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Support for widowers

This Canadian paper augments the growing evidence that bereavement is a neglected area for health promotion. The health care use patterns of a sample of 113 newly bereaved men were analysed retrospectively. Of these men, a group of 61 had been randomly selected and assigned immediately to a nine-week treatment intervention (weekly semi-structured peer group sessions). The other 52 men acted as a control group and they had been requested to wait eight months for the treatment intervention. Additionally 109 married men, matched for age, had been selected for comparison. Monthly rates of visits to family physicians, psychiatrists and all other specialists were examined for the three cohorts.

Rates of visiting by the married men remained stable over the study period. Rates of visiting family physicians declined after the intervention in the treatment group but continued to rise in the control group of widowers. These findings reiterate those in a study of widows published in 1964 by Murray Parkes that is quoted in this paper.

Although an increased number of visits to a doctor does not indicate that there is illness resulting from bereavement, it does lend weight to the theory that structured support programmes are required for those who become bereaved. The findings of this paper, together with Dewi Rees' evidence from 1967 of a seven-fold increase in mortality among bereaved people, further demonstrate that management of grief is a neglected area of primary care.

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Source: Tudiver F, Permaul-Woods JA, Hilditch J, *et al*. Do widowers use the health care system differently? *Can Fam Physician* 1995; **41**: 392-400.

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Food for thought...

'The views of patients and general practitioners about the best type of general practice evidently differ. General practitioners have been seeking to develop practices to provide comprehensive and effective clinical services from well-equipped premises staffed by multidisciplinary teams. In contrast, this study shows that patients prefer a personal service. Given the current approach to practice organization, patients are more likely to obtain a service that meets their requirements if they attend small, non-training practices that operate personal list systems.'

Baker R, Streatfield J. What type of general practice do patients prefer? Exploration of practice characteristics influencing patient satisfaction. *December Journal*, p.654.