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#### **DECISION MAKING IN GENERAL PRACTICE**

Michael Sheldon, John Brooke and Alan Rector (Eds) Macmillan Press, Basingstoke (1985) 269 pages. Price £25.00

## TOWARDS BETTER PRACTICE

Library of general practice no. 9

Peter Martin, Alistair Moulds and Patrick J.C. Kerrigan Churchill Livingstone, Edinburgh, London (1985) 261 pages. Price £12.50

## THE HEART OF THE SOCIAL DRINKER

Oswald B. Tofler Lloyd-Luke, London (1985) 188 pages. Price £15.00

## **CERVICAL SCREENING: A PRACTICAL GUIDE**

Ann McPherson Oxford University Press (1985) 48 pages. Price £1.95

## HANDBOOK OF PAEDIATRIC DERMATOLOGY

John Harper Butterworths, London (1985) 204 pages. Price £19.50

### THERAPEUTIC FACTORS IN GROUP PSYCHOTHERAPY

Sidney Bloch and Eric Crouch Oxford University Press (1985) 342 pages. Price £16.00

# REFLECTIONS ON THE MANAGEMENT OF THE NATIONAL HEALTH SERVICE

Alain C. Enthoven The Nuffield Provincial Hospitals Trust, London (1985) 51 pages. Price £4.25

## **GUIDE TO HOSPITAL WAITING LISTS 1985**

Inter-authority comparisons and consultancy The College of Health, London (1985) 26 pages. Price £1.50 for members of the College of Health, £2.50 for non-members

Decision making in general practice provides a valuable summary of the present situation in a growth area which is still in its infancy. It is based on an international multidisciplinary workshop which was held in Nottingham in December 1983. The papers presented are usefully punctuated by contributions from the leading discussants representing the views from the floor. It offers a range of often conflicting opinion and experience which makes it a stimulating book to read.

The book has three main subjects — the development of computer-based decision aids in general practice; investigation of general practitioners' decision-making processes; and consideration of the factors which influence the clinician in consultation, particularly his or her mental set. Each subject is dependent on the next; the last is probably the most important

because of its pervading effects on the others, but it is at risk of being ignored as interest and investment shifts attention to new areas. However, the challenging demands made by information technology to understand the rules and policies underlying our decision making in general practice have stimulated the speculation and scientific research reported in this book. The topics discussed range from personal approaches to consultation analysis to careful scientific studies of diagnostic behaviour and include consideration of models of decision making as well as attempts to apply artificial intelligence procedures to the general practitioner in action. The impression given is that even if it is found that the computer has little to offer, the understanding gained will have implications both for personal practice and medical education at all levels.

It is suggested that this book is of value mainly to those interested in education and computers but it offers information and insights that can be used by all general practitioners.

B.B.W.

Towards better practice is one of a series of popular paperbacks which has been largely disease-oriented and the subject of this volume is refreshing. It offers a practical guide to 'good' general practice in an enthusiastic style.

In keeping with the authors' obvious admiration for the work of Byrne and Long (Doctors talking to patients. London: RCGP, 1984), the first section of the book is patient-centred, the next doctor-centred and the third team-centred. The subject of help-seeking behaviour, relevant to any discussion of workload, is addressed in a section on educating about minor illness. The use of names such as Dr Blunderbuss, Mrs Worryguts and Dr Sourpuss seems to represent unnecessary stereotyping, of the sort the authors would condemn. Perhaps I was taking the book too seriously.

Many of the statements made in the book are banal and the repetition of material is both unnecessary and annoying — computers are discussed on both pages 102 and 231 and tape-recording of consultations on pages 105 and 113. An important point which has been omitted from both sections on tape-recording is the need to obtain informed and written consent from the patient.

The section on keeping the doctor happy is the most original and useful in the book and the section on the health and wellbeing of the doctor and his family would be relevant to all trainees and probably most principals as well.

With an inadequate index and only occasional incomplete references in the text, this cannot be regarded as a reference book. However, it is easily read and contains some useful practical examples of one practice's way of working towards better practice.

How do we respond when patients ask about safe levels of drinking? We know that drinking large quantities of alcohol regularly can have harmful results, for example, social and family damage, cirrhosis and alcoholic cardiomyopathy. Most research on the effects of alcohol has concentrated on these aspects of drinking behaviour. However, as general practitioners we are interested in the antecedents to such pathology and in primary prevention. It is therefore refreshing to come across a review of research relating to pathology associated with the modest consumption of alcohol.

Dr Tofler, a cardiologist in Perth, Western Australia, clearly understands the epidemiological perspectives of his subject. His monograph The heart of the social drinker briefly reviews current literature on cardiac problems associated with moderate drinking, and also describes in some detail his own study of men recruited by hotel managers in Perth — business associates and friends — who were carefully screened and then followed up for 13 years. The follow-up confirmed the previously reported finding of a J-shaped relationship between drinking levels and mortality. Mortality appears to drop slightly with low levels of drinking (one or two drinks a day), for reasons which still remain unclear, but then increases with a regular daily intake of 35-70 g of alcohol a day or more — 10 g of alcohol is equivalent to one standard UK drink: half a pint of beer, a glass of wine or a single measure of spirits. In this review Tofler describes electrocardiograph changes (typically left axis deviation) associated with regular intakes of 35-70 g of alcohol a day or more and also demonstrates that there is a direct relationship between alcohol intake and elevated blood pressure, with a threshold at around 70 g of alcohol a day. He stresses the importance of taking a drinking history in any patient with ischaemic heart disease and points out that attacks of angina may be provoked by a heavy drinking bout.

Despite demonstrating the relative lack of effect of very low levels of alcohol intake on the heart, Tofler concludes 'we do not know enough to advise anyone to drink'. However, he does not dissent from the view proposed more than 100 years ago that the regular consumption of 35 g of alcohol a day is not unreasonable. This is close to the limit proposed by the Health Education Council of two to three pints of beer two to three times a week, or its equivalent.

This book covers one aspect of the pathology associated with excessive drinking in some depth and does not pretend to be a complete review of the subject. Nevertheless, cardiac effects of alcohol are sometimes neglected in other publications and this monograph will provide a useful addition to such sources.

S.A.S.

Cervical screening: a practical guide is a concise booklet written by a general practitioner in a clear yet non-dogmatic style. All the practical issues surrounding cervical screening in practice are covered with ample examples of letters, leaflets, record cards and other information which will help the family doctor plan his/her system. Ann McPherson is to be congratulated on a most useful little book.

My only criticism is that patient responsibility for follow-up is not dealt with adequately, hence some of the principles of the declaration at Alma-Ata are discarded by focusing on cervical cytology in isolation despite it being only one small aspect of primary health care. This lack of horizontal integration is the result of specialist enthusiasm for the topic. General practice will have come of age when specialized texts relate their theme to the integrated breadth of our discipline.

N.C.H.S.

Handbook of paediatric dermatology is an illustrated lecture series aimed at candidates for the paediatric section of the MRCP. The book is, however, very relevant to the MRCGP candidate as most of the conditions presented are common complaints in general practice with a smattering of more esoteric complaints. Beautiful illustrations, a brief but realistic text and

adequate references on first class paper with a hard cover make this handbook a useful and durable addition to the practice or postgraduate library.

N.C.H.S.

Therapeutic factors in group psychotherapy is a review of all the major studies on group psychotherapy since the mid-1950s. Despite the authors' assertion that original research and analysis on certain aspects of this subject are scarce, their project must have been quite daunting. They have succeeded in producing a readable and eminently scholarly review of the contributions to this subject and they should be congratulated.

The authors list the therapeutic factors which they consider to be most important — insight, learning from interpersonal action, acceptance, self-disclosure, catharsis, guidance, universality, altruism, vicarious learning and instillation of hope. They then present and analyse the knowledge that has accumulated on each of these factors and this is followed by their theoretical aspects and a discussion of the empirical research to date. At the end of each chapter is an extensive list of references.

At the back of the book is an appendix of studies mentioned in the book and they are presented in precis form as author, title, sample, method and findings in chapter order.

In the preface the authors state that their aim was to offer a coherent account of the knowledge that has accumulated on group therapy. All doctors interested in this subject will find this book most helpful and instructive. Every department of psychiatry would do well to have a copy available on its bookshelves but it is probably too specialized for the average practice library.

R.C.

Reflections on the management of the National Health Service is an American economist's view of the NHS. Professor Enthoven recognizes the public support for the NHS and also its value for money but he predicts that a crisis is looming owing to increasing economic pressure caused by new technological and demographic factors:

'The NHS runs on the ability and dedication of the many people who work in it, but its structure contains no serious incentives to guide the NHS in the direction of better quality care and service at reduced cost. In fact the structure of the NHS contains perverse incentives?

Regional and district medical officers are identified as lacking both management training and credibility with clinical colleagues. Selected consultants strengthened by management training are regarded as better alternatives and an experimental internal market in the NHS is advocated as the logical way forward. Health maintenance organizations are then held up as an effective way to encourage doctors to control their clinical freedom themselves in the interests of quality and cost effectiveness. This is a stimulating little book.

N.C.H.S.

Guide to hospital waiting lists 1985 is a concise 25-page illustrated report from the College of Health. It aims to help general practitioners and patients find shorter hospital waiting lists and to stimulate the health authorities to investigate their performance. Clear maps and tables reveal a fascinating diversity of waiting times for the worst specialties which do not follow the conventional north-west south-east divide. This is a practical book for practical people. It is only available from the College of Health, 18 Victoria Park Square, London E2 9PF.

N.C.H.S.