Editor's Briefing

A WINTER'S TALE

This month's Journal contains some unseasonable fare, I'm afraid, but after the warm glow of the 60th anniversary there are bound to be some home truths to face up to. Majeed, Rawaf, and De Maeseneer discuss the first of these in their editorial: the financial pressures likely to be felt, probably unevenly, in general practice as NHS finances become more constrained. Through a combination of reconfiguration of contractual arrangements, list cleaning, and non-achievement of quality targets, budget cuts of up to 20% have already been experienced by some practices. At a time when the need to manage more and more patients with chronic disease and the complexities of multimorbidity continue to drive practice workload, this is particularly challenging. Majeed and colleagues are concerned also that a financial squeeze may exacerbate health inequalities, concluding: *'The NHS has always prided itself on the access to care it has given to the most socioeconomically deprived groups of the population, and this is a focus it should continue to retain even in the current, very difficult, financial circumstances that it is experiencing.'*

The second unpalatable news comes from Michael Goldacre's unit in Oxford, where the career trajectories and views on career preferences of large numbers of UK medical students and doctors are tracked and analysed. Lambert and colleagues report some worrying findings about careers in general practice, which is the preferred career destination of less than one-third of recently qualified doctors. Some senior medical students and new graduates don't even consider general practice as a career option and, when it is considered, decisions seem to be made on the basis of misperceptions about the content and style of work. This is, first of all surprising: over the last 15 years or so, when practice placements have been properly resourced, the proportion of undergraduate curricula delivered either by or through the university departments of general practice and primary care has increased very considerably, so that in some medical schools it amounts to 20% or more of the curriculum. Much of this is spent in direct contact with GPs and their patients, and these placements are generally rated highly by students, not least

because of the individual attention that can be given to consultation and examination techniques, the acquisition and practice of clinical skills, and the opportunity to plug knowledge gaps in this generalist setting. These findings are also sobering, and should make us reflect on what sort of role models and career advice students are exposed to during their undergraduate years: could the university departments, working with the local NHS and possibly with the RCGP, perhaps do more to raise the profile of general practice and promote it as a career destination? The fact that the words 'general practice' are disappearing from medical school documents, as the old departments are phagocytosed into increasingly amorphous groupings of 'community-based' academics, who may have no more in common than a lack of contact with zebra fish, probably doesn't help. Simply increasing the visibility of GPs in medical schools may help.

But there is much in this winter *BJGP* to inform and stimulate: an excellent collection of papers on aspects of therapeutics, including under-prescribing of antiviral therapy for herpes zoster, and polypharmacy in patients with multimorbidity; a clutch of provocative pieces on death, including terminal care, assisted dying, and the certification of death; and other articles on subjects as diverse as writing therapy, smell, and occupational health.

You will, of course, be formulating plans for your New Year's resolutions over the next few weeks and we are pleased to be publishing just what you need to know to make sure you stick to them. In *Making health habitual* (page 664), Gardner, Lally, and Wardle provide effective, practical advice, aimed at practitioners, on encouraging patients to introduce and sustain good habits in relation to the promotion of fitness and health. So, to make sure that the New Year's Day jog is not just the first and also the last of the year, read their paper — we guarantee a healthier you — or your money back! Merry Christmas.

Roger Jones
Editor

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