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May Focus

One of the least edifying debates of modern times has been the dispute between the proponents of evidence-based medicine and those of patient-centred medicine. Well, not entirely edifying, since anything that produces sparks may shed some light on the problem, however inadvertently. Nevertheless this particular spat has generated more heat than light, not least because what the patients need is not one or the other, but both. Everyone will have their own scapegoats to pin the blame on. My own reasons include the consensus that clinical freedom was being invoked to cloak unacceptable variation in practice, that EBM offered planners and administrators a weapon to control clinicians, and on the other hand the feeling among clinicians that those in the EBM camp were ignoring the personal aspects of good medicine that they take such pride in. If that is correct, then many readers will rejoice at Trish Greenhalgh's defence of intuition on page 395. While this is a welcome effort to tip the balance back towards 'old-fashioned intuition' it is also a real attempt to achieve a synthesis. 'For significant and sustained change in clinical behaviour, knowledge of best evidence must be combined with a change in attitude and motivation …' One reason that intuition has been undervalued is its slippery nature as a concept, and the difficulty we would have trying to teach it.

In the course of her paper, Trish Greenhalgh also discusses the nature of scientific progress and the importance of the imaginative component, quoting Kant: 'It must *certainly* be true of every hypothesis that it could *possibly* be true'. In the Back Pages, Michael Fitzpatrick takes to task the Expert Group on Chronic Fatigue Syndrome and the Chief Medical Officer for 'sanctioning irrationality' in the report published earlier this year. He points out the irony that doctors are trying to leave behind the traditional split between mind and body, while the ME advocates implicitly are trying to maintain it, and reminds us how unsatisfactory the label is as a disease entity, whatever the Expert Group says. However patient centred we wish to become, the professionals must not abandon to lay people their duty to define in objective, valid, and predictively reliable terms what is and is not a disease. The editorial on the same subject, by Ian Stanley and colleagues on page 355, argues that the recognition of CFS/ME as a distinct syndrome is not in line with current research and that we should see it as one of a group of persistent unexplained physical symptoms.

Evidence-based medicine also surfaces briefly in the study on page 381 by Jaye and Tilyard, looking at GPs' prescribing costs and suggesting that, as many have previously argued, doctors who try to apply the latest evidence incur higher prescribing costs by doing so. Here again there is much to please the hearts of traditionalists: the low-cost prescribers seemed to be relying on experience and relationships with patients to keep costs down.

In another offering with a reactionary tinge, on page 364 Lambert *et al* report on the latest of a series of papers on doctors' career preferences. In a welcome counter to all the doom and gloom about our falling morale, they report that GPs continue to get considerable satisfaction from the job. However there is the suggestion that job satisfaction tends to fall over a working lifetime and the survey also confirms the falling numbers opting to work full-time in general practice. This paper, and the survey of students by Henderson *et al* on page 359, are also reassuring that general practice continues to be an attractive career choice for students. The survey found that 'general practice was the only career option to significantly increase in popularity between the first and final year.'

Finally, if anyone thinks that the ethical and practical problems of general practice have become too difficult, turn to the last page (we suspect many readers do this in any case), to read of Saul Miller's wrestling with life, death, ineffective surgical procedures, child protection, and euthanasia among sheep. He says he took them on as a humanitarian gesture, but I think it was to provide useful educational and journalistic material.

DAVID JEWELL
Editor

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