

The Stuart Fellow

THE College has decided that, having cleared the hurdles of undergraduate education and vocational training, it must now devote its energies to helping and encouraging individual doctors in their daily activities. This is a major task, and not one which a centralized organization can undertake easily. Much will depend on the Faculties and on individual members working in their practices and postgraduate centres.

As well as recognizing the need to offer a service to the individual doctor, the College has also come to realize that it must be more responsive to the needs and wants of society—by developing a more open relationship with non-members, colleagues in other disciplines, patients, the media and other organizations, all of whom not only require accurate information and comment, but can also contribute in return to the advancement of the aims and activities of the College.

Many doctors are ambivalent towards the pharmaceutical industry; they are envious of its considerable financial resources, yet they do not wish to be allied with or dependent upon a commercial organization. In January this year a meeting was held at the College with representatives of the pharmaceutical industry at which it was clear that there is a considerable amount of goodwill towards general practice and towards the College in particular. Some of this goodwill is now becoming apparent in various ways.

An important development is the agreement by Stuart Pharmaceuticals Ltd to finance a College Travelling Fellowship. Many pharmaceutical firms have in the past supported general practice, for example the Upjohn

Fellowships, the Duphar Research Fellowships and the Standing Overseas Fellowships, but the Stuart initiative breaks new ground in that it provides financial support for a central College-inspired and -directed activity which should lead to benefits for the whole of general practice. The Stuart Fellow will be concerned with continuing education for general practitioners, in particular the development of medical audit. A central task will be to create and test 'audit packages', partly by using other College resources, such as the Library and the Central Information Service. He or she will develop methods which will allow the individual general practitioner, whether working alone or in a small group, to examine his or her own performance, and identify areas suitable for change. He or she will also be involved in developing the skills of group leaders. In addition the Fellow will spend time visiting groups of practitioners in their local postgraduate centres acting as a resource for small group meetings and disseminating methods of performance review. Stuart Pharmaceuticals, through their local representatives, will help organize these local meetings, which will be essentially educational and non-promotional. Members of the College will recognize in this appointment a partial successor to the Dean of Studies, Dr Norell, who has announced his forthcoming retirement from that post.

The relevance of the College in the future will depend to a large extent on its ability to inspire the ordinary general practitioner, whether or not he or she is a College member. The appointment of the Stuart Fellow is a significant step in this direction.

Pink puffers

The effect of oxygen on breathlessness and exercise tolerance was examined in 'pink and puffing' patients with fixed airways obstruction. When breathing oxygen, patients were less breathless and walked further. This was true whether the cylinder was carried by the patient or by an assistant. It was not possible to identify those patients who would benefit most. Breathing oxygen for five or 15 minutes before exercise but not during exercise (pre-dose) resulted in a similar improvement in exercise tolerance. For short periods of exercise, pre-dosing with oxygen provides a convenient alternative to continuous oxygen; for longer periods of exercise, the benefits of portable oxygen in selected patients have been previously underestimated.

Source: Woodcock, A. A. & Gross, E. R. (1981). Oxygen relieves breathlessness in 'pink puffers'. *Lancet*, 1, 907-909.

Gastric cancer

Lactic dehydrogenase (LDH) and β -glucuronidase concentrations were measured in the resting gastric juice of 113 patients presenting with dyspepsia. In all patients tested there was a positive correlation between LDH and β -glucuronidase concentrations. An index derived from the two enzyme activities correctly predicted the presence of gastric carcinoma in 41 out of 42 cases, and identified the only two cases of early gastric cancer in the series. There were 13 (11.5 per cent) false-positive results, all in cases with extensive intestinal metaplasia, a change which may be associated with an increased risk of gastric malignancy. The test is easily performed, inexpensive and reproducible.

Source: Rogers K., Roberts G. M. & Williams G. T. (1981). Gastric juice enzymes—an aid in the diagnosis of gastric cancer? *Lancet*, 1, 1124-1127.