

## LETTERS

### General Practitioner Obstetrics

Sir,  
The College has been working for several months with the Royal College of Obstetricians and Gynaecologists to produce a report on training for obstetrics and gynaecology for general practitioners. The discussion document on pages 116-122 is now available for all members to see, and I should be glad to have any written comments here by 1 May 1982.

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### Trainees and the College

Sir,  
The results of the survey of general practice trainees in Devon and Cornwall reported in the November *Journal* (p. 697) by Dr T. N. Griffiths must not be disregarded. They indicate that most of those questioned see the College as little more than an examining board, whose obstacles must be overcome before a career in general practice can develop. I suspect that these views are not restricted to the West Country.

We must recognize that few trainees know much about the activities of the College and that most see us as an exclusive body concerned only with matters relating to established general practitioners. There is, therefore, now an urgent need for us to indicate clearly to those preparing themselves for future work in general practice, that we are concerned about the difficulties they face in their training and in settling into new practices. It is essential that we identify those training for general practice in their hospital and trainee years, and that we invite them to join us in all that we are doing. In this way, acquiring the MRCPG should become but incidental to the more important and active part that we encourage them to take in our local activities.

Identifying vocational trainees, and especially those in their hospital years, is a difficult task, but, with our faculty organization, it is easier for us than most other bodies. I suggest that each faculty board nominate three or four of its members to be responsible for

linking with the vocational trainees in the faculty area and for encouraging them to become involved in local groups and meetings. Those given this task would be able to speak at trainee day-release courses about the work of the College and could also arrange for locally based College examiners to discuss with them the College exam and how best to prepare for it. The most suitable members for undertaking this task would be those who have completed their own vocational training three or four years previously, for it is sometimes difficult for these younger members to find roles for themselves in the faculty.

I believe that if we can involve trainee general practitioners in College activities, then they are more likely to understand our aims and to work towards them, even after they have gained a full membership.

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### National Trainee Conference

Sir,  
I would like to add a comment to the report on the National Trainee Conference at Sheffield (October *Journal*, pp. 634-636).

Before the GMSC document on trainee representation was sent out to LMCs, the GMSC withdrew the recommendation that the trainee sub-committee be the agency for setting up future national conferences.

It will now fall on individuals in chosen regions to arrange the trainee conferences. I hope that these individuals will seek, and receive, support from national bodies such as the College, the BMA and the GMSC, and that they will also find help at a regional level.

I agree, Conference is the logical place for the national trainee representative of each body to report formally on the year's activities. Some trainee representation has failed in the past because of difficulties in disseminating information to individual trainees and in channelling complaints on a national basis. Hopefully, the new representation of the GMSC trainee sub-committee will be more truly

democratic and allow easier contact between individual trainees and the representative national bodies.

I am not so sure that Conference is the right place to elect national trainee representatives, as the report suggested. National representatives are better elected via the usual committee procedures, after the committee has observed the performance of its individual members.

I know the College is concerned about trainee representation, and I hope that use will now be made of some of the framework of course and regional representation.

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### Annual Symposium

Sir,  
May I, through your columns, congratulate the organizers and the College on the Annual Symposium "The Disabled: Who Are They?" That such a subject was chosen is good in itself, but so many such symposia have paid mere lip service to this International Year of Disabled People. It is a tribute to the organizers, speakers and participating audience that this Symposium provided a practical, scientific and human guide to the understanding and care of those of us who are disabled.

I might say, too, that it restored for many of us faith in the ideal of the constructive, caring nature of the medical and para-medical professions.

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### Sore Throats

Sir,  
The exchange of views about sore throats in the October *Journal* (p. 627) once again shows that statistical significance does not necessarily equal clinical significance. Dr Whitfield has replied to Dr Fairbrother in statistical terms but I suspect that his argument may not convince everyone of his clinical point of view.

I have conducted a small study which illustrates my point by suggesting the opposite conclusion to Whit-