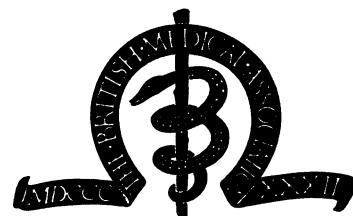


# BMJ

## 1840-1990

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## EDITOR'S CHOICE

# BMJ

Who could have predicted that an Eton and King's (Cambridge) trained doctor, without a higher degree, would become a distinguished neurosurgeon, as well as using engineering skills throughout his life to good effect (which included making his wife's engagement ring from gold that he had mined in Australia)? This is one good answer to the perennial question of why the obituary columns exert such a fascination (p 39). Elsewhere in the journal George Dunea instances the 10 options on diagnosis and treatment for his own olecranon bursitis, finding satisfaction in a

rheumatologist whose verdict was the most convincing (p 31). And there is a helpful article emphasising that rigid appointment systems in general practices may not be the answer in areas of high deprivation (p 22). Finally we need to consider the care of the suddenly bereaved, and the six years' experience at Hope Hospital, Salford, backs up the authors' claim that all accident and emergency departments (and other units where patients may die shortly after admission) need such arrangements—which should be integrated with services in the community (p 29).