

At this meeting the following agreements were reached between the representatives of these two committees and were subsequently endorsed by both parent bodies. First the JCC endorsed the two principles recommended by the Council of Postgraduate Medical Education which had been accepted by the Royal College of General Practitioners, the General Medical Services Committee, and the JCPTGP, about the policy for selecting hospital posts and posts in community medicine to be used for gaining the prescribed experience in vocational training:

1. The Joint Committee on Postgraduate Training for General Practice should set the standards for general practice training—including criteria for approval of hospital or community medicine posts for general practice training—and should exercise general oversight of the arrangements.
2. Regional postgraduate education committees, working to the criteria laid down by the JCPTGP, should select posts suitable for general practice training from among those posts recognized by the appropriate Royal College or faculty for training in its own specialty.

It was agreed that senior house officer appointments in general surgery will be considered acceptable for the purposes of prescribed experience as an alternative to accident and emergency appointments. It was also agreed that the constitution of the JCPT should be amended so that the JCC appoints three full members which will represent the Central Committee for Hospital Medical Services, the Hospital Junior

Staffs Committee, and the Conference of Colleges.

It was also agreed that the fourth member of the appeals committee should be a consultant in clinical practice nominated by the JCC.

### GRAVES MEDICAL AUDIOVISUAL LIBRARY

Graves Medical Audiovisual Library have produced the 1979 catalogue containing over 1,200 tape-slide titles.

For the first time titles are presented as an alphabetical subject index, using MeSH vocabulary (Medical Subject Headings, as used by the United States Library of Medicine and in *Index Medicus*).

Each entry gives the title, author's name, running time, number of slides, a short appraisal, suitable audience, publisher, and the date of publication.

The catalogue in its new format was derived from the print-out of the (Marc) Computer at Southampton University Library.

All tape-slide programmes are now recorded on cassette, 'open reel' tape having been withdrawn at the end of last year. Illustrations are 35mm transparencies.

Doctors wishing to obtain the 1979 catalogue (free) should contact Graves Medical Audiovisual Library, PO Box 99, Chelmsford CM2 9BJ. Telephone (0245) 83351.

### NATIONAL HEALTH SERVICE—ALLOCATION OF RESOURCES

Mr David Ennals, Secretary of State for Social Services, has announced that the

total allocation to the health service for the year beginning April 1979 represents an increase of two per cent in real terms on the current year.

Gross figures vary but every region will receive at least one per cent real growth in its budget.

### TEACHING OF FAMILY PLANNING

A conference on the essentials in contemporary teaching of family planning is being held at the Royal College of Obstetricians and Gynaecologists on 1 June 1979.

Speakers include Mr John Loudon, Professor Martin Vessey, Mrs K. Dunnell, Mrs P. Crabbe, Professor R. Harden, Dr E. Wilson, Dr Michael Briggs, and Dr Egon Diczfalusy. Applications and enquiries should be made to the Secretary, Joint Committee on Contraception, 27 Sussex Place, Regent's Park, London NW1 4RG.

### CORRECTION

Dr Lionel Kopelowitz, JP, MRCP, General Practitioner, Gosforth, Newcastle-upon-Tyne, has been elected President of the Society of Family Practitioner Committees. Dr Kopelowitz is interested in vocational training for general practice and lectures regularly on the Newcastle vocational training scheme.

His name was incorrectly spelt in the February issue and this error is much regretted.

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## LETTERS TO THE EDITOR

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### URINE INFECTION IN GENERAL PRACTICE

Sir,  
In his methodical survey of the usefulness of urine microscopy in general practice (February *Journal*, p. 103) Dr Wilks necessarily deals only with urine specimens which can be sent to the laboratory as well as being examined by microscopy in the surgery. Such specimens generally come from adults, or from children who can voice their symptoms. But especially valuable can be microscopy of samples from febrile babies, samples too small or else too crudely collected to qualify for laboratory examination. When they

show pyuria, the diagnostic information is quick and particularly welcome.

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### UNWANTED PREGNANCY IN GENERAL PRACTICE

Sir,  
It is difficult to see the relevance of the article by Dr David Tunnadine (February *Journal*, p. 108) to the provision of NHS abortion services.

Apart from the psychoanalytical presumptions of the discussion, the hypothesis presented is seriously

weakened by the absence of any data on control women. Are the personality traits described exclusive to all women requesting abortions? How would the personalities of Miss A. and Miss B. compare with those of matched patients? In addition, what evidence does Dr Tunnadine have that the patterns of doctor/patient relationship described are common to all, or even the majority of, women seeking abortions?

Unfortunately, the lack of such data cannot be remedied by recourse to a theory which suggests that "the basic fault (determining whether a woman seeks an abortion) probably occurs at the time of separation (weaning) from her mother". It would be a pity if the value judgements implicit in this paper