

and national guidelines and NHS regulations (p. 59); the calculation for the cost of postgraduate education in England and Wales is inaccurate in that seniority payments recognize only time served and no other factor, and the training grant (called Vocational Training Allowance in Table 10.1), is first deducted from the total pool, prior to general distribution of all general practice net remuneration and is not an extra sum grafted onto this amount.

There are other errors that became so because of changes which have occurred since publication, namely the easier mechanism now introduced for general practitioners to claim expenses under section 63 (p. 20); the forthcoming alteration in the language rules for EEC medical graduates (p. 36); all doctors may now become trainees irrespective of previous (non-trainee) service in NHS general practice (p. 66); the RCGP and JCPTGP phone numbers are now 01-581 3232 (insert card).

I also found it rather odd that the MRCGP was not mentioned in the section on postgraduate examinations and diplomas (p. 79). Though the payment of a training grant may be a contentious matter, the facts that it does not really represent extra money (see above) and that trainers have to submit to inspection, re-inspection and a selection process unlike their consultant colleagues, are not mentioned in the text (p. 10). Not all would agree that for all trainees "there are always advantages if the year in general practice is the middle one" (in three-year schemes).

Those of us in postgraduate medical education would find a reference book extremely helpful and I for one look forward to the second edition suitably corrected.

S. E. JOSSE

PRESCRIBING PRACTICE AND DRUG USAGE

Roy Mapes (Ed.)

Croom Helm
London (1980)

218 pages. Price £12.95

In 1978, £723 million worth of pharmaceutical products were sold to the National Health Service, and 80 per cent of these were prescribed by general practitioners. This represents a five-fold increase in 10 years and the rate of increase is expanding year by year. When this is considered in the light of studies that show the high proportion of beds in acute medical wards occupied by patients suffering from iatrogenic disease and the increasing proportion of

medicines dispensed by general practitioners without a consultation at that time, there must be cause for concern. This book is a collection of essays on this phenomenon, which is aptly described by Australians as "the pill swill." The book claims to represent the first attempt by sociologists to comment on this field, but this surely does an injustice to many others, not least the Balint Group and Ann Cartwright; but even so it is an important area and one in which sociologists have a vital role to play.

As I read, I became aware of an increasing sense of irritation. This was partly due to the fact that my discipline was under fire and I became defensive but was also because, in spite of the wide-ranging and well-referenced nature of individual essays, it is very much an outsider's view and abounds in annoying generalizations. I have the feeling that many of the authors do not really understand general practice. There is, of course, no reason why, for example, a music critic should be able to play a note but he should be able to demonstrate a feel for music and to get his facts right. Drug prescribing is not what most of us see as "the most important component in the provision of medical care." It is not true to say that the doctor in Britain "has received no training to equip him to 'treat' a large proportion of his patients whose symptoms are essentially manifestations of a social malaise." It may have been true 20 years ago but is not so now. It is not true that doctors are "simply not taught how to cope with emotionally disturbed patients." I doubt too if many general practitioners would support the statement that there is a "need for the imposition of a new career structure" in general practice. The editor may feel that the "mode of organization of general practice is not one which will encourage competence," but this will not, I suggest, be supported by those general practitioners who have observed the changes of the last 25 years and know what this College is about. It is statements like this that caused my irritation. They are referenced but they ignore much contrary evidence and are unbalanced. In spite of them I think it is an important book and one that should be read and argued about by new entrants to general practice.

No criticism of mine will detract from the fact that an enormous problem exists. My irritation with the book does not detract from its attempt to make more people think about the problem. I think it would make excellent material for trainee courses. I suspect it would irritate trainees as well, but I hope it would provoke them to think.

MICHAEL DRURY

MATERNITY SERVICES IN THE DEVELOPING WORLD — WHAT THE COMMUNITY NEEDS

Professor R. Hugh Philpott (Ed.)

Proceedings of the Seventh Study Group of the Royal College of Obstetricians and Gynaecologists, September 1979

Royal College of Obstetricians and Gynaecologists (1980)

394 pages. Price £5 (plus postage)

This study group consisted of experts from 20 developing countries, all of whom wish to devise ways of making antenatal and postnatal care provided to populations which are not well served by doctors more effective. There are papers and discussions on a wide range of subjects, including maternal and perinatal epidemiology, provision of maternity services, care of the newborn and family planning. Many of the papers provide an excellent account of the training programmes which have been developed for midwives and traditional birth attendants. Other papers present and discuss new methods which are directly relevant to general practitioners who wish to develop more effective ways of teaching trainees to provide and evaluate antenatal and postnatal care.

There is an outstanding account by Professor Caldeyro-Barcia on the development of an integrated information system for evaluation of antenatal, childbirth, postnatal, and neonatal health care. He describes the selection of indicators used to measure the quality of care, as well as an outline of the microcomputer system used to collect and analyse this information before and after changes in education and provision of health services.

Also of relevance to general practitioners is the paper by Richard Evans which describes the use of an action-orientated record card for early detection and management of high-risk women in the antenatal clinic. This paper omits references but is based on the work of other experts whose research and evaluation of action-orientated record systems was published in *Tropical Doctor* in 1977. Our own antiquated antenatal co-operation cards would be much improved if they were redesigned to record the presence of social, psychological, medical and obstetric risk factors and to indicate the appropriate management by all members of the health team.

This book will be of great value to any doctor who intends to practice for a period in a developing country. It also contains some papers and references