

BUTTERWORTH PRIZE

The Butterworth Prize has now superseded the Butterworth Gold Medal. The prize will be awarded annually for an essay or a report on a subject of topical interest.

The subject for this year's competition is 'Medical Audit'. Applicants are invited to submit an essay which demonstrates their understanding of the term 'medical audit' as applied to general practice and which includes a description of an audit activity which they have carried out. The activity should have led to a change in clinical behaviour likely to benefit patients.

This competition is open to all fellows, members, and associates of the College. Entries, which should not exceed 10,000 words, must be typed on one side of A4 paper only, and be entered under a *nom de plume* accompanied by the author's name and address in a sealed envelope.

They should be addressed to the Secretary, Royal College of General Practitioners, 14 Princes Gate, London SW7 1PU, and marked 'Butterworth Prize'.

The closing date is 31 March 1981.

SOUTH-WEST THAMES FACULTY

11 October 1980

An MRCGP study day will be held at Queen Mary's Hospital, Roehampton. Applications should be sent to Dr A. Cairns, Worthing Postgraduate Medical Centre, Homefield Road, Worthing, Sussex.

30 October 1980

There will be a research study Afternoon, on 'Research in the Training

Practice'. Speakers will include Professor Paul Grob and Dr John Fry.

7 December 1980

The Annual General Meeting will be held with a symposium on 'Medicine and Music', in which Mr Leon Goossens and Mr MacDonald Critchley will take part.

Both the last two events will be held at the Epsom District Hospital. Details are available from Dr P. C. Stott, 39 Epsom Lane South, Tadworth, Surrey.

EXHIBITION ROOM

The main display concerns the training and deployment of the practice nurse, and there are also displays on the analysis of data obtainable from general practice (practice activity analysis) and a series of separate displays in the cabinets.

The office mock-up shows a number of different aspects of organization in general practice and includes three demonstrations of pre-addressed stencils and labels. There are a series of monographs on various aspects of organization in general practice available for interested enquirers.

It is proposed to collect as many 'practice introductory cards' as possible to display in the Exhibition Room in the next few months. The Exhibition Secretary, Dr R. M. Ridsdill Smith will be grateful to receive the introductory cards from as many practices as possible at 732, London Road, Larkfield, Kent, in time for display at the Annual General Meeting in November.

MRCGP EXAMINATION

The dates for the next MRCGP examinations are as follows:

October/December 1980

Written papers: Thursday, 30 October 1980.

Orals: In Edinburgh and London during the week ending 13 December 1980.

Closing date: 4 September 1980.

May/July 1981

Written papers: Thursday, 14 May 1981.

Orals: In Edinburgh during the week ending 27 June 1981 and in London during the week ending 4 July 1981.

Closing date: 19 March 1981.

The written papers will be held in London, Birmingham, Leeds, Manchester, Exeter, Newcastle, Edinburgh, Aberdeen, Cardiff, Belfast, and Dublin. These and other centres may be used as required, subject to a minimum (and in some centres maximum) number of candidates.

It may be necessary to limit the total numbers and candidates are therefore advised to apply well in advance of the closing dates. The application fee is £50.00 and the re-application fee £25.00. There is no charge for members of the College who wish to take the examination.

Application forms may be obtained from the Membership Secretary at the College.

FUTURE COURSES

September 1980

19-21 Five Years On In Practice: Part 1.

October 1980

13-17 Towards the MRCGP

27-31 Five Years On In Practice: Part 2.

MEDICAL NEWS

HONORARY DEGREE

On 30 May 1980, the University of Sheffield conferred the degree of Doctor of Medicine, *Honoris Causa*, on Dr S. M. Evans, BA, MB, B.Chir, retired General Practitioner, Baslow, Derbyshire.

The oration described how Dr Evans and his two predecessors had given over 130 years of family doctoring to the

people around Baslow, and described his career in Sheffield general practice. Dr Evans had been active in teaching Sheffield medical students the art of general practice, but "his main interest in his life has been caring for his patients: miners, quarrymen, the nobility, Sheffield executives, farmers, labourers, and their families."

This was the first occasion in which a British general practitioner was awarded an honorary degree at the University of Sheffield. The public orator was Professor E. Wilkes from the Department of Community Medicine, who was himself the first general practitioner to become a Professor in the University.

UNIVERSITY OF BRISTOL

Professor J. G. R. Howie, Professor of General Practice at the University of Edinburgh, has been appointed Jephcott Visiting Professor to the University of Bristol.

Professor Howie made a series of visits to Bristol between December 1979 and March 1980 and completed his report in May 1980.

W. VICTOR JOHNSTON ORATION

The 1980 W. Victor Johnston Orator was Professor I. R. McWhinney from the Department of Family Medicine at the University of Western Ontario, Canada. Professor McWhinney's subject was the meaning of holistic medicine.

POSTGRADUATE MEDICAL EDUCATION COUNCIL

Professor Robert Whelan, Vice-Chancellor of the University of Liverpool, has accepted an invitation from Dr Gerard Vaughan, Minister for Health, to become Chairman of the Postgraduate Medical Education Council in England and Wales. He will succeed Lord Richardson who has been Chairman since 1972.

ECONOMIC ADVISER AT THE DHSS

Mr J. D. Pole has been appointed Chief Economic Adviser (Under Secretary) to the Department of Health and Social Security with effect from 1 July 1980.

CHIEF SOCIAL WORK ADVISER

Mr David Colvin, Deputy Chief Social Work Adviser in the Social Work Services Group of the Scottish Office, has been appointed Chief Social Work Adviser to the Scottish Office with effect from 1 August 1980.

ROYAL COLLEGE OF PSYCHIATRISTS

The following general practitioners have been elected to fellowship of the Royal College of Psychiatrists:

J. P. Horder, OBE, MA, FRCP, FRCGP, FRC.Psych, General Practitioner, London; President of the Royal College of General Practitioners.

M. R. Salkind, Ph.D, FRCGP, FRC.Psych, General Practitioner, London, Lecturer in General Practice, St Bartholomew's Hospital, London.

E. Wilkes, OBE, FRCP, FRCGP, FRC.Psych, Professor of Community Health, University of Sheffield.

C. A. H. Watts, OBE, MD, FRCGP, FRC.Psych, retired General Practitioner.

It is thought that Dr J. P. Horder and Professor E. Wilkes are now two of only three doctors who have been elected fellows of three Royal Colleges—the Royal College of Physicians, the Royal College of General Practitioners, and the Royal College of Psychiatrists.

ATTENDANCE ALLOWANCE BOARD

Dr Katalin Schöpflin, OBE, FRCGP, of London, has accepted the Secretary of State's invitation to serve as a member of the Attendance Allowance Board with effect from 1 July 1980.

WINSTON CHURCHILL MEMORIAL TRUST

The Winston Churchill Travelling Fellowships are now being offered for 1981. Two of the categories are as follows:

The prevention of perinatal mortality and morbidity

Doctors, nurses, counsellors, and all others concerned with attempts to reduce infantile deaths, deformities, and illnesses both before and immediately after birth.

Independence in old age

Everyone involved with providing means of keeping old people mobile and independent: designers of aids, architects, social, medical and voluntary service workers, housing officers.

Further information and applications can be made to the Winston Churchill Memorial Trust, 15 Queen's Gate, Terrace, London SW7 5PR.

ACADEMIC FORUM ON MEDICAL EDUCATION

The Department of Health and Social Security have announced that Sir Henry Yellowlees, Chief Medical Officer, has now brought together a group who will meet him regularly for informal discussion of issues of interests both to the National Health Service and to those concerned with medical education at an undergraduate and postgraduate

level.

The membership of 15 was drawn from "the various academic interests in medical education" but does not contain a general practitioner.

CENTRAL INFORMATION SERVICE

The Management Committee of the Central Information Service Foundation has reported that the Service is now receiving an increasing number of enquiries. The Committee is considering the possibility of computerization and also of mounting symposia in the future.

AUDIT IN GENERAL PRACTICE

A conference on audit in general practice will be held at BMA House on 12 November 1980. Representatives of local medical committees and faculties of the Royal College of General Practitioners will be invited to appoint representatives.

NATIONAL SOCIETY FOR THE PREVENTION OF CRUELTY TO CHILDREN

Non-accidental injury to children, although far too common, is sufficiently rare for many general practitioners to have had little direct experience of what the NSPCC does with its annual expenditure of four and a quarter million pounds (over three quarters of the income to match this comes from donations). The answers are given in the Society's latest report, written by its new director, Dr Alan Gilmour. At a time when local authorities are being forced to make cuts even into services as vital as those for children, it is good to read that "The NSPCC provides one of the few growth points in the development of social work". The roots of the Society still lie in the skilled casework of its inspectors, who in all but a few of the very worst cases of child abuse are able to achieve some improvement. What is almost more important, and perhaps more likely to help future parents, are the many spheres in which the Society helps to train social workers. It has its own school of social work, and helps to run (with the local authority in Essex) a Marital/Family Violence Unit and (in the Farnborough area) a Family Craft Centre which puts on courses in family care for whole families who have relationship problems. There is also a National Advisory Centre and an increasing number of special units for battered children and their families.

Full details of the Society's work—and explicit instruction in how to contribute to its funds—are given in the *Annual Report 1979*, available from 1, Riding House Street, London W1P 8AA.

GENERAL HOUSEHOLD SURVEY 1979

The General Household Survey 1979 shows that the average household size in Great Britain is still falling, and that the proportion of one-person households is still increasing. In 1971 the average size of a household was 2.91 and at the end of the decade this had fallen to 2.67. This decline was mainly due to an increase in the proportion of one-person households from 17 per cent in 1971 to 23 per cent in 1979.

By the end of the 1970s only three per cent of private households were without black and white or a colour television, only seven per cent did not own a vacuum cleaner, and only eight per cent were without a refrigerator. Ownership of a refrigerator had shown the most marked increase over the eight-year period and the survey has monitored the possession of consumer durables. In 1979, 26 per cent of households were without a washing machine.

The most marked increase has been in the proportion of households with a telephone. Between 1972 and 1976 the proportion of households with a telephone rose from 42 to 54 per cent; three years later this proportion had risen sharply again so that 67 per cent of private households in Britain had a telephone in 1979.

Reference

Office of Population Censuses and Surveys (1980). *General Household Survey 1979*. London: HMSO.

SOCIETY OF COMMUNITY MEDICINE

The Society of Community Medicine will hold a one-day seminar on 'Alcohol Abuse: an Under-Diagnosed Clinical Mimic' at Barnes Hall, Royal Society of Medicine, 1 Wimpole Street, London W1, on Monday, 24 November 1980.

Applications should be made to Miss W. A. Webb, Administrative Secretary, Society of Community Medicine, 28 Portland Place, London W1N 4DE.

Section 63 approval is being sought.

WORLD FREE FROM SMALLPOX

The following resolution was adopted by the World Health Assembly on 8

May 1980:

"The Thirty-third World Health Assembly, on this the eighth day of May 1980, having considered the development and results of the global programme on smallpox eradication initiated by WHO in 1958 and intensified since 1967.

1. Declares solemnly that the world and all its peoples have won freedom from smallpox, which was a most devastating disease sweeping in epidemic form through many countries since earliest times, leaving death, blindness and disfigurement in its wake and which only a decade ago was rampant in Africa, Asia and South America;

2. Expresses its deep gratitude to all nations and individuals who contributed to the success of this noble and historic endeavour;

3. Calls this unprecedented achievement in the history of public health to the attention of all nations, which by their collective action have freed mankind of this ancient scourge and, in so doing, have demonstrated how nations working together in a common cause may further human progress."

Smallpox vaccination certificates

According to *WHO Weekly Epidemiological Record No. 19* of 9 May 1980, the following seven countries only still require smallpox vaccination certificates from all travellers: Benin, Cambodia, Chad, Djibouti, Lesotho, Madagascar and Mali.

RESEARCH PROTOCOLS

The Psoriasis Association (a registered charity) is interested in receiving information about research into psoriasis and the basic skin, and is prepared to offer grants.

Research protocols should be forwarded to the Secretary, The Psoriasis Association, 7 Milton Street, Northampton NN2 7JG, for consideration by the Association's Medical and Research Committee, by 1 January 1981. Grants will be offered for a protocol or protocols considered to be of sufficient merit.

Further information about the Association and its work can be obtained from the Secretary at the address given above.

ASSOCIATION OF GENERAL PRACTITIONER HOSPITALS

The Annual General Meeting and Spring Conference of the Association of General Practitioner Hospitals was held on Sunday, 18 May 1980, at 14 Princes Gate, London SW7 1PU. It was at-

tended by 28 doctors, 18 nursing officers, a hospital administrator and guests and members of the Press. The following officers were elected: President, Dr R. M. Emrys-Roberts; Chairman, Dr A. J. M. Cavenagh, Ruperra House, Brecon, Powys; Honorary Secretary, Dr J. R. D. Brown, Saint Chad Health Centre, The Dimbles, Lichfield, Staffs WS13 7JP; Honorary Treasurer, Dr Charles Shaw.

NATIONAL ASSOCIATION FOR THE WELFARE OF CHILDREN IN HOSPITAL

The National Association for the Welfare of Children in Hospital have produced a booklet *Your Child in an Immobilising Plaster*. Further information can be obtained from Rosemary Thornes, Information Officer, NAWCH, Exton House, 7 Exton Street, London SE1 8UE.

BALINT SOCIETY

Applications are invited from general practitioners, with or without previous similar experience, to attend a Balint training seminar. The seminar will meet weekly (probably Thursdays) in London starting in the Autumn and will be led by Mrs Enid Balint.

Section 63 approval will apply. Applicants should write to Dr A. H. Elder, Lisson Grove Health Centre, Gateforth Street, London NW8.

COLLEGE OF GENERAL PRACTICE OF ZIMBABWE

At the Annual General Meeting of the College of General Practice of Rhodesia, held on 25 May 1980, the name of the College was changed to the College of General Practice of Zimbabwe.

The following appointments were made by the new Council: President, P. Fehrson; Vice President, J. P. Norman; Honorary Secretary, C. A. C. Stratford.

RESIDENT PATIENTS IN PSYCHIATRIC HOSPITALS

Between 1970 and 1978 the population of resident patients in psychiatric day hospitals fell from 108,000 to 78,000—over 25 per cent.

JOINT COMMITTEE ON POSTGRADUATE TRAINING FOR GENERAL PRACTICE

The Joint Committee on Postgraduate Training for General Practice and the Royal College of General Practitioners have approved the Glasgow Eastern District and Grimsby Vocational Training Schemes. These schemes are recog-

nized by the Royal College of General Practitioners for the purpose of the MRCGP examination.

SYMPOSIUM ON EPIDEMIOLOGY

A one-day symposium will be held at the Royal Hallamshire Hospital, Sheffield, on Tuesday, 18 November 1980 when

seven invited speakers will present applications of epidemiological methods appropriate to clinical research and practice. The closing date for enrolments is 31 October and the programme and full details may be obtained from Dr R. A. Dixon, Department of Community Medicine, University of Sheffield Medical School, Beech Hill Road, Sheffield S10 2RX.

LETTERS TO THE EDITOR

ASSOCIATION OF GENERAL PRACTITIONER HOSPITALS

Sir,

The Association of General Practitioner Hospitals was founded a little over 10 years ago. In the early years our chief activity was to assist hospitals threatened with closure where that closure did not seem to be in the interest of the communities concerned. More recently, as the Association has gained more status, we have been consulted by Government, by the Royal College of General Practitioners, and by other bodies, for information and advice on the present state and future prospects of general practitioner hospitals.

Part of the problem was the lack of information about what actually went on, and Cavenagh's (1978) paper has been an important milestone.

In Lichfield recently we invited a group of trainees from the North Birmingham Training Scheme to spend the afternoon in our own general practitioner hospital. This was clearly a major eye-opener for them as previously they had believed that cottage hospitals were for the long-term care of elderly people requiring near-permanent stay in hospital. Dr Gerard Vaughan's recent statements make it clear that small hospitals are going to play an increasingly important role in the development of the NHS and we feel it important that all trainees should at least be aware of what happens in general practitioner hospitals and what the possibilities for the future are. Ideally we would like all vocational training half-day release courses to include a visit to a general practitioner hospital and I would be most grateful if you would bring this to the attention of your course organizer readers.

I would be very happy to act as a resource in finding a geographically ap-

propriate general practitioner hospital and interested host general practitioner for as many training schemes as possible.

J. R. D. BROWN
Honorary Secretary

Saint Chad Health Centre
The Dimbles
Lichfield
Staffordshire WS13 7JP.

Reference

Cavenagh, A. J. M. (1978). Contribution of general practitioner hospitals. *British Medical Journal*, 2, 34-36.

DEFINING AN EPISODE

Sir,

A pilot study was carried out in this practice to compare the patients and the types of illness presenting to the senior partner and to the trainee. We categorized the illnesses we saw as follows: new illness (including new patient); recurrent illness, but a new episode presenting for advice; short-term follow-up, up to six weeks from first contact; long-term follow-up (concerned with monitoring chronic disease).

We found it difficult to categorize many patients' illnesses. It was difficult to decide when something was genuinely new, and not in some way related to previous or current disease. It was also unclear at times what was meant by recurrent illness.

Some of the ideas for this pilot study were taken from the two National Morbidity Surveys, done in 1955 and 1971, and in particular we drew on their use of the term 'episode of illness'. This term was introduced in the second survey to cover a period of illness during which there may have been a number of consultations. This was done in order to

prevent a large number of consultations for one condition distorting the survey. The conclusions drawn from a comparison of the two surveys (Crombie *et al.*, 1975) indicate that the 'episode of illness' rate per person has risen although total consultation rate has remained static. This has been taken to imply a real increase in workload.

However, examination of the two surveys show that the term episode was used with different meanings. In the first survey 'episode' is a construct obtained from the total number of consultations for a particular diagnosis in a patient throughout the year. In the second survey distinct episodes of the same illness were recorded separately. Although the authors do mention this discrepancy, they go on to draw conclusions about the changing workload of doctors which seem to be implicit in the differing definitions of 'episode of illness'. We do not think that any such conclusions can be drawn when such ambiguity surrounds what is being compared.

Indeed, drawing on our experiences during the pilot study mentioned above and the difficulties we had in categorization, it is questionable whether any definition of 'episode' can be more than arbitrary. In fact, the greatest difficulties in categorization occurred in those patients with psychological symptoms and it is patients in this group who show the greatest increase in episode rate over the period of the two surveys.

M. J. F. COURTENAY
S. A. HULL

Bridge Lane Health Centre
Bridge Lane
Battersea Bridge Road
London SW11 3XA.

Reference

Crombie, D. L., Pinsent, R. J. F. H.,