

The study will not seek to influence management in any way and strict confidentiality will, of course, be observed at all times.

We are hoping that as many Members and Fellows of the College as possible will take part, as the whole study depends on recruiting enough general practitioners and, on completion, the study will be the first proper prospective study of epilepsy carried out in this country, and will give a lot of information on the natural history of epilepsy which surprisingly is still not known.

Please contact either of us if you are interested in participating.

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M.P. TAYLOR

Irish College of General Practitioners

Sir,

I know it will be of interest to your readers and particularly to those who have supported and helped us in so many different ways not least by joining as overseas members, to learn that the new Irish College of General Practitioners has got off to a promising start. Since our official launch on 29 May this year more than 700 general practitioners have applied to join and 600 of these applications have been processed and approved. Our goal of recruiting a majority of the 1800 general practitioners in the Republic of Ireland now seems achievable before our first Annual General Meeting in May 1985. Our confidence that we could overcome the stumbling block of small numbers inherent in launching an independent College in so small a country now seems to have been justified. We acknowledge the part played by the Royal College and its officers in giving us that confidence and contributing to our success.

MICHAEL BOLAND
Chairman of Council

Irish College of General Practitioners
10 Fitzwilliam Place
Dublin 2

Displeased as punch

Sir,

My attention has been brought to your editorial (September *Journal*, p.473) in which you make specific reference to *Punch Digest for Doctors*, one of our medical titles.

I would wish to reply to your comment it is harder to find justification for a special edition of *Punch* as follows.

Over 22,000 UK general practitioners have actively requested future issues of this title and whilst you believe that general practitioners get the press they deserve, we believe that they should get the press they want and request.

Secondly, according to independent readership data (JICMARS), *Punch Digest for Doctors* is better read than any clinical title (including your own) simply because general practitioners receive up to 13 clinical titles which inevitably duplicate each other to an extent but at any rate fragment the time and effort doctors are prepared to invest in keeping up to date and digesting clinical information.

Thirdly, you imply criticism of those titles dependent on drug manufacturer advertising in order to produce this editorial text. Are you aware that *Punch Digest for Doctors* is the only title that allocates a part of its monthly advertising income (£1,000 per issue) to helping those in need as identified by our doctor readers and that we purchase medical equipment, education aids, and help the aged, physically handicapped, mentally infirm and other such deprived members of our society on a charitable basis directly as a result of the press support we receive?

These facts are, we believe, the justification for *Punch Digest for Doctors* and the reasons behind the journal's success. In addition we appreciate that today's general practitioner is being asked to perform a very rigorous job, and a very demanding role. The provision of a little light relief and humour will at least help to counter these pressures or do you believe that there is no place for humour in medicine? If so, perhaps we should instruct doctors not to joke with patients, ban drug representatives from the odd joke with the doctor and exclude all humour from the operating theatre.

I find your attitude somewhat surprising in that your editorial piece seeks to determine the type of medical publication that you believe doctors should receive. I think that our 30,000 or so general practitioner population are quite able to make up their own minds and have consistently been telling all publishers that they would prefer fewer journals and receive only those they want and are going to read.

M.G. HOLLINGSWORTH
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