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EDITOR'S CHOICE

BMJ

The poverty of postgraduate training in medicine is highlighted in this week's issue. Obstetricians have been looking hard at the problem because their trainees are beginning to vote with their feet. Susan Blunt reports on a meeting at the Royal College of Obstetricians and Gynaecologists at which trainees told the college grandes that the main problems were lack of career guidance and a structure for training and long hours (p 1416). Maeve Ennis found that about a quarter of a sample of senior house officers in obstetrics had received no training in forceps delivery at the end of six months and that a third of those who had received training thought it inadequate (p 1442). Meanwhile, an extensive survey of the obstetric component of vocational

training for general practice by Lindsay Smith shows that the training increased the trainees' perception of their competence but failed to encourage them to use their skills (p 1447). Obstetrics may be in the spotlight, but the problems extend to all parts of medicine. Stephen Hunter writes an editorial (p 1415) based on a report just published, *Doctors in the Making*, and emphasises that improving the lot of junior doctors requires developments on many fronts. "Solutions" that address only one part of the problem fail. The answer is not simply more money or staff but something much more profound, including acceptance of ideas like junior doctors being accountable to nurses and managers and nurses being formally involved in the training of doctors.