

to any great extent it may do harm to science by causing much irritation, for it will be difficult to persuade the public of the necessity for such stringent measures if they find not only that while they are themselves in good health, neither the members of their families nor the public with whom they may come in contact suffer in any way from infection, and they will become sceptical as to the truth of the verdict that has condemned them to this disability.

I used the word isolation more as referring to removal from work with their fellows than in the true sense of the word. To get perfect results clinical and laboratory work must go hand in hand, and those in practice may help a little towards this by careful observation and recording the results.—I am, etc.,

Fulbourn, April 21st.

F. L. NICHOLLS.

#### THE FUTURE OF GENERAL PRACTICE.

SIR,—I wonder if many of your readers have pictured to themselves the general practice of the future, the practice of ten years or so hence, what time a grandmotherly State shall have tucked under her wings all the classes which make up private practice of to-day and undertaken the responsibility and the supervision of their medical needs. When all the workers with their wives, and children over school age shall have come in under the National Insurance Act and be doctored by sweated club doctors; when confinements will all be attended by midwives under the control of the Public Health Authority, to whose assistance in time of danger a specialist will be sent by the same authority; when the babies will be tended by the same authority's health visitors, and attended by that authority's official doctors; when the tuberculars will all be attended by the public health officials; and finally when the children attending public elementary schools, for all their diseases and ailments shall have come under the school medical officer, who is himself either the medical officer of health or his subordinate.

A dream? A nightmare? Well, perhaps. But this dream has foundations only too realistic.

With regard to the struggle over the National Insurance Act, however well it goes for us, we shall certainly be club doctors under the heel of a lay committee, and as certainly be sweated. Married women will be coming in under the Act in five years, and it may safely be assumed that before long children will come under the Act immediately they obtain employment.

An enormous number of women are now attended by midwives, who employed the family doctor ten years ago. How many will be left to him in ten years' time? The extern service of some of our hospitals has proved to the public that a woman in labour may be safely attended by an unqualified woman, provided that a qualified practitioner is at her beck and call, and that such attendance has the approval of hospital staffs. It would probably not be difficult to organize a maternity service for the whole country on such lines as these, utilizing midwives and specialists alone, the whole service being under the control of the Public Health Authority.

An extension of the present system of visiting and advising mothers as to the care of their babies would soon bring all the little ones under school age under the health visitors and staff of official doctors.

There are already the beginnings of a tuberculous service in the country, employing inspectors and "specialists," which may soon be expected to grow, under the stimulus of the Insurance Act, into a formidable competitor with the private practitioner.

The Education (Administrative Provisions) Act, 1907, was the official foundation of a medical service, under public health administration, designed to give medical treatment to all the children of school age in the kingdom.

It is true that up to the present the policy of the Board of Education has been to let down the private practitioner quite gently, but in the 1910 Report of the Chief Medical Officer and in the Memorandum on grants published in your issue of April 27th there are many indications that there is no room for the independent private practitioner in the comprehensive scheme of treatment which has up to the present been merely adumbrated, but that if, and

when, private practitioners are to be employed, they must be under the authority of the School Medical Officer.

"The Treatment Clinic arises naturally out of . . . the Inspection Clinic; its roots should always be found there" (Rep., par. 197). In the Memorandum these roots get their top-dressing, a grant given, not for medical inspection, but for treatment. Treatment is the pet child of the Report and the last word of the Memorandum. The local education authorities which have gone farthest in treatment get the greatest approval, while the laggards are tuned up. And, be it remembered, that which is approved by the Board to-day will be insisted on to-morrow. In my opinion, the ideal of the Board of Education—kept quietly for the present, but constantly and consistently before them—is a system of treatment of all elementary school children by official doctors under the control and supervision of the Public Health Authority. This ideal system, at first confined to such ailments as malnutrition, diseases of the eye, teeth, ears, nose, throat, and skin, will gradually enlarge its borders to embrace almost every conceivable disease that children suffer from, and the medical charities will be requisitioned to deal with such cases as the official staff cannot grapple with. Then we shall have in being Sir George Newman's ideal, "a simplified and unified State medical service" (Rep., par. 7). In this service the independent private doctor will have no place. Even at the present time he is only tolerated by the Board on certain conditions, one of which is that his work must be "carried out under the supervision of the school medical officer" (Rep., par. 200, cf. par. 4).

At the same time that the Board are engineering this frontal attack on general practice they are also laying mines. Local authorities are urged to take the fullest possible advantage of existing voluntary hospitals, thus adding enormously to the sum total of that hospital abuse which has already played so prominent a part in damaging general practice (Rep., pars. 168 et seq.).

So then it would appear that in a very few years the whole of the working-class population will have their medical needs attended to by a number of special medical services. Moreover, our knowledge of the working of the Education Act does not encourage us to hope that better-off folk will keep aloof. What will be easier and, indeed, more logical than for the State to intervene at the right moment and "simplify and unify" these services into one State medical service—a service in which the private doctor has no place, and which leaves him none but the idle rich?

It is not my wish to argue the point as to whether a public medical service will be good or bad for the profession and therefore for the community. My object has been to put before your readers what I consider to be the inevitable. If we consider a State service to be in the best interests of the community we should acclaim and encourage the march of official work. If not, then surely we should not merely protest but take strong action to combat the sure effects of this work. We should not merely seek to palliate the Insurance Act but refuse to touch it save as private practitioners. We should refuse to countenance school clinics unless worked by all of the local profession who so wish. We should refuse hospital treatment, except for urgent conditions and operations, to elementary school children. We should deny the right of the medical officer of health and the school medical officer to supervise the work of his, probably, more experienced colleague, the general practitioner. We should condemn the unqualified maternity work of midwives and nurses, even when covered by specialists. We should welcome the proper work of health visitors, nurses, inspectors, *et hoc genus omne*, as useful and important auxiliaries in the never-ending struggle with disease, but discountenance any interference with the at least equally important work of the independent private practitioner. And we should do all this, not primarily nor even principally, because our vested interests are being interfered with, but because it is our honest opinion that the greatest and best and most efficient general medical practice in this country has for generations and still is being carried on by the independent private practitioner.—I am, etc.,

Bristol, April 30th.

H. F. DEVIS.