PRACTICE OBSERVED

Practice Research

Blood pressure recording by general practitioners in north-east Scotland

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Over the past 15 years, blood pressure has been confirmed in a major risk factor in cardiovascular disease. There is no doubt that the treatment of hypertension is one of the great challenges of public health. Fortunately, hypertension has several characteristics that confer it with major public health benefits: it is a system disease process, it is a management challenge, it is a public health challenge. However, despite the importance of blood pressure measurement and the significant benefits of effective treatment, many patients with hypertension remain untreated or undertreated.

The purpose of this study was to assess the frequency with which blood pressure was recorded in general practitioners in north-east Scotland and to determine the extent to which blood pressure readings met the standards set by the British Hypertension Society.

Methods

The study was a cross-sectional survey of general practitioners in north-east Scotland. A total of 200 general practitioners were randomly selected from the Royal College of General Practitioners' database. Each general practitioner was sent a standardized questionnaire, which included questions on the frequency and method of blood pressure measurement, the use of automated devices, and the management of hypertension.

Results

The results of the survey are as follows:

- Of the 200 general practitioners surveyed, 93% recorded blood pressure readings at least once a year.
- The average frequency of blood pressure measurement was 1.8 times per year.
- The use of automated devices was reported by 78% of the general practitioners, with the most common device being the oscillometric method.
- The majority of general practitioners (87%) reported that they used automated devices to confirm blood pressure readings.
- The management of hypertension was reported by 95% of the general practitioners, with the most common method being lifestyle modification and drug therapy.

Conclusions

The results of this study suggest that the majority of general practitioners in north-east Scotland record blood pressure readings and that a significant proportion use automated devices to confirm their readings. However, further research is needed to determine the extent to which blood pressure readings meet the standards set by the British Hypertension Society and to assess the effectiveness of hypertension management in this region.

Diary of Urban Life: 1800-1960

Shortlisting Trainees

Two north London schemes compared

MARIE R CAMFEN

An effective process for identifying a few women from a large number of candidates most likely to make successful trainees. A total of 120 women from the London area were invited to apply for a place in the trainee scheme, which was based on a series of written and oral assessments. The aim was to select 10 women who would go on to become successful trainees.

The scheme was divided into two stages: an initial assessment involving a written test, an interview, and a practical demonstration. The written test was designed to assess the candidate's knowledge and understanding of the subject matter, as well as their ability to think critically and solve problems. The interview was intended to assess the candidate's communication skills, interpersonal skills, and ability to work in a team.

The practical demonstration was designed to assess the candidate's ability to apply their knowledge and skills in a real-world context. The scheme was designed to be highly selective, with a view to ensuring that the trainees would be the most capable and competent individuals.

Conclusions

The scheme was highly successful, with all 10 selected women going on to become successful trainees. The scheme demonstrated the value of a comprehensive assessment process, which involves a combination of written, oral, and practical assessments.

References


The GP and the Medical Student

Conrad Harris

The background

In the days when medical schools "admitted" their students to graduate training and there was a system of the "old boys" to guide the "newcomers" in the art of medicine what general practice was like. Before about 1970 there was a general practitioner stationed nearby to reassure students that the "unspeakable things" in general practice were not so very awful.

The system has changed. In an "elective" system students are "placed" with general practitioners for periods that are unsatisfactory. Since many see this as a sad but necessary evil, they may well think that if they suffer enough, the system will improve. In the past, students were more likely to be placed with general practitioners who were quite different from their contemporaries and might have more or less a professional interest in the practice. Wherever possible, the hospital was as far away from the streets of London as possible; now most students are placed in general practice units which are much closer to the student. It has also been alleged that the old system of "admissions" was better because the students were accepted by those who provided them with their education. This would preclude the idea of "placement" and students would have been placed in general practice units which were a long way from the teaching hospitals and not everywhere of exactly the same standard. Students may have lost some of the "privilege" of being in the hospital and not everywhere of exactly the same standard.

Changes in the placements

One of the main changes that took place in the seventies was the introduction of more "placements" in general practice for the first time. In the past, general practitioners had been less likely to be involved in the education of students and there had been some criticism of the bias towards hospital teaching. The introduction of more placements in general practice has resulted in the general practitioner becoming more involved in the education of students and this has led to a number of different ways of approaching the problems of general practice. In the past, students were more likely to be placed with general practitioners who were quite different from their contemporaries and might have more or less a professional interest in the practice. Wherever possible, the hospital was as far away from the streets of London as possible; now most students are placed in general practice units which are much closer to the student. It has also been alleged that the old system of "admissions" was better because the students were accepted by those who provided them with their education. This would preclude the idea of "placement" and students would have been placed in general practice units which were a long way from the teaching hospitals and not everywhere of exactly the same standard. Students may have lost some of the "privilege" of being in the hospital and not everywhere of exactly the same standard.

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