considerable distress to family and friends and disruption of working life, as well as causing considerable strain on hospital based services. This study shows that parasuicide also causes a considerable increase in the workload of general practitioners, but by recognising that increase, manifested by accelerating attendance patterns in already high attenders, general practitioners are uniquely placed to intervene, to treat, and to prevent the social, psychological, and economic disruption caused by parasuicide.

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Audit Report

Prescription writing by general practitioners

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The section on prescription writing in the *British National Formulary* advises that the dose of drug, frequency of administration, and other directions should preferably be stated in plain English without abbreviation.¹ It has been reported elsewhere that prescriptions are often written incorrectly by doctors and their receptionists.²

A group of 135 general practitioners, all concerned in medical education, were invited by letter to submit duplicate copies of their first 10 prescriptions in any one week. They were not informed of the intended method of analysis but were assured of absolute confidentiality. Any doctor inquiring about the analysis was informed of the method but then excluded from the project. Invitations were sent to the members of the Newcastle young practitioners group and the trainers and trainees of the Northumbria vocational training scheme.

Each prescribed item was categorised as an inhaler, topical preparation, or other medication and was analysed to see whether the instructions on the prescription were wholly in plain English or (partly or wholly) as Latin abbreviations. Seventy six (56%) of the 135 doctors invited submitted their 10 prescriptions for analysis (760 prescriptions for 1838 items). Of the 80 prescriptions for inhalers, 26 (33%) were in Latin, 2 (3%) were wholly in plain

English, and 52 (65%) had no instructions. Of the 204 prescriptions for topical preparations, 91 (45%) were written in Latin, 19 (9%) were wholly in plain English, and 94 (46%) had no instructions. Of the remaining 1554 prescriptions, 1171 (75%) had instructions in Latin abbreviations, 265 (17%) were wholly in plain English, and 118 (8%) had no instructions.

There was no observable difference among the trainers, trainees, and young general practitioners in the manner in which they wrote their prescriptions. Many prescriptions contained mixed English and Latin instructions—for example, once daily for one item but tds for another on the same script. Some doctors mixed English and Latin instructions for a single item—for example, once daily prn.

Thus less than half the prescriptions for inhalers and topical preparations carried any instruction, and most instructions (1288; 70%) for all items were written, at least partly, as Latin abbreviations; 264 (14%) had no instructions and only 286 (16%) were written wholly in plain English. Practice clearly does not correspond with the advice given in the *British National Formulary*. This is a matter of some concern.

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