

would be willing to shorten their courses for science graduates to four years he believed that the realities of curriculum design, the move towards an integrated approach in medical teaching, cutting across departmental approaches, and influences of the examination structure, all operated against the concept.

Discussion

The discussion which followed centred on the problems of mature students. Opinions varied about the influence they had on the student body and about their subsequent performances, and also about the help available over economical and financial problems peculiar to this group of students. The special position of dental graduates was discussed: many medical schools were reluctant to admit such applicants to medicine unless they showed a clear commitment to oral surgery, and the nation's needs might be met by only one such admission per school per year. Professor W. I. N. Kessel, from the GMC Education Committee, reminded delegates that selection procedures not only selected medical students but influenced (he believed adversely) sixth-form education. Delegates would realize that however many overseas applicants and mature students were admitted, this proportion was of a finite number and could be interpreted as excluding otherwise ap-

propriately qualified UK born students who would work longer as service doctors within the National Health Service.

Comment

It was clear that many delegates shared a sense of inadequacy in the face of the complexity of the issues involved. It was generally felt, however, that given the inherent problems of current selection procedures, selection was carried out fairly and with great care. The need for research into subsequent student performance and performance as a doctor were clearly desirable. The actual administrative structure for the selection process was not discussed but informal discussion revealed that decisions would be taken by as few as one or two individuals or as many as a large complex committee structure allowed. Most medical schools were aware of the need to keep the situation constantly under review.

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G. R. TUDHOPE

References

- Interdepartmental Committee on Medical Schools (1944). Goodenough Report. London: HMSO.
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OBITUARY

C. J. Swanson, OBE, MB ChB, FRCGP

C. J. SWANSON practised for 46 years from Aberfeldy, a Scottish small town rural practice. A founder member of our College, he expressed his enthusiastic faith in the value of independent general practice by giving his time to yet another cause, although he was already fully extended.

His unflinching defence of general practice and its *Caritas* was invaluable; he chose the medico-political area, the BMA, and the Scottish and United Kingdom General Medical Committee, from which to further its cause and attained many of their highest offices.

He was the wise and outspoken touchstone for all our medico-political affairs, and the Scottish Office, as well as his Scottish colleagues, practitioners and specialists alike, all missed him greatly when he finally retired a few years ago. His hand in developing many special

features which make perhaps the Scottish National Health Service Act a bit more pliable will be clear to future historians. Yet he remained a rugged general practitioner, gaining the affection of his patients and the local community. His sense of fair play made him an excellent chairman; he was hard-hitting in debate and always put the care of the patient first.

His stamina in being able to sustain extensive travelling and hard work on behalf of patients and profession was a byword, as was his courage in remaining unruffled during landings in rough weather at Turnhouse Airport.

We were fortunate that he was still able to attend some local College meetings in his retirement, when he was full of interest and with his own contributions to make. He will remain more than life-sized in our memory.

E. V. KUENSSBERG

Mervyn Stuart Patterson, MB, Ch.M, FRACGP

ON Christmas Eve, 1978, there died, in Queensland, in his 94th year, Dr Mervyn Stuart Patterson, one of the oldest and most respected general practitioners in Australia.

Qualifying in medicine in 1908 at the University of Sydney, he practised for 61 years in Ipswich, one of the largest provincial towns in Queensland. When he graduated it was usual for general practitioners to undertake all the surgery in their practices. Mervyn Patterson was dextrous with his hands and was skilful