

The danger of doctors' advice

the community, which are difficult to sustain.

Apart from western medicine, primary care is also provided by TCM practitioners, who are also perceived as competition by GPs. This pluralistic system has resulted in compartmentalised care in which patients may use public and private service alternatively or simultaneously, with increased risks of iatrogenic illness and wastage of resources. The main competition used to be clear cut between private GPs, TCM practitioners, and government clinics, but has recently become complicated by the emergence of large HMO-like groups, which pose a major threat to the financial viability of individual practitioners.

In addition, there is also an underlying competition between professional disciplines, which works against the development of the step-care approach and is certainly not good for managing chronic diseases. While there is no price differential for patients seeing doctors in the government sector when referred by private GPs, there is for the community-supporting services such as community nurses, community allied health, and geriatric day hospitals. The result is an increasing dependency on the public sector for care of older people, which cannot meet the rising demands. In Hong Kong the dominance of GPs is very obvious, particularly in the private sector, and is another obstacle to the development of chronic disease management strategies and pathways.

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A new report from the parliamentary Health Select Committee proposes drastic measures in an attempt to reduce the burden of alcohol-related illness and anti-social behaviour on the NHS and on British society more widely.¹ A new crusade against alcohol is headed by a 'temperance triumvirate', Health Committee chair MP Kevin Barron, Chief Medical Officer (CMO) Sir Liam Donaldson, and Professor Ian Gilmore, President of the Royal College of Physicians (RCP). The British Medical Association (BMA), the Royal College of General Practitioners, and the Faculty of Public Health all earnestly follow the lead of these Salvation Army revivalists, who sadly lack a brass band.

Critics have noted the socially regressive character of the new 'war on booze', with its focus on women, the poor, and young people, as well as its neglect of the personal and social benefits of alcohol, and its contribution to government revenues and employment.²

I was struck by one widely quoted sentence from the select committee report: 'It is time the Government listened more to the CMO and the President of the RCP and less to the drinks and retail industry.'¹ No doubt the type of partnership symbolised by the Bernie Ecclestone-Tony Blair relationship that led to the exemption of Formula One racing from regulations on tobacco sponsorship has also prevailed in alcohol policy. And it is true that the deregulation of licensing hours and the proliferation of cheap alcohol deals in supermarkets has encouraged late night city centre riotousness rather than promoting a 'civilised café culture' in Britain. But history suggests that doctors are no more reliable than brewers or publicans as guides to public policy.

Although the medical establishment now parades its devotion to the NHS, it fought fiercely against its introduction. Indeed the BMA continued to campaign against the NHS long after it had been established, although the RCP was more ambivalent, after Aneurin Bevan had notoriously 'stuffed their mouths with gold'. The medical profession, including both the BMA and the Royal College of

Obstetricians and Gynaecologists, was ambivalent about the Abortion Act when it was introduced by a private members bill in 1967.³ Although both organisations are now vehemently hostile to the tobacco industry, the BMA and the RCP refused to take a public stand against smoking for a decade after its dangers were recognised.⁴

Taking a wider historical view, the medical profession has an even murkier record. In the early 20th century it was closely identified with the eugenics movement, endorsing compulsory sterilisation in the US and much worse in Nazi Germany. Doctors have ratified diverse forms of discrimination, from quotas for Jews in US medical schools to immigration restrictions on Commonwealth doctors in the UK. Doctors have played a prominent role in the medicalisation of women's lives, most notably in relation to the menopause (resulting in the substantial adverse consequences of long-term hormone replacement therapy).⁵ They have labelled homosexuality as a disease, and though having pathologised masturbation for decades, have lately embraced it as a form of 'safe sex'.

Now the government is urged to take advice on alcohol policy from a CMO whose prediction of 65 000 deaths from swine flu exceeds by about 64 000 the current total? Better to listen to the man or woman in the public bar, or at least their elected representatives.

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