Contributors

Stefan Cembrowicz stefan@cembrowicz.co.uk

Neville Goodman
Nev.W.Goodman@bristol.ac.uk

Paul Hodgkin paul.hodgkin@patientopinion.org.uk

Brian KeighleyBkeighley@aol.com

Edin Lakasing edin.lakasing@chorleywoodhealth centre.nhs.uk

Richard Lehman edgar.lehman@btinternet.com

Surinder Singh s.singh@pcps.ucl.ac.uk

Graham Watt g.c.m.watt@clinmed.gla.ac.uk

James Willis james@jarwillis.fsnet.co.uk

Elizabeth Woodroffe erzm@doctors.org.uk

James Willis

Thank you, no

My wife and I have letters to prove that we have opted out of the common health record. I mention this because I find very few people realise that they have the choice. But last year we received a routine mailing, in response to what I assume was a national directive. Cleverly disguised as junk mail, which probably accounts for its failure to register with anyone else I've ever met, it included a reply slip which, after a week or two of heart-searching, I completed and sent back.

Some time later I got a telephone call from a nice lady at the PCT who obviously thought it was going to be a simple matter to talk me out of my decision. She seemed to have plenty of time, so I explained my long-standing concerns about the confidentiality of computerised medical records, how I had been one of the two GPs on the Caldicott Commission, how I thought it was essential that some people with nothing to hide, such as myself, should opt out on principle in order to establish everyone else's right to do so, and so on.

Her prepared patter ran out rather early in this exchange, to the extent that I began to think I was persuading her to opt out herself. No doubt she should have done, but rather in the same way that one moderates one's rhetoric when talking to evangelical vicars, I didn't want to win the argument to the extent of leaving her without a job. Anyway, I concluded the interesting conversation by saying how convenient it was that she had rung because my wife had also decided to opt out but had unfortunately lost her form. She cheerfully agreed to put this in hand and soon afterwards we both received our letters confirming that the appropriate block had been placed on the dissemination of our electronic records

There has been a great deal of idle speculation about whether or not the youngest Blair ever had the combined MMR vaccine, which I don't find particularly relevant to anything. But what I would be interested in knowing is whether Tony Blair, or even his whole

family, have opted out of the common health record. My guess is that they almost certainly have. In my experience solicitors and lawyers routinely edit the information they reveal to their doctors anyway, because they understand the implications, but I am sure someone in Tony Blair's position regards himself as a special case.

Which of course he is. That's the point. He is not the slightest bit less special than anybody else.

And all of us special people go to our doctors at, among other times, moments of maximum life crisis and maximum personal vulnerability. And of who us knowledgeable about the realities of the modern world than lawyers and solicitors, still go in the absolute expectation that things they say in confidence will remain inviolate. There was an episode of the Archers last year when a girl was reassured categorically by a kindly aunt, 'Don't worry, my dear, everything you say to your doctor will be treated in total confidence!'

Well, as we all know, in many practices there is no way of recording the things that patients say except on what is now effectively the public record. The people who used to tell people like me not to worry our heads about these things because technology would solve the problems were wrong. The problems have not been solved and are probably insoluble.

My wife and I are in a position to know that many of the benefits expected of shared medical records are illusory, and since the Criminal Records Bureau admitted wrongly labelling 2500 job applicants as criminals earlier this year, and then brushed aside the problem as 'only 0.03% of applicants', we know that there are going to be horrendous new problems.

So thank you, no, we'll take our chances without this brave new system, even if it works. And if enough people took the same attitude the health service might even be able to find better uses for the twenty thousand million pounds, which is the current estimate of the rocketing cost.