REPORT

The eighth World Conference on Family Medicine

THE eighth World Conference on Family Medicine/General Practice was held from 14 to 19 May 1978, at Montreux, Switzerland. The meeting was attended by about 1,200 family physicians from all over the world, many of them accompanied by their wives or husbands.

Montreux had many advantages as a setting, being easily reached from many of the participating countries, and the Conference Centre proved a satisfactory venue for a meeting of this size. Nevertheless, two considerable disadvantages about Switzerland emerged: first was the remarkable cost of living, which induced even the Americans to complain loudly and secondly, it became clear that holding a world conference on family medicine in a country whose organization of general practice on a national scale is so new had certain problems.

The meeting itself was held predominantly in two main rooms, the Conference Hall and the *Petite Salle*, an attractive euphemism for a room which held 750 people. In addition, smaller meetings were held in various committee rooms, some of which consisted of open committee meetings of the World Organization itself. Other meetings were also arranged for informal groups with common interests, such as the meeting between editors of journals of national colleges and academies.

This World Conference was attended by about 30 doctors from Britain who were particularly pleased to see the President, Dr Stuart Carne, General Practitioner, London who is well known in the British Isles as Honorary Treasurer of the Royal College of General Practitioners. Dr Carne was not only the first British but the first European President, and British interest was strongly represented on the opening day by the Royal Air Force Band who played the platform party in.

Monday

Among the themes of the meetings was "The future of the family physician" and the opening session on the first day provided a sharp contrast of speakers from the USA, Singapore, East Germany and Holland, who described greatly differing roles of the family physician.

A gradual theme emerged that the family physician's work is intimately related with the local culture and his role is largely determined by the stage of development, social life, and cultural expectations of the people he serves—whatever the country he or she practises in.

Later the same day the Balint Society provided a public demonstration of group work led by Mrs Enid Balint (UK) and Dr M. Wood from the State of Virginia (USA). Problems were presented to the group from two doctors, one from the UK and one from Australia. After a lengthy group discussion the opportunity was given to members of the audience to comment and question on the proceedings.

Tuesday

Throughout the meeting alternative sessions were held so that at any given time members attending the Conference had a choice of at least two topics. Among the most interesting on the Tuesday was the work of the World Organization's Standing Committee on Bibliography which was chaired by Professor I. R. McWhinney from the Department of Family Medicine at the University of Ontario, Canada. Professor McWhinney reported the work of his Committee to achieve much greater recognition of the journals of general practice throughout the world. Negotiations had taken place with the authorities of Index Medicus with a view to having the journals of family practice indexed automatically; at present the index authorities were applying criteria of scientific merit. It was pointed out that some journals of general practice including the Journal of the Royal College of General Practitioners, Huisarts en Wetenschap and the Journal of Family Practice were already included.

The doctor's wife

On Tuesday afternoon WONCA broke new ground when it held a session on "The doctor's wife", where, for the first time, the panel consisted entirely of doctor's wives and the chair was taken by Mrs D. J. Pereira Gray (UK), not a doctor herself. The meeting attracted over 600 people, many of whom were doctors.

In the opening paper Mrs Pat Game (Australia) described her personal plan for organizing time in which the doctor could be alone with his family.

Mrs Shirley Walpole (Australia) described an extensive tour of the Australian outback in which she emphasized the loneliness of single-handed practitioners and their wives who worked there, and Dr Sally Nelson presented an analysis of the doctor/spouse relationship which is published in this issue of the *Journal* (p. 585).

A lively discussion followed and among the points

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made were the need for doctors and their families to have their own family physicians, and the need to recognize problems in their own families early and go for help (see Editorial p. 579).

Wednesday

On the Wednesday the theme was "Family doctor in Europe and the family". The European Society for General Practitioners presented papers on family counselling, research, and on continuing medical education.

Thursday

Among the standing committees meeting on Thursday 18 May was one on classification. This had already published the *International Classification of Health Problems in Primary Care*, which was being used increasingly in English-speaking countries throughout the world.

Professor Hiram B. Curry chaired the standing committee on teachers' training which highlighted a number of problems, particularly the role of the hospital specialists in teaching residents family practice.

In the afternoon the session on publishing in general practice included as speakers Dr Stephen Lock, Editor of the *British Medical Journal*, Dr Robert Rakel from the USA, and Mr Jon Baker from Australia.

In his paper Dr Lock argued against the use of matched controls from general practice, because he felt that individual practices were too idiosyncratic—a view that was disputed in the subsequent discussion.

In the same afternoon a session on hypertension attracted interest, particularly among members from the European countries. Dr Tudor Hart (UK) presented the view on screening on hypertension for which he is world famous, and was interestingly opposed by Dr C. Van Weel from Rotterdam, Holland, who raised numerous questions about the efficiency and effectiveness of such screening.

The session on epilepsy was generally found to be extremely helpful. Professor Hiram B. Curry of the Department of Family Medicine at the University of South Carolina, USA, formed a working partnership with Dr M. J. Linnett, General Practitioner, London, and they complemented each other admirably on this most important topic.

Assembly

The WONCA General Assembly was held on Thursday 18 May. Dr Karl Mabeck, of the Danish College of General Practitioners made a formal speech of protest criticizing the scientific programme, which he considered had been "badly organized and badly coordinated". Copies of his speech were distributed to all the attending delegates.

Dr Stuart Carne, who was in the Chair as President, said he had not received notice of these points but they would be considered by the WONCA Council.

Friday

On Friday 19 May the sessions included the topics "Better prescribing" and "Alcoholism" and at the concluding session on the care of children the closing paper was delivered by Dr Stuart Carne, General Practitioner, London, in which he outlined his own personal approach to many of the practical problems of day-to-day general practice in the community.

Summary

The Eighth World Conference on Family Medicine was a useful exercise and marks a further step on the road to the evolution of academic organizations of general practice/family medicine. Its single main achievement was to bring together 1,200 active and enthusiastic general practitioners, especially those involved in teaching and research, who were representing their various national organizations of family medicine. Like many big conferences much of the work took place out of the conference room, in the corridors and over coffee. Certainly many new contacts were made and links established between organizations concerned with promoting general practice throughout the world.

The quality of the formal papers was variable, both in content and in presentation. At best, one or two of the presentations ranked with the highest level and were presented with professional skill. At the other extreme, however, were papers which would not have been acceptable from vocational trainees in some of the participating countries, and the general standard of visual aids was extremely disappointing. The time has surely passed when, in a world conference of family medicine in 1978, internationally famous general practitioners should be showing slides that are cluttered, unclear and unreadable from the back of the room. Only the speakers from Holland consistently presented slides of professional quality with short clear messages visible from all over the conference hall.

It is interesting that the criticism at the end of the meeting came from one of the newer Colleges of General Practice, formed only in the 1970s. An interesting parallel is emerging that just as it is the younger members of the older Colleges who are pushing hardest in meetings to raise the standards of the work of the Colleges, so it appears it is some of the newer and younger Colleges who are challenging most sharply the methods and work of their World Organization.

Critical comment and discussion is to be welcomed, although inherent difficulties of organizing world conferences with responsible officers working thousands of miles apart with very limited resources need to be remembered. Those who wish for a more professional approach must, of course, help to find a way of meeting the consequential expenses which may well be considerable.

It is fitting that the new President-elect should be Dr Hoffmann of Holland who has been a distinguished and active figure in WONCA for several years, and who appropriately represents the country that made the greatest academic impact at this meeting.

It is also appropriate that the next and Ninth World Conference on Family Medicine will be held in the USA, with an American President, Dr E. Kowalwski presiding. It is certain that with the resources of such a large country and active support of the American Academy of Family Physicians, the next conference will mark a further development in world general practice.

JOURNAL CORRESPONDENT

OBITUARY

Lord Platt, MD, M.SC, FRCP, FRCGP

THE College may be corporately as sad as any individual at the loss of a great friend. The sadness is the greater when the friend was also a great man of medicine. There will be many who will laud Robert Platt's achievements in many fields. We in our College must gratefully record our debts to him.

Lord Platt's interest in general practice began when he changed his job as a consultant physician in Sheffield to that of Professor of Medicine at Manchester. There he and his great colleague Lord Stopford were the prime movers in the creation of a university practice in the Darbishire House Health Centre, opened by the then Minister of Health, Ian McLeod, in March 1954.

In 1965, a year before he retired, he decided to do something more for general practice and instigated the creation of a part-time lectureship which led to the first chair of general practice in England in 1972. In this work he provided significant opportunities for general practice to advance academically and subscribed to one of the College's aims at its foundation.

His Rock Carling monograph written in 1963 paid great attention, and some tributes, to general practice. It later appeared that, in the many long and observant visits which he made to practices, he was, with typical prudence, surveying the field from which he intended to select his part-time lecturer.

Yet while promoting the College cause these activities were parochial. His help in the wider field of the College was formidable, and recognized by his acceptance of an Honorary Fellowship in 1963. He was further recognized by his country when he was made a Life Peer in 1967

It was in 1965 that he wrote in a foreword to the College/NBA Design Guide: "At this time of reappraisal and new opportunity in general practice there is this substantial body of general practitioners who believe that their future lies not in further shedding of their work on to the hospitals but in the thorough reorganization of their service".

He quickly showed that this was no idle comment. He

was immediately influential in establishing the legitimacy of research in general practice. He supported the theory that research needs a laboratory but not always a bench. He was the chairman of a committee which sponsored Keith Hodgkin's work from which came Towards Earlier Diagnosis (1973). It was his recognition of its importance and his powerful promotion that led the Medical Research Council to fund the College Oral Contraceptive Study, a study which established at once the possibility and value of large-scale clinical studies from general practice.

His views on much of contemporary research were epitomized in his Harveian Oration (1967) when he warned against the dangers of medical research into "the trivial, the irrelevant and the obvious". He never wavered in his support of the relevance of well conducted general-practitioner studies.

Clad in his maroon dinner jacket he was a familiar and welcome figure at College dinners, a repeated evidence of his feeling of belonging.

Twelve years ago he anticipated the changing role of general practice and the need for training. "The general practitioner," he told his new part-time lecturer at Manchester, "should become the new general physician. See that he is trained accordingly." One might readily accept that good general medicine is the foundation of good general practice, yet this belief is not always demonstrated in the provision of hospital posts for training.

We shall miss Robert Platt—that cultured man whose music room, large though it was, seemed dwarfed by two grand pianos and a platoon of 'cellos, servants of his major hobby. He will always be remembered by our College which he favoured with help, and graced with his fellowship.

P. S. BYRNE

References

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