

for the Royal College of General Practitioners.

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Figure 1 is an example of the type of encounter form used in the study. It does not, of course, refer to an actual patient—Ed.

CARING WITH CONFIDENCE

Sir,
I am sorry Ms D. Walster was not happy about my review of the Scottish Health Education Unit's booklet (*March Journal*, p. 187).

I understand that the book was aimed at staff in old people's homes, and I was making the point in my review that this book was not for general practitioners—a point which still stands and with which I assume she agrees.

My reference to the print being large

and clear was not a criticism, and I agree it is only sensible to produce a book in this way for people and patients who may have visual problems.

Finally, I did not know that this had been issued free to home helps in Scotland, and I think this is its correct usage and perhaps ought to be done in England and Wales as well.

A. P. PRESLEY

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BOOK REVIEWS

MORBIDITY STUDIES FROM GENERAL PRACTICE 1971-72. SECOND NATIONAL STUDY. STUDIES ON MEDICAL AND POPULATION SUBJECTS No. 26.

Office of Population Censuses and Surveys
HMSO, London (1979)
197 pages. Price £7

This is the Second Report of the National Morbidity Study, which began in 1970 and relates to data collected during the period November 1971 to November 1972 from 45 practices in England and Wales. Since the methods of collecting and recording data were basically the same as in the preceding period (1970/71), the statistics relating to numbers and types of episodes of illness are directly comparable for the two periods.

The result is a mine of information which provides as reliable a picture of contemporary morbidity patterns as the British general practitioner can hope to achieve.

As a basis for their diagnostic and operational thinking, this report, like its predecessor, should be compulsory reading for all postgraduate trainees, and should be widely used by trainers. Equally important, however, are the early chapters of both reports, which provide a vivid insight into the hazards that beset the validity of any multi-observer research project and illustrate the ingenuity, careful planning, and considerable hard work needed to minimize these.

Historically, these reports will form a landmark in the science of general medical practice; and the College can rightly be proud of them.

H. J. WRIGHT

THE ROYAL AUSTRALIAN COLLEGE OF GENERAL PRACTITIONERS, 1958-1978

W. A. Conolly, H. M. Saxby, J. G. Radford, F. M. Farrar (Eds)

Royal Australian College of General Practitioners
Sydney, Australia

160 pages. Price £1 plus postage

Those who are called upon to write the history of a living, growing institution face an almost impossible task. Were one author to try to tell the whole story the result would surely reflect his own interpretations and opinions. Individual bias may be lessened by involving many contributors but each will prepare his evidence in a different way. The task of editing such material is immense.

People look for different things in histories. Some go for facts. Who did or said what? When and why did they say it? What was ultimately decided? To these readers names and dates are the essence of history. Others look for something more subtle, the influence of a decision on the subsequent course of events as they affect the institution itself, or the world around it. Names and personalities matter less.

The Royal Australian College of General Practitioners has made a brave attempt to chronicle events in an interesting way, though the captious will say that the result is fragmented and that there are kangaroo-like jumps from facts and minutes to opinions, sometimes personal ones, and speculations as to hopes for the future.

The account, however, is an inspiring one, describing steady growth and successive achievements leading to the full establishment of the first Royal College to arise in the Southern hemisphere. There are interesting parallels with the

growth of the Royal College of General Practitioners and even more interesting divergences because of the different nature of problems of medical care encountered by our colleagues 'down under'. The College produced its great men in full measure. Conolly, Saxby, Radford, Kent Hughes, and Jungfer are names to conjure with.

By taking a middle course, this history does more for posterity than it does for contemporary readers so close to the events which have been described. Future historians, writing perhaps at the College's centenary, will look back at the events of 1958 to 1978 for an invaluable interim summary accurately describing the state of play during the College's first 20 years. The historians of our own College, now striving to catch up with our younger kinsfolk, are already examining the methods which have been used in compiling a history which they hope to emulate.

R. F. J. H. PINSENT

BEDSIDE DIAGNOSIS. 11TH EDITION

C. Seward and D. Mattingly

Churchill Livingstone
London (1979)

357 pages. Price £7.95

To review a book which is now in its eleventh edition appears, at first sight, to be a work of supererogation. During a period of 30 years many thousands of English-speaking students and doctors have voted on it with their pockets—not to mention those whose first language is Spanish, German, Portuguese, Greek, or Czech. With so great a cloud of witnesses, what need is there to say more?