

relatives have to live in urban hostels). The availability and funding of health care for blacks is grossly deficient.

In the area of medical education, South Africa also discriminates against black people. There is only one medical school for black students and only a handful of others allow black people in. South Africa has six of the 22 universities currently being investigated by the General Medical Council for possible discriminatory admission procedures.

It is interesting to note that the British Medical Association was sufficiently moved by the evidence of medical conivance with apartheid's double standards to withdraw from the World Medical Association when South Africa was readmitted. In addition the World Health Organization has terminated its consultative status with the World Medical Association, recognizing that persuasion and 'constructive engagement' have not improved the situation in South Africa in over 20 years.

It is high time the RCGP also demonstrated a principled position and refused to participate in events involving South African doctors. Members of the medical profession who follow ideals so different from those of the conference should not be made welcome.

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WONCA Conference 1986

Sir,
We have followed with interest the publicity surrounding the 11th World Conference of WONCA. An opportunity to participate in an international conference of general practice would certainly have been very exciting. Two of us participated in presentations. We are both part-time general practitioners, already involved in research and able to obtain sponsorship for registration. However, it must be added that in one case the registration fee accounted for the practitioner's entire annual allowance for such items from his research organization. The remaining two of us are full-time general practitioners who do not normally have the opportunity to attend such functions. Although we would both have liked to participate, we felt that within the budget of our small practice we could not afford the concessionary rate of £225. Other similar conferences in general practice or other medical specialties are not so expensive. Since the conference hoped to attract delegates from a broad cross-section of

general practice throughout the world it seems a shame that it could not have been organized without such an overwhelming-ly expensive registration fee.

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A change of plans

Sir,

There I was, booked (or so I thought) on a Section 63 course at a nearby centre. My surgeries were cancelled and my in-laws were booked for childcare when I realized that I had received no final details. A phone call confirmed the worst — I was not, and could not, be booked in. Too late to turn back I told myself and I determined to go to the big city and stay at 'my club'.

A few days later found me at Waterloo Station where I bought myself breakfast, a guide to London, a copy of *City Limits* and a seven-day underground/bus ticket. I had never stayed at the College before but I had been able to book a lovely room for two nights, and soon I was investigating the library.

What an incentive to study — a quiet airy room, with a circular table displaying recommended new books, a wall full of every general practice book you could think of, catalogued journals and shelves of theses. What a pleasure to plan your own study. When I had answered all the questions in my head, dipped into or read the new books and followed up some references, I turned to *New reading for GPs*. For the uninitiated these are lists of references in subject order which are produced regularly. The library holds them and all the sources for many years so it is possible to browse through and read what interests you or you can read all the articles relating to one topic.

The library was only used by a few students during the week but it is a much used resource by telephone and post. The library absorbed so much of my attention that I only had a passing glimpse of the other departments working away quietly on all floors. I made the effort to sample the bar in the evening and breakfast in the mornings and found neither of them wanting.

An advantage of a self-organized study leave is the freedom to enjoy London when you choose. Six to seven hours study a day seemed a realistic target for me and I interspersed this with pre-breakfast jogs,

lunch breaks in the V and A Museum and shopping trips to Harrods. Although I had to stay with friends for the remaining three nights Princes Gate is easy to get to and the library is open all hours.

There are a few disadvantages of self-organized study, the main one being the lack of opportunity to talk to other doctors about their practices. Princes Gate is quiet and does little to advertise current courses, lectures and events taking place in London: a big noticeboard would help to overcome the elitist aura that hovers there at present.

I am nearly home and I feel full of good ideas and with the energy to put them into practice. I have not had to listen to a single boring lecture and have experienced the educational theory that if you set your own learning objectives you switch on, not off.

So next year resist Section 63 approved courses and strike out for a week of freedom — book in early at the College!

CHARLOTTE PATERSON

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Primary care bookshelf: *The parents' A-Z*

Sir,

Dr Smail concludes his review of this book (August 1985 *Journal*, p.406) with the suggestion that I should 'consult a medical adviser so that these pitfalls can be avoided in the next edition'. May I put the record straight by drawing your attention to the vital advisory role played by an eminent Fellow of your College? To have written the book without such advice would have been both arrogant and irresponsible. My gratitude to him is prominently acknowledged at the front of the book.

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Simon Smail writes: I must apologize to Penelope Leach for having failed to notice a short note towards the front of her book which acknowledges the help of a Fellow of the College with 'relevant portions of the manuscript'. I do, however, stand by my comments that there are certain sections of the text that should be reviewed to ensure greater accuracy and more appropriate medical advice.