

Table 2. Regional distribution of recent trainee candidates and their pass rates over two years.

	1980/81			1981/82		
	Number of trainees completing	Number of recent trainee candidates	Pass rate (per cent)	Number of trainees completing	Number of recent trainee candidates	Pass rate (per cent)
Northern	56	55	78.2	82	84	77.4
Yorkshire	51	43	58.1	79	42	76.2
Trent	114	51	84.3	132	56	87.5
East Anglia	42	24	54.2	54	24	79.2
NW Thames	67	31	67.7	90	36	75.0
NE Thames	78	28	67.9	84	32	65.6
SE Thames	57	31	74.2	58	43	83.7
SW Thames	81	27	55.6	78	36	72.2
Wessex	106	23	82.6	140	50	82.0
Oxford	71	36	91.7	73	40	72.5
Avon, Som. & Glos.	71	25	84.0	60	19	89.5
Devon & Cornwall	69	20	95.0	65	27	85.2
West Midlands	124	44	75.0	132	73	60.3
Mersey	64	12	75.0	84	26	65.4
North West	122	36	77.8	158	55	70.9
Wales	65	29	75.9	59	54	75.9
N Ireland	44	33	63.6	63	55	69.1
Northern Scotland	12	6	66.7	10	9	77.8
NE Scotland	13	17	82.4	19	22	72.7
Tayside	31	18	61.1	33	24	70.8
SE Scotland	66	20	90.0	71	44	81.8
West Scotland	89	48	58.3	101	60	68.3
Eire	17	19	73.7	18	19	78.9
Armed Forces	31	19	47.4	31	16	62.5

GENERAL MEDICAL COUNCIL ELECTIONS 1984

Membership of the General Medical Council

There are 93 members of the General Medical Council as determined by the Medical Act 1978—see table.

Table. Membership of the General Medical Council.

Appointees of UK university medical schools	21
Appointees of Colleges and faculties	12
Appointee of the Society of Apothecaries	1
Lay members (chosen by the Privy Council)	7
Chief Medical Officers	2
Elected by doctors on the Medical Register	50

Elected members are chosen every five years, and the next such election will be held in July 1984. Elected members are chosen in four constituencies: England . . . 39 members; Scotland . . . 6 members; Wales . . . 3 members and Northern Ireland . . . 2 members. The work and responsibilities of the GMC have been described by Dr Donald Irvine in the College's 1983 Members' Reference Book (p. 199).

The College and the General Medical Services Committee both support a strong general practitioner membership of the GMC. During the next few months we shall present in *News and Views* a series of short articles about the work of the GMC and the reasons for needing such strong general practitioner representation, the organization of the election and how the single transferable vote system that it employs

works, and, at a later date, the names of the candidates whose election the College would wish to support.

In the first of this series, Dr Peter Kielty describes the primary elections that are being organized by the British Medical Association next January. He indicates how these can be used to secure BMA sponsorship for general practitioner candidates. Dr Kielty is a member of the General Medical Services Committee; he has made a detailed study of GMC elections.

The BMA primaries

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The General Medical Council needs more general practitioner members. The present handful is too small in Council and spread too thinly around the committees to have sufficient impact on issues and debates which, since the GMC was reorganized, have a greater relevance to general practice than ever before.

Matters concerned with fitness to practise, discipline and new responsibilities in postgraduate education cry out for