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EDITOR'S CHOICE

BMJ

One healthy result of the current economic squeeze is a new look at old practices, and this week's *BMJ* has a crop of audit articles. In the Mersey region, for example, only one general surgical registrar post was considered to provide good opportunities for research and only one elective operation was supervised a month (p 455). Marinker *et al* (p 461) show that GP referral rates to hospitals vary much more than their prescribing rates, suggesting that, however difficult

the problem (p 437), a combination of management incentives and peer review is the most promising way of improving things. That costs can be cut and standards maintained is the finding of Lant's team at the Westminster Hospital (p 465): the use of a voluntary drug rationalisation programme meant that in every year expenditure on drugs fell or was held stable, the maximum savings being £0.8-1.0m a year—yet no other London teaching hospital has followed suit.