ings and with all necessary ancillary help. Whether in town, country, or inner city this should not be an unattainable goal for a caring, forward-looking profession, nor one of which we should be ashamed. The buck indeed should stop with us as general practitioners. Conceptions such as combined lists, zoning of home visits, and an industrial item-of-service type contract have little place in this essentially personal approach.

ANTONY BARTER

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Sir,

I was interested to read Dr Pereira Gray's article on personal care (November *Journal*, p. 666). The following figures (Table 1) refer to face-to-face consultations in our practice and include consultations both in the surgery and on home visits. There are three partners and there was a partnership change in 1975; only patients permanently registered with the practice are included. There was one trainee throughout the period, and the average list sizes were: 1975: 5046; 1976: 5280; 1977: 5510; 1978: 5785.

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NATIONAL TRAINEE CONFERENCE

Sir.

May I give general practice trainees advance notice of the National Trainee Conference to be held on 15, 16, and 17 July 1980 in Exeter?

This triennial Conference is to be hosted by the trainee group of the Department of General Practice of the University of Exeter. The theme will be "Vocational Training after the Act". Further details of the programme will be available later.

I should like to take this opportunity to invite ideas from all trainees on topics within this theme that they would like to discuss at the Conference. Any ideas or comments would be welcome.

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BALINT REASSESSED

Sir,

With reference to Dr B. R. Barnett's article (September *Journal*, p. 520) about the scientific status of Balint's work, I think that it is important to emphasize that Popper's hypotheticodeductive method is only one of a number of theories about what constitutes scientific conduct.

Hayek (1967) and Goudge (1961) have both tried to temper Popper's hard-line view of falsifiability being the hallmark of scientific endeavour by allowing various interpretations of what exactly counts as a prediction. They feel, for example, that 'post-diction' (the testing of competing theories by reference to past events) has a place in science.

However, Toulmin (1963) shows how this got out of hand, leading to almost anything being able to display some 'predictive' power. He suggests that scientific conduct involves the fitting of phenomena into theoretical frameworks, leading to a more profound understanding of their structure, the testing of predictions having only secondary importance. He gives the example of predicting tides: these can be accurately predicted, but this tells us nothing about why they happen.

I believe that research into various aspects of medicine would benefit from a balanced synthesis of such ideas. Such an approach would be of more use than shouting people down merely because they do not conduct their work within the narrow constraints of the hypothetico-deductive method.

K. Priscott

Table 1. Number of doctors consulted by each patient 1975 to 1978.

	Number of doctors consulted					Total number of patients	Percentage of patients seeing
Year	1	2	3	4	5	consulting	one doctor
1975	1,823	939	344	101	12	3,219	57
1976	1,943	956	321	76	0	3,296	59
1977	2,100	949	350	81	0	3,480	60
1978	2,260	1,108	413	79	0	3,860	59

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References

Goudge, T. A. (1961). The Ascent of Life: a Philosophical Study of the Theory of Evolution. London: Allen & Unwin.

Hayek, F. A. (1967). Studies in Philosophy, Economics and Politics. London: Routledge & Kegan Paul.

Toulmin, S. E. (1963). Foresight and Understanding: an Enquiry into the Aims of Science. London: Hutchinson.

DEFINING PARADIGM

Sir.

I wish to thank Dr Greene (December *Journal*, p. 754) for drawing attention to a more conventional meaning of the word 'paradigm'.

I am not, however, guilty of the error that he implies since the definition quoted in my article refers to the usage of Thomas Kuhn (1971) in his seminal work to which I referred in my article.

If Dr Greene cares to consult Mackenzie (1977) he will find a discussion on Kuhn's use of the term 'paradigm'. Mackenzie points out that the concept is not without ambiguity and quotes the Shorter Oxford Dictionary as giving 'example' or 'exemplar' as one of the uses.

Nevertheless, Mackenzie says: "While Kuhn goes on in his treatise to use the concept of a paradigm in a variety of other related ways, the subsequent uses are all derived from this original meaning (i.e., universally recognized scientific achievements that for a time provide model problems and solutions to a community of practitioners) and are all compatible with it"

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References

Kuhn, T. S. (1971). The Structure of Scientific Revolutions. 2nd edn. Chicago: University Press of Chicago.
Mackenzie, B. D. (1977). Behaviourism and the Limits of Scientific Method. p. 4. London: Routledge & Kegan Paul.

CARING WITH CONFIDENCE

Sir.

I feel a reply is required to the critical review of the Scottish Health Education Unit's booklet Caring with Confidence