

to pay. If there are to be "approved lists of doctors" (which looks rather like "lists of doctors who approve of one another," however well-founded that approval may be), the proper consultant who needs no recommendation beyond his record and his reputation with G.P.s will soon find himself at a disadvantage compared with others whose main talent is for self-promotion. If Dr. Kidd knows of patients who have suffered from late reference to a specialist, most G.P.s know of some who have suffered through self-reference to a specialist of doubtful calibre, and even of some who have undergone unnecessary mutilation at the hands of a consultant who was renowned for ability as well as for avarice—the female breast, the gall-bladder, and the uterus or its contents being prominent expendables.

A survey of Harley Street through the *Medical Directory* is extremely instructive. Judging by their qualifications and appointments, a large number of the denizens are true consultants while some are bona fide G.P.s; plenty are neither of those things.

It could, of course, be argued that so many doctors do advertise, G.P.s as well as consultants, in ways that are just out of reach of the G.M.C. or difficult to prove in front of it, that we might as well give up the struggle. I still think it would be a pity if we did.—I am, etc.,

Maldon, Essex.

DAVID CARGILL.

Seasonal Incidence of Hodgkin's Disease

SIR,—With regard to Dr. S. H. Blondheim's letter (December 23, p. 1714), I hasten to point out that the term "festival incidence" of Hodgkin's disease in my letter (October 14, p. 1022) was in no way meant to relate to the intake of alcohol. The implication in my letter, as in Dr. K. W. Beetham's (September 30, p. 896), was that patients frequently date the onset of their symptoms with a particular event, be it Christmas, a birthday, or a funeral. Extra care in dressing for such occasions might also lead to the discovery of an enlarged lymph node.

In my article on the seasonal incidence of Hodgkin's disease (September 2, p. 621) it is stated that "in the majority of cases the disease presented simply with painless enlargement of a lymph node." Three patients were reported to have had tender nodes initially, but it is pertinent to add here that in the 269 case histories reviewed alcohol-pain was not the presenting symptom in a single instance.—I am, etc.,

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Shortage of Doctors

SIR,—Where are all the medical graduates on the *Register*? I understand that the total number is more than 85,000 and it is not easy to see just where they all are. It seems to me that it would greatly help to clarify the situation if, before people start talking about shortages in this, that, or the other section in medical practice, there could be issued some authoritative reasonably detailed breakdown list of the numbers of doctors engaged in various types of work, or married and not working, or retired, or resident abroad. Nowhere have I seen such a list published and I think with its aid there could be much more useful and informative discussions on this very difficult topic. Would it not be possible, Sir, for the British Medical Association to issue such a list?—I am, etc.,

Aberdeen.

C. D. NEEDHAM.

SIR,—I trust that all readers of the *Journal* will read your leading article (December 9, p. 1548) entitled "A Pretty Ghastly, Awful Picture." Those of us who have not already pondered over these matters with some concern should surely do so now.

I would like to refer to the shortage of *British* doctors which is already a serious problem and one which will obviously become serious in the years to come. At present this is most obvious in the hospitals, but inevitably it will be noted in general practice where its effect on the general public will be more generally felt. I maintain that the average general practitioner has far more cases on his list than he can give adequate attention to. The paltry increase of 7% in medical students between 1939 and 1958 mentioned by Professor Jewkes is not a matter that can be remedied overnight; and it is known that an increasing number of graduates are now going abroad or being absorbed into specialties or administrative appointments and therefore fewer and fewer into general practice.

It is obvious to all who have practised before, as well as since, the National Health Service commenced that a given number of patients in a practice now require far more items of service, and therefore an increasing amount of time is expended by the general practitioner in providing attention for minor ailments which could well be given by someone with far less elaborate training. Could some scheme not be devised whereby certain individuals, who for certain reasons did not wish, or could not take, a full medical training, could be given a selected training over a short period and perhaps recognized by a diploma at the end, so that they could be capable of dealing with the minor ailments which are the bugbear of the general practitioner and often prevent him concentrating on the more serious matters he has to deal with? There are plenty of health centres, group practices, and large partnerships into which these individuals could be absorbed.

The College of General Practitioners is doing a commendable job in attempting to raise the standard of general practice, but to my mind the situation will only improve if either there are more doctors per patient or they have more time to devote themselves to a proper study of their patients.—I am, etc.,

ALISTAIR ARGYLL ROBERTSON.

Bourton-on-the-Water, Glos.

SIR,—It is some 10 months since you permitted me to make a statement in your columns with regard to the selection of medical students (March 11, 1961, p. 743), and it is now pertinent that this problem should be associated with the growing concern about the expected shortage of doctors. During the year 1960 this College received some 1,662 applications for 120 places in the 2nd M.B. course, while from a conservative estimate this number has risen to over 2,300 for the current year. In the future we must expect a continuing increase in applications, and the numbers are likely to become of embarrassing proportions with the advent of the "bulge" in 1965-6. Thus it is obvious that there is no difficulty in obtaining recruits for medicine, but that our problem lies in supplying sufficient facilities for training them and inducing those that have become qualified to remain in the Health Service in the country.

I should like to propose the following suggestions for improving the present situation and safeguarding our future supply of doctors: (1) Increase recruitment. (2) Modify undergraduate training. (3) Introduce