cholesterol and triglycerides about which she seemed much better informed than any of the doctors. I mentioned that my last cholesterol (which I'd had to insist on being done) was 5.2 with a ratio of 5.5 between total cholesterol and HDL. 'Wasn't that a bit high?', I asked, and did she think I should be on a statin like my boss, old Ferguson? Nurse Katie said that it all depended on my risk factors, and that my risk of a heart attack in the next 10 years was only 3%. She worked this out on her computer screen and showed me the result. Three per cent seemed a bit high to me.

The fact is I told her, I'd really rather not run any risks at all. Safety first has always been my watchword. So perhaps I would take the statin. But she said that wasn't the view of the NICE guidelines and why didn't we see what we could do first with a non-pharmacological strategy? So we did diet and lifestyle; we discussed alternative medicines, yoga, and acupuncture. Very intelligent woman. By the time we had finished we were on Katie and Norman terms, as if I had known her for years. She suggested I come to see her again in 4 weeks for a blood pressure and cholesterol review. 'Unless,' she added, 'you would rather see one of the doctors for that'. 'No, Katie', I said, 'I have every confidence in your professional abilities and the pace of life seems much less frantic here than with the doctors. I shall come back to you.'

We are grateful to John Salinsky for these extracts from Norman Gland's diary.

Neville Goodman

TERMINAL LANGUAGE CONSTIPATION

We sometimes refer to the collective effort of medical science as the 'medical literature'. Whatever else it is, little of what is written in medical journals is literature. One may ask, 'Why should medical journals have any pretension to artistic merit? They exist to transmit information, not to enrich the soul.' True, but anyone who writes, if they want people to read their writing and absorb their information, will fare better if they have a feel for language. It is this obvious lack of a feel for language that so upsets me when I read the journals.

Doctors commonly write a form of English they would never dream of using in any other circumstance: ponderous, wordy, taking delight in avoiding any everyday word if there is a polysyllabic or less familiar alternative. Where else but in medical journals do we read obviate instead of prevent, or adumbrate instead of outline? What makes armamentarium better than treatments? Why prefer demonstrate to show? Who is impressed by this stuff?

If there is one feature that stands out as almost pathognomonic of this diseased language, it is concatenated nouns: strings of modifiers (although not always nouns) giving little clue to what is modifying what. I do have a vested interest,[1] but can you doubt the need for a feel for language in the person who wrote about 'a non-invasive and ionising radiation free arteriovenous fistulae surveillance study'? This appeared (and I thank the researcher who allowed me to quote it) in a draft information leaflet for patients taking part in a research project. It is almost as if all little words were somehow tainted and better left out. It is the little words that clarify.

Who would want to go on a course that included a lecture about 'Resource releasing operational planning concepts'? On second thoughts, perhaps little words wouldn't help generate interest in that one; the nursing lecture about 'Discourses of care in the occupational resistance strategies of nursing' wasn't very appealing either.

Of course, doctors are not alone in their abuse of English, but doctors are supposed to be well educated. We read books; we go to the opera. It just needs a little care, a little thought, a little use of the virtual ear to feel for what is right.

The virtual ear could have prevented the notice in the public lavatories of Bristol airport advising what to do 'In the event of a terminal evacuation ...'

REFERENCE

1. Goodman NW, Edwards MB. *Medical writing: a prescription for clarity*. 3rd edn. Cambridge: Cambridge University Press, 2006.