



INFORMATION HANDLING IN GENERAL PRACTICE

Richard Westcott and R.V.H. Jones (eds)
Croom Helm, London (1988)
 289 pages. Price £12.95

The rate of change in general practice computing is rapid and this book provides an up-to-date summary of many of the exciting things that are happening. There are chapters from most of the people involved in the field and from others outside, such as Tim de Dombal who specializes in the computerized diagnosis of abdominal pain and Allan Maryon-Davis from the Health Education Authority. There are chapters on the historical development, what is going on now and pipe dreams for the future. Anyone interested in information technology as applied to general practice would do well to read this book which is well supplied with references for further reading. The chapters have been well chosen to cover most of the field and there is surprisingly little overlap.

I would have liked there to have been chapters which took an even broader view. For example, the use of computers in looking at the relationship between social factors and health both on a geographical basis and for the individual patient. I would also have liked a little more practical detail in the areas where there are considerable developments taking place at the moment, such as the 'no cost' options for general practitioners, the problems of developing classification systems, the need to develop guidelines for the extraction of data by organizations outside the practice, and the implications of the computerization of general practice registration data on one central computer which has now become a practical possibility. There are also potential dangers from the introduction of computers into general practice which are not highlighted. The book gives an example of a computerized repeat medication for capsules of flurazepam 30 mg to be given in lots of 28 with 23 repeat prescriptions being authorized. The patient being given this would be dependent on benzodiazepines before the time for review of her repeat medication.

Overall, however, this is an excellent book which would prove extremely useful for someone interested in this subject.

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PROBLEMS OF PRE-SCHOOL CHILDREN

Naomi Richman and Richard Lansdown (eds)
John Wiley, Chichester (1988)
 243 pages. Price £7.95

One aspect of child health in which there appears to have been few advances is the management of behavioural disorders in children. This is probably because it is not a fashionable subject and attracts little money for research, yet it may be fundamental to the future of young children. The editors of this book are to be congratulated on tackling a wide range of pre-

school problems in an eminently readable style which will appeal to both health professionals and parents.

With 14 chapters there are contributions from a variety of backgrounds, yet the underlying themes are consistently maintained. These themes stress the importance of adaptability and change, with the interaction between children and their environment being continually stressed. The contents focus largely on relationships, communication and behaviour disorders, and a sensitive and sensible chapter on judicial procedures is particularly relevant to those who are closely involved with family problems relating to children.

Despite the fact that general practitioners can spend up to a quarter of their time with young children, our understanding of how best to advise parents is often limited and based on anecdote and personal experience. Here is an opportunity to sharpen up on many of the problems which face parents who consult us about their children's growth, development and behaviour.

JOHN BAIN
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THE AGEING POPULATION — BURDEN OR CHALLENGE?

Nicholas Wells and Charles Freer (eds)
Macmillan Press, Basingstoke (1988)
 279 pages. Price £35.00 (h/b), £13.95 (p/b)

Professor Tom Arie in his foreword sounds enthusiastic 'I have learnt something new from, or been stimulated by, virtually every chapter'. Despite this, I started to read the book with some scepticism about multi-author efforts in this field. However, I agree that this is an excellent volume, full of varied information which would be hard for the individual to find on his own. The editors are Nicolas Wells from the Office of Health Economics and Charles Freer. We have become accustomed to the excellent and authoritative reports from Mr Wells's organization and Dr Freer is known as a member of that rare breed of general practitioners who have understood the challenge and satisfaction in primary care of the elderly. They have selected an outstanding group of contributors and have welded their efforts into a most readable and informative book.

The first section is an account of the ageing population in terms of demography, longevity, morbidity and dependency. Chapter three by Ken Wright is particularly interesting to a medical reader as it deals with economic aspects. He describes a 'house rich, cash poor' generation of old people, the biggest shift in heritable wealth this century. Perusal of this chapter will help readers to understand the dilemmas now facing government ministers as they examine problems of funding services.

Section two is concerned with providing for the elderly, and again the views of experts from health, social services and the voluntary sector are clearly and provocatively laid out. The Kent experiment is well described by Challis and Davies who were

able to use up to two thirds of the cost of residential care to provide services in an old person's home in an effort to avoid institutional care. This was all pre-Griffiths and shows that some of his best ideas are not only economically sound but also humane and eminently acceptable to consumers.

The last chapter by Alan Maynard spells out the inconsistencies and frank stupidity of much of our current system of care, based as it is upon outmoded bureaucratic and administrative hierarchies. There is a strong plea for well planned longitudinal studies of multiple cohorts to provide accurate data on longevity and dependency and their implications for service provision in modern society. Such studies have been proposed and rejected as 'too expensive', but the depressing fact is that to continue to provide services without such essential knowledge is hugely inefficient and often fails to identify needs, let alone meet them in a satisfactory fashion.

Medical readers will greatly benefit from dipping into the 'non-medical chapters' and I safely assume that the converse equally applies to the 'medical' chapters.

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PSYCHOLOGICAL PROBLEMS IN PRIMARY HEALTH CARE

Eric Button

Croom Helm, London (1988)

209 pages. Price £12.95

While most presenting psychological problems are managed entirely by primary health care teams, few psychologists have attempted the difficult task of presenting psychological models and methods in a way that is of practical use to the non-specialist. This book is accessible without being trite and merits a place in every practice's bookcase. Following a general overview of some key psychological ideas and management principles, the main section of the book provides detail on specific problems. Eric Button's focus on life span causes him to under-emphasize other powerful psychological models and methods in places, but most of this section provides useful background ideas. The third part presents interviews with ex-patients which give insight into patients' views of their problems and what has helped them, although the nature of this material allows few general conclusions to be drawn. The strongest section of the book is part four which discusses the psychology of help-giving, pointing out many of the organizational and personal factors which affect morale and job satisfaction.

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ETHICS: THE HEART OF HEALTH CARE

David Seedhouse

John Wiley, Chichester (1988)

157 pages. Price £8.95

It is perhaps gratifying that at last philosophers are coming down from their ivory towers and turning their attention to questions of applied science. Whether this is forced by economic necessity, or based on genuine interest, has still to be proved. On the one hand philosophers have to prove they are not irrelevant to a generation which demands that everything justify itself by its utility. On the other hand the philosopher who is interested in applied sciences such as medicine has to be willing to serve an apprenticeship in the real world — at least by doing his homework, being true to the facts and evidence, even if not actually getting his hands dirty.

Ethics: the heart of health care, puts forward a radical thesis that 'a solid and useful theoretical basis for health workers' can be created on the basis that 'work for health is a truly moral endeavour'. The author argues that 'the world of health is in crisis', neither technical nor financial, but 'because of conceptual confusion (sic)'. This confusion is basically in the minds of doctors, who fail to recognize that 'health and human value are inseparable'.

The author uses his own peculiar approach to ethics as the hermeneutic tool to lay bare the nature of this contemporary 'crisis' in a series of chapters — 'growing pains', 'ethics as the key', 'uncovering the basic questions' and 'problems in practice'. He then goes 'in search of morality', investigates 'what is a person' and discusses 'theories of ethics'. The final four chapters are devoted to the exposition and application of the author's answer to moral problems and dilemmas, namely his decision-making 'ethical grid'.

The book is written with youthful enthusiasm and cheek. This would be amusing if it were enlightened by attention to the considerable body of literature on medical ethics and the philosophy of medicine, if it were based on sound evidence rather than sweeping unsubstantiated generalizations, and if it did not parody the reductionist model of some kinds of self-styled 'scientific medicine' by its own reductionist ethicism.

The first part of the book is an excuse to apply Kuhn's theory of scientific revolutions to the author's self-defined 'crisis' in medicine. The second is an amazingly simplistic derivation of fundamental ethical principles. The third is an ingenuous attempt to prove that his particular model of problem-solving in ethics does the trick for any and every moral problem. That takes some conjuring.

IAN THOMPSON

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