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INTERNATIONAL

Editorials	479	Extracontractual referrals: the story so far Malcolm Forsythe
	480	Vocational training in general practice Roger Higgs
	481	Omeprazole M J S Langman
	483	Child placement S N Wolkind
	483	Consultants in communicable disease control G J Duckworth

News	485-488	Australia's Medicare cuts · NHS squeezes credit · Must I explain? · Health gain in Wales · Mapping the human genome · European research · Ethics committees · Mental incapacity
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Papers	489	Long term renal outcome of childhood haemolytic uraemic syndrome Margaret M Fitzpatrick, Vanita Shah, Richard S Trompeter, Michael J Dillon, T Martin Barratt
	493	Breast feeding and vitamin A deficiency among children attending a diarrhoea treatment centre in Bangladesh: a case-control study Dilip Mahalanabis
	497	Extracontractual referrals in first three months of NHS reforms Barbara Ghodse, Salman Rawaf
	499	Dealing with extracontractual referrals J D Williamson
	504	Screening for carriers of cystic fibrosis through primary health care services E K Watson, E Mayall, J Chapple, M Dalziel, K Harrington, C Williams, R Williamson
	508	Use of influenza vaccine in The Netherlands I A Meynaar, J W van't Wout, J P Vandenbroucke, R van Furth
	508	Winter pressure on hospital medical beds A S Douglas, J M Rawles, E Alexander, T M Allan

General Practice	510	The Future of General Practice: General practice education: things to come David Jewell
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Education & Debate	513	Lesson of the Week: Skin avulsion during manipulation of fractures D J Shewring, D Wallace, C M J Healy
	514	The Health of the Nation: responses Children's health David Hull
	516	Cancer C J Williams

518-530	Obituary · Correspondence · Soundings · Personal View · Medicine and the Media · Medicine and Books · Minerva · (in detail overleaf)
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CONTENTS pages 518-530

518 Obituary

R M Humphreys, J Stein, A Datta, D R Oppenheimer

519 Correspondence

- | | | | |
|-----|--|-----|--|
| 519 | Terodiline and torsades de pointes
G J Veldhuis and W H W Inman, FFPM; A H Watt, FFPM; M Geraint, MFCM; J Malone-Lee, MRCP, and others | 523 | Deprivation indices
B Jarman, FRCGP, and others |
| 520 | The health of the nation
Jacky Chambers, MFCM; K Neal, MRCP | 523 | Psychological therapy in the NHS
S Brandon, FRCPSYCH |
| 520 | New dietary reference values
A Macnair, MB | 524 | Rheumatoid arthritis as an infectious disease
A Ebringer, FRCP |
| 521 | Alcohol consumption and risk of coronary heart disease
G Davey Smith, MA, and others; A G Shaper, FRCP, and others; R Jackson, PHD, and R Beaglehole, FRACP | 524 | Not research and development but dissemination and application
P Walker, FFCM |
| 522 | Creutzfeldt-Jakob disease and blood transfusion
S C Arya, MB | 524 | Twenty five years of case finding and audit
S Kaul, MFCM |
| 522 | Controlled trials in single subjects
S Day, BSC | 525 | Confidentiality in medical audit
C W Brown, MRCGP |
| 522 | Investigations: getting from guidelines to protocols
R Gama, MRCP, and S Featherstone, MB | 525 | Audit in new general practice
J Spencer, MRCGP |
| 523 | Childhood diabetes and material deprivation
C C Patterson, PHD, and N R Waugh, FRCP | 525 | Medical academics' concerns over pay
I Alexander, MRCP |
| | | 525 | Drug point Low back pain associated with penicillamine (D B Bannwarth and others) |

526 Soundings

- | | | | | | |
|-----|---------------|---------------|-----|-------|------------|
| 526 | Free to speak | Bernard Dixon | 526 | Trees | Tony Smith |
|-----|---------------|---------------|-----|-------|------------|

527 Medicine and the Media

- | | | |
|-----|----------------------|-------------|
| 527 | Writing in residence | Chris Hawes |
|-----|----------------------|-------------|

528 Personal View

- | | | |
|-----|--------------------------------|--------------------|
| 528 | Still wanting to be James Dean | George Davey Smith |
|-----|--------------------------------|--------------------|

529 Medicine and Books

- | | |
|-----|--|
| 529 | Iain West: <i>Forensic Pathology</i> (B Knight) |
| 529 | Jenny Simpson: <i>Case Studies in Health Policy and Management</i> (C Paton, S Bach) |

530 Minerva

EDITOR'S CHOICE

BMJ

Extracontractual referrals are a problem that simply didn't exist before 1 April this year, but now they consume much management time, effort, and angst—together with several of our pages this week (pp 479, 497, 499). It is reassuring to learn from directors of public health that they are allowing reasonable requests for patient choice, but ultimately money or lack of it will limit that choice. And, as J D Williamson suggests, concentrating such effort on a relatively small number of patients is not the best use of resources. A better use is suggested by Roger Higgs in his editorial on vocational training (p 480), while David Jewell suggests that if undergraduate medical education is redesigned to provide young doctors with basic

principles and a critical approach then by 2011 general practitioner trainees will spend their trainee years learning "real medicine" (p 510). Dr R M Humphreys, whose obituary appears on page 518, undoubtedly practised real medicine in his years in the Sudan treating leishmaniasis, but not until he had played rugby for the Barbarians and survived the Gallipoli campaign. The debate about J shaped curves continues in the correspondence columns—this time it's alcohol consumption and coronary heart disease (p 521)—while Drs Gama and Featherstone take an unfashionable line against protocols in clinical practice, arguing that they may waste resources and increase costs (p 522).