

Target the weather

THUMBING through my morning paper I have come across a fascinating insight into how people behave in advance of a blizzard. Apparently they stock up on soup and salt. Outdoor wear sells better too, but that merely confirms something I expected. As for the soup and salt though, perhaps naively, that came as a surprise to me.

And so it has set me thinking that what is needed is a whole new look at the relationship between weather and health. If primary care really is to get more proactive, this is a gilt-edged opportunity to do so. What follows is my proposal: I hope the profession will look at it seriously, indeed consider today the start of the formal consultation period.

Introduction

No one will do anything any more unless led by the nose towards a carrot-dependent target. Targets are therefore getting ever more numerous and culturally acceptable. What follows, by season, are some suggested targets and the rationale for their use. The carrot count associated with each of these targets would obviously need to be negotiated, but that is beyond the scope of this proposal.

Winter

Once an impending blizzard is known about, 90% of patients with known circulatory disease should be advised of the dangers of excessive salt in the diet before any snows actually arrive. This target is set at 90% to reflect the importance of the health message, but reflecting the fact that some patients may be too busy buying soup to attend their surgery.

Spring

After local flood warnings are issued but before any flooding occurs, 80% of patients with incontinence problems issued with plastic pants to prevent any fouling of the flood waters. The 80% level is suggested for this target as there may be health and safety issues that prevent help being offered to the smellier patients; also, dispersal of fouled water is more rapid in very wet (medical) conditions.

Summer

One week into a warm, sunny spell, (a 1-week warm, sunny spell is defined as: no more than one quarter cloud cover for no more than half the time during a continuous 7-day period in which temperatures remain above 10°C between 9 pm and 6 am, and above 18°C at all other times.), 70% of all epileptics will be warned not to go cycling through dappled woods or lanes since this may trigger fits complicated by the dangers of falling from a bike. This target is set at a lower level to account for the number of epileptics who may already be in hospital by the time the target is triggered.

Autumn

Ninety per cent of bald patients, excluding those previously prescribed wigs, to be warned of the dangers (serious lacerations, atypical infections) of being mistaken for a rocky outcrop by migrating birds. These warnings will be accompanied by the issue of an approved decoy device (prescribable on an FP10) to at least 80% of qualifying patients. This latter target takes into account the fact that the decoys available on the NHS are larger and less discreet than those obtainable privately and consequently some patients refuse to accept a prescription. In particular, many bald women are known to find the standard message on NHS decoys ('Who's a pretty boy then?') disturbing.

Conclusion

The introduction of such a scheme will undoubtedly involve some practical problems, not least the current lack of suitably qualified medical climatologists. Nevertheless, in time, such a system of targets ought to help protect our patients' health and well-being come rain or shine.

our contributors

Iain Bamforth's *Body in the Library*, generally well received, is available in paperback soon. Another Verso volume follows, when they get round to publishing it. More from Iain on Kant and Chekhov in forthcoming issues of the *BJGP*.

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Kevoork Hopayian practises in Leiston, Suffolk. His daughters have followed his footsteps last year. Not into medicine, but the North Sea, on Christmas Day. Starting as a lonesome frolic, the Christmas morning swim is now a local tradition in an otherwise reserved and proper part of coastal Suffolk.

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Patrick Trust is a dashing cavalry officer of a GP who works firmly in the trenches of the Vale of Leven — the length of a hypodermic needle from Yon Bonnie Banks of Loch Lomond. Without Patrick the West of Scotland Faculty of the RCGP might not exist. He skis without breaking anything.

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