

# THE BackPages

## Viewpoint

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### GP EDUCATION FEEDING HEARTS AND MINDS

Several months ago we organised a day at the GP Postgraduate Centre in Edinburgh, 'Encouraging reflective practice' with an introductory presentation by Iona Heath. Other speakers included Tony Toft, ex-president of the RCP in Edinburgh, discussing balancing the art and science of medicine, Tim Scott who had recently published a paper in the *BMJ* on 'Silent narratives in pharmaceutical advertising',<sup>1</sup> Stewart Mercer, who has researched and published on the role of empathy in primary care and John Gillies, author of the RCGP occasional paper on philosophical analysis of the consultation.<sup>2</sup> Along with the speakers were workshops on photography and creative writing as tools for reflective practice.

A tempting way to spend a day? Apparently only four GPs in Lothian and Borders thought so and signed up, so it was cancelled. Clearly, some GPs who might have been interested had clinical commitments and were not able to get locums. Some thought, rightly, that the cost, which was determined by postgraduate centre policy, was too high. The experience of the centre, however, appears to be that topics not directly related to implementation of the contract are perceived not to be cost-efficient. Some potential participants with educational time in hand may have been busy adhering to their PDPs or preparing for their appraisals. All valid explanations, but what does the fate of such a meeting say about our attitude to education for education's sake? A comment from a colleague was salutary, 'If it's not in your PDP, you're not going to go'. Is it really the case that GPs have no flexibility within their year's outline plan to be educationally opportunistic?

Of course, GP education should not return to the self-indulgent jolly that, in yesteryears, it often was. But neither should it be so prescribed and routine that no tasty treats remain. Occasionally pleasure rather than contract points can reasonably be a valid criterion. Our local Borders-wide primary care CPD programme, TIME (Time for Medical Education) provides a framework for protected practice-based learning with half of the 6-weekly meetings being held at a central

venue with the opportunity to meet colleagues from across the Borders, and half practice-based with team-building firmly on the agenda. We are fortunate to have this structure in place to help satisfy educational, and contribute towards contract, requirements. Some of the most useful sessions are those which cast tangential light on what it is to be a GP and this scheme and others like it are not intended to preclude nourishment from other sources.

Healthy (educational) nutrition relies on enjoying reasonable quantities of good basic food but a little of what you fancy also does you good. Last month I attended an excellent day on expedition medicine (not in my PDP) at the Royal College of Physicians. There was a very full and stimulating programme (at two-thirds the cost of the GP postgraduate centre), I felt energised, glad to be a doctor and reminded that there is a big wide world out there. I had my distant knowledge of physiology and microbiology tickled by presentations about altitude sickness and the discussion about essential drugs for expeditions rekindled a rather latent interest in pharmacology. Definitely a gourmet delight.

When my 13-year-old daughter recently had a viral infection with a thumping headache, she said that she felt as though she had a heart in her head. While feeding our heads, we need to be careful that we do not starve our hearts.

**Lesley Morrison**

### REFERENCES

1. Scott T, Stanford N, Thompson DR. Killing me softly: myth in pharmaceutical advertising. *BMJ* 2004; **329**: 1484–1487.
2. Gillies J. *Getting it right in the consultation: Hippocrates' question; Aristotle's answer*. Occasional paper 86. London: Royal College of General Practitioners, 2005.