, beginning at 11.00 hours. The James Mackenzie Lecture will be delivered by Dr D. J. Pereira Gray.

The Annual Symposium will be held on Sunday, 20 November 1977, at Baden Powell House. Registration will be at 09.15 hours and the title of the symposium "Standards and Settings in General Practice".

MEDICAL RECORDING SERVICE FOUNDATION

To commemorate the twentieth anniversary of the Foundation (1957 to 1977) the Medical Recording Service has celebrated by producing five new tapes on subjects recorded in its initial year. These are:

Depression (77-39). No slides, 22 minutes, by Dr C. A. H. Watts, who had made the first library recording on depression in general practice.

Treatment of Dermatitis and Eczema (77-45). A recent recording by Dr J. R. Simpson, Consultant Physician, Exeter. The Benefits of Antihypertensive Treatment (77-31). Twenty-four slides, 28 minutes, by Dr Michael Hamilton. Death Certification (77-40). No slides, 20 minutes, by Dr John Havard.

Where does the 'Flu go in the Summertime? (77-46). Six slides, 32 minutes, by Dr R. Edgar Hope-Simpson.

PRACTICE ORGANIZATION ROOM

From June to October 1977 there is a display of A4 size records, which includes samples of their use and application. This has been mounted by Dr D. Metcalfe, Chairman of the Practice Organization Committee, and includes some notes about problem orientated medical records. Dr Metcalfe is well known for his interesting articles in *Update* on this subject, and this display well merits a visit. When it is taken down it will be available for loan to faculties, as are a number of other exhibitions.

The Practice Organization Study has been redesigned to make it compatible with data collection methods and it now reflects our interest in identifying innovations in general practice. Information gathered will be available not only to visitors to the POC Room but also to each faculty, which will be supplied with information regarding its

own area. It is hoped that the faculty practice organization committees will recruit as many innovators as possible.

Members are reminded that the College provides the nucleus of the new practice information service and that any enquiries regarding practice organization, loans of exhibitions, or names of practice innovators may be addressed to Mrs J. Mant, Secretary to the Practice Organization Committee, at 14 Princes Gate, London SW7 1PU.

ROYAL COLLEGE OF GENERAL PRACTITIONERS/STANNING OVERSEAS FELLOWSHIPS 1977

Through the generosity of Mr Ellis Stanning, the Royal College of General Practitioners offers overseas travelling fellowships for younger doctors which are awarded annually with the following aims: "To provide an opportunity for study and to compare general practice abroad; to enable study of some particular aspect of general practice abroad; to learn about other systems of medical care; to report on their experience to the profession in the United Kingdom". Applications for these travelling fellowships are now invited from members and associates of the College who are principals in general practice in the UK of at least three years' standing, and who are under 38 years of age at the time of application. Enquiries should be made to the Secretary, Royal College of General Practitioners, 14 Princes Gate, London SW7 1PU. The closing date for applications is 31 December 1977.

FUTURE COURSES

13-17 Ages of Man (Part 5).

October 1977
7-9 Five Years On In Practice (Part 1).
November 1977
7-11 Five Years On In Practice (Part 2).
March 1978

MEDICAL NEWS

UNIVERSITY OF GLASGOW

Dr T. Stuart Murray, MRCP, MRCGP, DRCOG, has been appointed to the newly

created General Accident Senior Lectureship in General Practice at the University of Glasgow.

Dr Murray was in general practice

until May 1975, when he joined the Department of General Practice at the University of Glasgow as Research Fellow. He takes up his new appointment on 1 October 1977.

His published work includes articles in the Lancet and the Journal of the Royal College of General Practitioners.

ROYAL COLLEGE OF SURGEONS OF ENGLAND

Dr J. A. S. Forman, OBE, FRCGP, General Practitioner, Barnstaple, North Devon, has been co-opted to the Council of the Royal College of Surgeons of England.

HEALTH EDUCATION COUNCIL

Dr M. J. Whitfield, MA, MRCGP, DPH, DCH, General Practitioner, Bristol, is a member of the Health Education Council.

DISABLED DRIVERS

Cash option

Disabled drivers with a vehicle or private car allowance under the pre-1976 vehicle scheme are to have the choice of drawing the Mobility Allowance for the first time without a medical examination and without an age limit.

This change will entitle many thousands of disabled drivers to have the Mobility Allowance (rising to £7 a week in November 1977) for the first time.

Discounts

Mr Alf Morris, Minister for the Disabled, has drawn attention to financial concessions available to disabled people for goods and services to aid mobility.

These include 17½ per cent discount from Kenning Car Hire, 15 per cent discount on new cars from Chrysler, British Leyland, and Vauxhall, and a discount of about 18 per cent on the purchase price of Escort 1.3 Popular automatics from the Ford Motor Company.

ADVERTISEMENTS FOR CIGARETTES AND TOBACCO SUBSTITUTES

Mr D. Ennals, Secretary of State for Social Services, has announced a strengthened code to be followed in cigarette advertising. This has been agreed by the tobacco industry, the Advertising Standards Authority, and the Health Departments of the UK.

The new rules govern advertisements associated with active sport or with femininity and it has been agreed that the code will be extended to cover all advertisements for cigarette com-

ponents, including tobacco substitute material.

This means that advertisements with connotations of health care are to be banned and so will all words such as 'safe'. A new rule will eliminate the depiction of participants and spectators at sporting events, and advertisements which suggest that smoking enhances feminine charm will not be allowed; nor will those which suggest that smoking is more closely associated with the rich, the successful, or the go-ahead members of the population.

DANGER OF SALINE EMETICS

The death of a 67-year-old woman was recently attributed at an inquest to the advice given by her general practitioner to take several cups of salt water in order to induce vomiting as she had taken five tablets of amitriptyline ('Tryptizol') the tricyclic antidepressant. McGouran (1975) had previously reported a case of salt overdose.

The current edition of the British National Formulary 1976-78 warns that saline draughts are "dangerous" as a method of making poison victims vomit.

Reference

McGouran, R. C. M. (1975). British Medical Journal, 4, 386.

CHILDREN IN CARE

The number of children in the care of local authorities on 31 March 1976 was 100,628 (England 95,786 and Wales 4,842). This represents 7.5 per thousand of all children under 18 in England and 6.4 per thousand in Wales.

The average cost to a local authority of keeping a child in care was £35 a week in both England and Wales. The average cost to an authority of maintaining a child in a community home

The biggest single cause of children coming into care in the year ending 31 March 1976 was a short-term illness of a parent or guardian.

NEW BENEFIT FOR DISABLED MARRIED WOMEN

A non-contributory invalidity pension will be payable from 19 November 1977 to married women of working age who are incapable both of their normal household duties and of paid work. It is estimated that 40,000 married women may be eligible to receive tax-free benefit of £10.50 a week.

It is understood that the medical

report will normally be completed by the disabled housewife's own family doctor.

SYMPOSIUM ON RHEUMATOLOGY

The Royal Medical Society is holding a symposium, Current Thinking in Rheumatology, on 28 and 29 October 1977. Enquiries should be addressed to: The Symposium Convener, Royal Medical Society, Bristo Street, Edinburgh EH8 9AL. Tel: 031-667 7969.

FALL IN NUMBER OF STUDENT HEALTH VISITORS

The Council for the Education and Training of Health Visitors is concerned about an expected ten per cent drop in student health visitors in 1977 compared with 1976.

The Council has warned that this drop represents a fall of 15 per cent in the number of students taking health visitor training since 1974.

ADMISSIONS TO MENTAL HEALTH HOSPITALS

In 1975, out of 175,000 admissions to mental illness hospitals and units in England, about 118,000 (67.4 per cent) were readmissions.

During the last ten years the number of patients in mental illness hospitals in England has fallen from 120,000 to 87,000.

PEOPLE IN PRISON

There were more people in prison last year than at any other time this century, according to a recent Home Office report.

Reference

The Guardian (1977). 22 July.

REPORT OF THE HEALTH SERVICE COMMISSIONER

Emergency admissions to hospital

Sir Idwal Pugh, Health Service Commissioner, in his third report for the Session 1976-77, states: "In my opinion a health authority has a duty to provide accommodation when a patient from one of their districts needs admission to hospital immediately as an emergency. The authority's failure to provide a hospital bed for the mother when she

required one in a medical emergency amounted to a failure in a service which they had a duty to provide; I must therefore criticize them for this."

Discharge letters

The Health Service Commissioner has received a complaint from a patient that the health authorities at a hospital failed to send a report to her family practitioner. In the particular case the summary was not sent to the family practitioner until 17 May 1976, although she had attended outpatients on 27 February 1976. The Health Commissioner has concluded: "I regard this excessive delay as a matter for criticism", and recommends that an apology is due to the complainant.

Reference

Annual Report of the Health Service Commissioner 1976-77 (1977). London: HMSO.

MERRISON REPORT

Mr D. Ennals, Secretary of State for Social Services, has announced that the Government has decided to accept the main recommendations of the Merrison Committee on the regulation of the medical profession.

In particular, it approves of the proposal that the General Medical Council should be given responsibility for co-ordinating all stages of medical education and should maintain an indicative specialist register. The Government also accepts that the General Medical Council should be given power to control the registration of doctors whose mental or physical health is such as to endanger their patients.

The Government also accepts that there should be a majority of elected members, but believes that the chief medical officers, or their deputies, of the four Health Departments should have seats on the General Medical Council.

DEATHS FROM HYPOTHERMIA

Deaths in England and Wales attributed solely or mainly to hypothermia were 16 in 1974 and 17 in 1975.

HOSPITAL KITCHENS

In a circular issued by the Department of Health and Social Security, health authorities have been instructed that they must tell local authority environmental health departments that their officers are free to visit hospital kitchens at any time without specific invitation or prior notice.

ABORTION RATES

The Department of Health and Social Security has reported that the abortion rate per 1,000 women aged 15 to 44 in the year 1974 was:

England and Wales	11.6		
USA (1973)	16.5		
Sweden	19.2		
Denmark	24.3		

PRESCRIPTION OF DIAZEPAM

Diazepam was the most commonly prescribed drug in the USA in 1976.

EXHIBITION OF CLOTHING FOR HANDICAPPED ADULTS AND CHILDREN AND INCONTINENT PATIENTS

The Disabled Living Foundation is holding an exhibition of clothing for handicapped adults and children and for incontinent patients, which will take place in the nurses' recreation hall, adjacent to the nurses' home of the Kent and Canterbury Hospital, Ethelbert Road, Canterbury, from 12 to 14 October 1977. Protective garments, underwear, outerwear, and adapted clothes will be shown to demonstrate how to ease clothing problems of the handicapped and those of incontinent adults. Officers who visit are reminded that expenses can be claimed from the employing authorities.

FREE MOVEMENT OF NURSES WITHIN THE EEC

Mr David Ennals, Secretary of State for Social Services, has announced that from 1979 nurse training leading to state registration of nurses responsible for general care, and equivalent levels, will be co-ordinated within the European Economic Community and that member states will give mutual recognition to these qualifications allowing free movement of nurses within the Community.

GRANT TO PHARMACISTS

The Department of Health and Social Security has sent a notice to family practitioner committees in the NHS. introducing a £1,000 grant to pharmacy contractors who take on pre-registration students.

Reference

Department of Health and Social Security (1977). HN(FP)(77)32.

COST OF PRESCRIPTIONS

The Pharmaceutical Services Negotiating Committee reports that the cost of prescriptions dispensed in England in February 1977 was as follows:

Total number of	
prescriptions	23,956,470
Total cost	£40,714,216
Average fee	24.39p

Reference

Pharmaceutical Journal (1977). 219, 6.

SOCIAL SECURITY FRAUDS

The number of successful prosecutions in respect of benefit fraud were as follows: 1972 - 12,025; 1973 - 11,673; 1974 - 13,473; 1975 - 15,006; 1976 - 18,711.

KEEPING OLD PEOPLE AT HOME

There is now no hope of meeting official guidelines on the growth of services designed to keep elderly people in their own homes as long as possible, and revised guidelines will be published in the autumn. They will make clear the Government's main objective to keep old people in the community as long as possible. But public expenditure constraints now mean that targets must be changed.

Reference

The Times (1977). July.

THE CIVIL SERVICE

The Department of Health and Social Security employed an additional 2,933 staff in the year 1976.

Reference

Civil Service Statistics (1977). London: HMSO.

JOINT COMMITTEE ON POSTGRADUATE TRAINING FOR GENERAL PRACTICE

The Joint Committee on Postgraduate Training for General Practice and the Royal College of General Practitioners have approved the vocational training schemes at: RAF Chessington (SHO post in rheumatology and rehabilitation), Cleveland, and Lister.

The following vocational training schemes have been reapproved for a period of five years: Banbury Linked Scheme 2; Barnet; Blackpool, Victoria Hospital; Davyhulme, Park Hospital; East of Scotland; Halifax; Ormskirk; Paisley; Rugby; and Windsor 1.

All these schemes are recognized by the Royal College of General Practitioners for the purposes of the MRCGP examination.

SIMG CONGRESS

The SIMG Congress on General Practice will be held on 10 to 12 November

1977 in Dresden, East Germany. Those interested should write to Dr Peter Frank, Ash House, Ash Lane, Hale, Cheshire.

CORRECTION

Dr R. A. Savage apologizes for omitting his acknowledgements in the article, published in the June 1977 issue on doctor's attitudes to women in medicine, which were as follows:

We wish to thank the principals,

trainees, staff, and patients in both group practices for their co-operation. We received a grant from the Research Foundation of the Royal College of General Practitioners, and invaluable advice and encouragement from Dr R. J. F. H. Pinsent, the Research Advisor. Miss H. Openshaw at the Hope Hospital, Salford, typed the draft and manuscript most expertly. Thanks are also due to our spouses for their advice and patience while this paper was being prepared.

LETTERS TO THE EDITOR

HOW MANY PATIENTS?

Sir.

None of your correspondents have described the threatening feeling in a practice when data collection reveals enormous variations in the patterns of work.

In our six-man practice we have nearly full lists, an active child health programme, attached nurses and health visitors, good local outpatient diagnostic facilities, and short hospital waiting lists. We were shocked when we finally received the results of the first year of the 1970/1 National Morbidity Survey (Table 1). One partner has one of the highest episode rates for the 0 to 4-year age group in the whole National

Morbidity Survey. He thought this was because "he follows up his patients more frequently". Data do not support this. In fact his patients consult for more illness and the rate per episode is not significantly different from the other partners'. In addition, Dr E. has the highest rates recorded in the practice for all parameters measured.

On the other hand Dr B. has the lowest rates in the practice with uniformly lower rates than the whole practice.

What is the difference? Each considers himself to be practising "good medicine", but good for whom?

If we were to consider our practice with the two partners with the lowest and highest rates working together as a two-man practice, we would obtain the figures in Table 2.

This reveals a difference of about 20 per cent in workload. The hard-working high-rate partners flattering themselves on how hard they worked would merely be seen by their low-rate colleagues as doctors "at the beck and call of their patients".

The two partners with the lowest rates would see 20 per cent fewer patients and perhaps might be giving more time to each but would be wondering what the fuss about full lists was all about. They would support Fry (RCGP, 1973).

As it is, with all the partners working as a group, the low-rate doctors subsidise in terms of time the habits of the high-rate doctors.

Table 1. Episode rates of Ashford practice compared with National Morbidity Survey (OPCS, RCGP and DHSS, 1974).

	Dr A	Dr B	Dr C	Dr D	Dr E	Dr F	All practices	Ashford practice	5th percentile	90th percentile
Episode rate per person on list Consultation	1.7	1.7	1.9	2.1	2.2	2.0	1.8	1.9	1.2	2.3
rate per person on list Patient consulting rate per	3.1	2.7	3.3	3.2	3.5	3.4	3.0	3.2	2.0	4.5
person on list Episode rate per person under four years old	0.6	0.6	0.7	0.7	0.7	0.7	0.7	0.7	0.6	0.7
on list	2.7	2.5	2.5	2.8	3.9	2.8	2.8	2.9		