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## November Focus

How do GPs consult with children and are we any good at it? A very central part of this month's Journal (Cahill pages 866 & 904).

Re-live your personal experience! As a child I remember a smell. Of polished linoleum floors, a whiff of chloroform perhaps. My wife remembers fog, for her GP smoked a pipe, a spectre in the mist, bearded, phantasmagorical. James Willis, when he became a grown-up GP, remembered surgeries as torture chambers, complete with foot-long stainless steel ear syringes, and hid them in dark drawers thereafter.

Then remember good consultations, when children leave the surgery clutching peak flow meters as new Teddy Bear. Proud to Wheeze! My wise trainer taught me to squat at eye level, look a challenging 8 year old in the eye, and convince them that I, personally, a great great grandchild of Hippocrates, would vapourise a verucca with one lingering killer glance. Ace!

Except it doesn't work like that. Cahill throws a spanner into the reverie. We are gauche. If we talk to older children at all with mother present, we speak in 'motherese', We rarely involve the child in the important bits, like management plans or choosing what to do. Spender editorialises on the subject on page 862. Meanwhile, Corinne Rees on page 920 discusses attachment in a major essay in the Back Pages.

This is an occasion when we must read the Journal slowly, mull it over, then go to work in the afternoon quickly and do things differently. I did so today. I rearranged the chairs in my surgery and prepared for a triadic consultation with the first child and carer to come within range. See Cahill — three chairs for mum, child and doctor, in a tasteful equilateral triangle. No children turned up. But right at the end, in comes wife with sore wound post-incisional hernia repair, and husband worrying about MRSA and other beasties. We sat in our cosy triangle, and mulled things over, and anxiety washed away. (I told them afterwards that we had enjoyed a triadic consultation, our first ever, and they were well impressed. I think. Ace!)

Fluffy bit over, what's hard in this month's BJGP? Roger Jones editorialises on Darzi and is eloquent and depressed (page 860). There are international commentaries on all things general practice. From Spain, on GPwSIs, deeply sceptical (Page 912). From New Zealand, on the elegant game that is blood pressure monitoring (and easier than playing rugby!) — zero end-digit preference in recording blood pressure leads to misclassification as raised blood pressure and over-treatment (page 897). Does that happen in the UK, land of the QOF?

Finally we celebrate BBC radio (page 924), and bid farewell to Hamish Barber.

**Alec Logan**

*Deputy Editor*