

able to turn to the advertising world. And while talking about the advertisements, alleged to have done so much harm, it is worth while looking at a letter penned from the Royal College of Physicians this week by two eminent Fellows:

"The meagre evidence of serious harm caused by meat eating, confectionery and white bread is of a totally different order to that which concerns the cigarette." (*The Times*, December 1.)

I can find no evidence of cigarette advertising in *Doctors' Orders*. Is it wise to get too excited about meagre evidence?—I am, etc.,

Pinner Hill,
Middlesex.

ERIC J. TRIMMER.

SIR,—In *Medical News* of 3 April 1964 I suggested a Health Code to educate the public on matters of diet, hygiene, etc., and consequently I was specially interested in *Doctors' Orders*, which presumably the staff of *Family Doctor* were already preparing.

It must have been obvious to its editors that no matter what was put in or left out they were bound to be shot at. One must admire their courage in undertaking a task for which they could expect little thanks.

Doctors' Orders is not the sort of booklet I would have issued. For one thing I would have insisted on wholemeal bread and I would have condemned all refined cereals; but it must be conceded that if people could be induced to read *Doctors' Orders* and act upon its advice a very great improvement in the general standard of nutrition and hygiene would result.

The panel on page 35 headed "Good, Bad, or Indifferent" emphasizes the importance of a good, well-varied, and widely mixed diet, and this I believe is the quintessence of sound dietetics. I suggest that doctors who are critical should recommend to their patients as much of the teaching of *Doctors' Orders* as does not conflict with their own heresies.—I am, etc.,

Lenzie, by Glasgow.

ALEX CRAWFORD.

SIR,—As a general practitioner I am surprised and dismayed at the apparently critical reaction to the introduction of *Doctors' Orders*.

There is growing concern in the country at the increasing work load on the shoulders of the medical profession. For the first time general practitioners are becoming really united in their attempts to face up to the reality of the serious situation in which we find ourselves. The determination of purpose and the knowledge that "Right is Might" cannot much longer be denied. Indisputable evidence goes forward to our leaders from all sides and this is bound to give them strength to negotiate for us. Let us not "rock the boat" by being too critical of this first effort on a really national scale to educate the patients in the "rules of health." Everyone in the land can learn something from this booklet. There is a lot of good sound common sense in it. Perhaps if this had been done years ago our work load might be less now. Let us not judge *Doctors' Orders* as a medical textbook. It is for the masses, not the medical few. It is a first attempt by the B.M.A. to enter every home with a view to reducing the medical work load in the years ahead, and is a positive

step in the right direction. Such a project might perhaps have been better served by Government finance rather than by advertisement backing but nevertheless the B.M.A. has created something where previously there was nothing. It is a start and worthy of the support of everyone connected with health. Let us be critical in a constructive way so that the next issue may be even better.—I am, etc.,

Musselburgh, Midlothian.

C. C. LUTTON.

SIR,—We write to disassociate ourselves completely from the publication *Doctors' Orders*. This publication runs counter to all our advice to our patients, particularly its emphasis on, and advertising of, carbohydrate. We are therefore telling our patients to ignore it.

Its format is appalling. It does nothing to help reduce our work load. That such a publication can be produced under the auspices of the B.M.A. confirms us in the view that the B.M.A. is pathetically out of touch with general practice.—We are, etc.,

J. HALFORD.

M. A. PRATELLI.

London N.22.

Delay in Negotiations

SIR,—The Autumn Budget and the increase in Bank Rate to 7% makes the Review Body's procrastination all the more difficult to bear. Yet hardly a voice is raised in protest. Why the lull? Where now are the cries of the fourteen per centers? Don't they realize that their concerted clamour of a few months ago was responsible for the production of S.C.7, the formation of the Fraser Working Party, and the resignation of the past Chairman of the G.M.S.C.? But now silence. Are they satisfied with the revised form of S.C.7 now in the hands of the Review Body and our negotiators? How can they be, when they do not know what the contents of the revised document are? Are their memories so short that they cannot remember that the 14% fiasco itself was the outcome of secret negotiations? But true to form we continue to cope with an ever-increasing work load—and wait.

All will be well. But will it? Have we not learned from the past that we are dealing with a ruthless political machine, willing to pat us on the head as the backbone of the N.H.S. but quite content to let us run into the ground before lifting a finger to help us? Why should any Minister of Health listen to us—we have no single spokesman? He continues to gamble on the fact that our trump card of withdrawing from the Service will never be played, and he is reassured by past experience that he is "on a good thing." Who would dare suggest such a thing? The B.M.A.'s loyalties are too diversified, the G.M.S.C. too engrossed in trivia, the M.P.U. is rent asunder by internal strife, and the G.P.A. unfortunately is not yet numerically strong enough. Can we blame the Minister for adopting the attitude that, no matter what conditions are offered, general practitioners with their wives and families will continue to act as the scaffolding which prevents the N.H.S. from crumbling?

Is there the slightest chance that we will reject the Review Body's recommendations if they fall short of our demands? Are we prepared to resist the usual bait of back-

payments, accruing as a direct result of the old political weapon of delay, when our bank managers are breathing down our necks? In short, have we any plans at all if the Review Body do not play ball? None that I have heard of. It may be that we belong to a respected and honourable profession but as negotiators we are a bunch of ineffectual part-time amateurs. Ineffectual because we are totally disunited and lack positive leadership, part-time simply because our work is full-time, and amateurs because we have all been trained in a gentle profession and are not by nature tempered for the cut and thrust necessary to parry the professionals with whom we have to negotiate.

One need only think back to the now famous "Panorama" programme to realize how ineffectual and amateurish we are, and can only wonder if the performance of the previous Minister would have been so smooth and condescending had he had to cope with a single adversary well supplied with ammunition and well drilled in the art of getting it across. Instead we insisted on doing it ourselves with a democratic representation of all our disunited factions. The result—a flop—with the golden opportunity of gaining public sympathy and support gone once more.

Let us be realistic; in the past we have tried to do it ourselves and failed. Whichever medical organization has the foresight to appoint a full-time professional negotiator will have my unqualified support, and should also attract that of all practitioners interested not only in their own survival but also in the continuance of general practice as we know it. If there is a man of sufficient stature to unite and lead us let him be found quickly. Time is running out.—I am, etc.,

Stevenston, Ayrshire. J. S. K. STEVENSON.

This Freedom

SIR,—Some time ago Pertinax (29 August, p. 568) wrote that the medical profession was pervaded by Fear—"Fear of the Man from the Ministry." I would have substituted "exasperation" for fear. How complicated our lives have become!

In 1945 my wife and I sank our capital into a country practice. This was taken over in 1948 on the hire-purchase system. A small token payment was made but we are still owed about £4,000. We entered the N.H.S. with enthusiasm and plenty of good will. It wasn't perfect but it was a start, and in course of time much would be improved. It wasn't until the 1960s that we finally lost all our illusions. We then decided that we would no longer provide a 24-hour service for 365 days and we decided to have an assistant. Then the Man from the Ministry made his presence felt. He said that we were in a restricted area and couldn't have one. I believed that I was an independent "contractor" providing medical services and was entitled to employ any help that I felt was needed. Apparently I am only free in certain senses. Various letters were exchanged and I engaged an assistant, paid, and housed him and pointed out to the local council that we wished to have at least two free evenings a week and at least two free week-ends a month, and it was only by having an assistant that we could do that and ensure an adequate service to our patients. We also pointed out that I was 58 and had no intention of remaining any longer in the Service