

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.

J. WILLIAMSON

Professor Emeritus, University of Edinburgh

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.

CHRIS TREPKA

Clinical Psychologist, Bradford Health Authority

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

*Principal Professional Development Officer,
Scottish Health Education Group*

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