A Question of Quality? – Roads to Assurance in Medical Care
Edited by Gordon McLachlan
(Pp 288, £9.00)
Published for the Nuffield Provincial Hospitals Trust by the Oxford University Press. 1976.

Some may be surprised to find a review in the Journal of medical ethics of a book which is concerned with methods of assuring high quality of medical care, particularly in our own National Health Service. Yet for doctors not to be concerned with the quality of care which they provide and not to be constantly on the look out for any practices which fall below the best standards is surely a breach of the deepest responsibility of all doctors, to justify to the full the trust which his patients place in him. We are not concerned in this matter with acute and perplexing alternative choices of action, but just with the constant grinding responsibility of being good at our job, and being aware of the constant likelihood that because of a variety of incursions of pride, envy and sloth, we may be kept from doing our best for our patients.

Ethical issues are referred to only indirectly in this book. They can be detected in the reiteration of clinicians' sensitivity to critical reviews of their activities which are often dismissed or ignored as manifestations of bureaucratic interference, their vigorous defence of their clinical independence, their slowness to act on clear quantitative evidence of inadequacy, as for instance in some chemical laboratories where low levels of accuracy persist despite their patent dangers. The reader will often find himself having to distinguish between effects of ignorance and sin. It is apparent, for instance, that many clinicians find it difficult to understand statistical evidence of poor performance when presented with a computer output. But is it alright if they dismiss such evidence as irrelevant rather than seeking enlightenment about its meaning for them? This book is primarily concerned with practical techniques for quantitative assessment of medical practice, but it does provide subtle evidence that low standards may as often be due to impairment of conscientiousness as to impaired competence.

CHARLES FLETCHER

Medicines; A Guide for Everybody
Peter Parish
(Pp 453, £1.50)

As doctors we have been very reluctant to wash our dirty linen in public, and so the public has sometimes concluded that we don't wash it at all. We particularly dislike inspection of the standard of our laundry when treatment is in question. Cries of 'clinical judgment' are raised, and the inspectors falter and fall back, murmuring their apologies. But whether we like it or not, we have to face that this is changing and the public is now much more insistent in its questions. How good are these drugs? What exactly do they do? How much does my doctor know about alternatives? How can we decide which to use? The questioning mood is seen in media comment (and the interest it arouses), complaints to MPs, discussion in the surgery, attempted legislation in the House of Commons. So it is hardly surprising to meet, prompt on cue, this bold and authoritative book, which aims to explain in simple language for the ordinary reader what drugs actually do. As both an experienced general practitioner and a learned research worker on the use of drugs, Dr Parish is just the sort of objective insider that professions so seldom seem to produce, but which the public desperately needs. In many ways it is a revolutionary enterprise, and if read well, cannot help but change the style of medical practice in Britain in the next few years.

The book has three main parts. The first is a general introduction to the principles of drug use – their administration, absorption and fate – and has some very helpful advice about pregnancy, children and drivers. There is also here a nicely balanced chapter on drug dependency, and a series of references on over-the-counter preparations. This was too short for my liking, but pointed forward to the other two parts, the last of which is in the form of a popular pharmacopoeia, and is well cross referenced. The middle part, however, is the real meat of the book. Here the author describes groups of drugs according to their use, starting with hypnotics and sedatives, on which he has done much central work. Much of this is in the best style of medical journalism, with concise but careful explanations of what can be expected of modern treatment, and other ways in which we may, as patients, approach our problems. The thorny topics of slimming, tonics, sleeping tablets and the common cold are skilfully written, and Dr Parish seems careful not to so simplify as to mystify; indeed, often his explanations, like that of alpha and beta blockade, would be useful for professional reading.

There must, however, be some objections to what he is trying to do, and in his introduction he deals with the accusations that he will create anxiety, or a more 'demanding' attitude, or more confusion. Those doctors who do not agree with his defence must have an inflated view of their own therapeutic effectiveness. However, there are two further specific questions that worry me. One is the didactic tone of some of his writing, which leaves the physician little room for manoeuvre if he happens to take a different attitude, and the other is the vexed problem of how, how well, and how often this volume will be brought up to date. To take the latter point first, Dr Parish's nine long pages on the contraceptive pill are fraught with
News and notes

Society for the Study of Medical Ethics:

Appointment of Assistant Director

As indicated elsewhere in this Journal, the Society for the Study of Medical Ethics intends to appoint a full-time Assistant Director. The Society, which is multi-disciplinary in all its activities, seeks to reflect its interests in the professions of its staff. The person appointed will therefore be interested not only in interprofessional discussions, but also in the moral and social consequences of medical practice. At the present time the principal activities of the full-time staff are the publication of the Journal of medical ethics and the programme of lectures and symposia, which are arranged by the London Medical Group twice weekly throughout the academic year, in the 12 London teaching hospitals. It is intended to develop this work further by arranging additional seminars, case conferences and the establishment of multidisciplinary commissions to examine specific aspects of medical ethics in conjunction with the Research Project of the Edinburgh Medical Group and under the direction of the Director of Studies of the Society. The successful candidate will work from the Society's offices in London, but will be expected to visit medical groups already established in nine provincial centres.

Staff changes

Anthony Thorley, MA, MB, MRCPsych, who has acted as Honorary Assistant Director since 1972, has been appointed to a consultant post in Newcastle with effect from September 1977. The following new honorary appointments have been made: for the London Medical Group, Richard Nicholson, MA, MB, BCh, who was a short-term full-time Assistant Director in 1974; John Sedgwick, MA, MRCS, LRCP, who was President of the London Medical Group in 1974/75; for the Society, Brendan Callaghan, SJ, BA(Oxon), MPhil, a clinical psychologist, who was a joint secretary of the Consultative Council of the Glasgow Medical Group from 1975 to 1976, and Mark Papachouda, MA, MB, BChir, Penny Stewart, SRN, who has been Secretary since 1972, has been appointed Personal Assistant to the Director with effect from 1 April 1977.

Society for the Study of Medical Ethics: First northern conference

The first northern conference of the Society was arranged by the Edinburgh Medical Group in conjunction with the Glasgow, Newcastle, Liverpool and Manchester Medical Groups, and held on 21 and 22 January 1977 at the Edinburgh Medical School. The subject was 'Human Birth: Social and Moral Issues in Reproductive Medicine'. The speakers were Professor Emeritus A S Duncan, Miss Margaret Auld, Mrs Jean Robinson, Dr Marion Hall, Mr Alex Call Smith, Professor Forrester Cockburn, Professor Norman Morris, Dr Christine Cooper, Dr John Scrimgeour, Professor Neil Schimke, Mrs Patricia Wilkie and Dr Alan Templeton. The conference was attended by about 100 participants, mostly members of the medical, nursing and social work professions and students.

Book reviews—continued

warnings about coming off the pill if there is any question of pregnancy. Even scanty withdrawal bleeds, which are relatively common, are under suspicion. Although there is no conclusive evidence, the Royal College of General Practitioners' recently published study (British Journal of Obstetrics and Gynaecology, 83, 608–616) goes a long way to reassuring us that pregnancy on the pill does not produce a damaged baby: but Ms Average will not have access to this report, and will presumably remain misinformed for some time to come. In the same section, amongst a page and a half devoted to precautions, we find: 'Young girls (under 16 years of age) . . . on the pill for more than nine months should stop the pill for one month and have their daily temperatures checked to see if they are ovulating. . . . If they are not ovulating, they should not be on the pill and should be referred to a gynaecologist'. One hopes that not too many schoolgirls thus at risk of pregnancy will read his advice, even if they forgive him for giving a legal category ('under 16') spurious medical sanction. If a young teenager is menstruating regularly, I know of no evidence that she is more liable than her elders to post-pill amenorrhoea, and many completely normal women take longer than a month to ovulate after stopping the pill. It is often very hard to balance the unexplained, unpredictable and the rare but possibly permanent hazard of infertility against the predictable and sadly common hazard of an unwanted pregnancy in a schoolchild. However, in his enthusiasm, academic or otherwise, Dr Parish seems to have forgotten the occasionally desperate side effects of failed family planning that he has met in the surgery. These may seem small criticisms, and they are made of a magnificent book which I should heartily recommend for doctor, patient and waiting room: but, however heroic, it has a flaw, and that, as literary critics remind us, is the stuff of which tragedy is made. 

ROGER HIGNETT