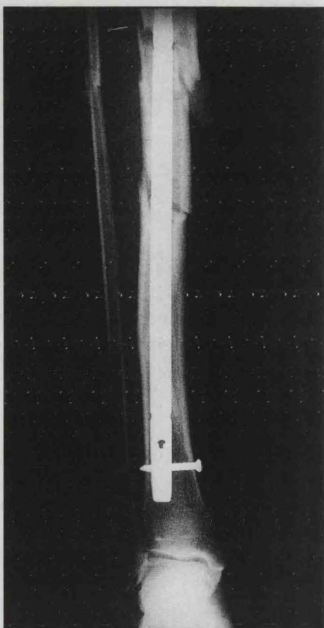
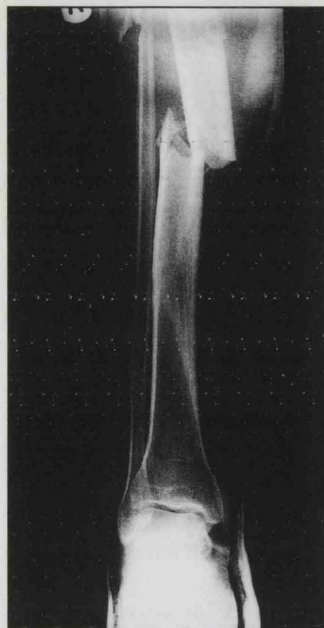
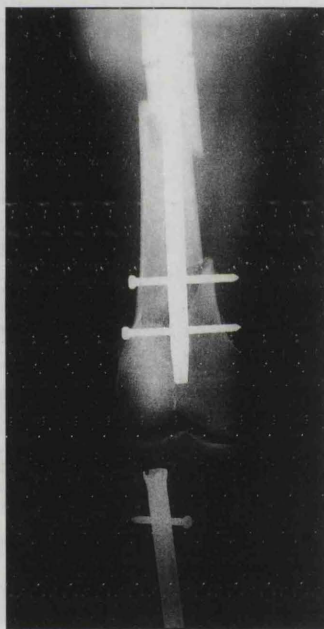


NEWS & NOTES



Letters to the Editor

The treatment of multiple long bone fractures

Sir: – I am afraid that the impact of the article by Ross Barker published in the May 1999 issue of the journal (*Morecambe Bay Medical Journal* 1999; 3(5):189-190) was much reduced by the omission of key X-rays of the proximal end of the femur. The point of the article was that we now have a device which can fix fractures right from the top of the femur to the bottom, and although this was mentioned in the article, I think the point will be missed by the omission of these X-rays which I would be grateful if you could publish, pre- and post-op.

Yours sincerely

HD Stewart

Consultant Orthopaedic Surgeon

RLI

(X-rays illustrating this technique are shown opposite)

The importance of consultation skills

Sir: Dr Knapper responded to the question 'what should we do about it?' (*Educational issues in 1999, Morecambe Bay Medical Journal* 1999;3(5):191) with some pertinent observations. As a GP he receives comments from his patients about their experiences in the secondary care sector, and suggests that hospital consultation skills are not what they might be.

Working at the hospice we are in a privileged position. We meet patients at the end of long and complicated medical journeys. Over months and years they have met many professionals, medical and nursing, from both the primary and secondary sectors. A frequent observation is 'he/she just didn't listen to me'. From the ivory tower of the hospice, with more time for patients and families than elsewhere, it doesn't do to be too critical. But patients are enormously forgiving of bad news, failed treatments and even mistakes if they have been given a chance to express an opinion. They want to be listened to, to be involved in the consultation rather than to be talked at, not an easy skill to develop in a necessarily brief consultation episode.

The dictionary defines consultation as 'an act of consulting, deliberation or conference', ie something that requires two parties to be effective.

Advancing technology makes diagnosis of disease much easier. In the days before CT, MRI, PET etc one made a diagnosis by listening to the patient. Are students still told '70% of the evidence for the diagnosis comes from the history'? The diagnosis was confirmed at the bedside by finding appropriate signs. Some simple tests clinched it.

A favourite saying of a surgical consultant in Leeds 30 years ago was 'Listen to the patient; he is telling you the diagnosis'. We no longer have to rely on the patient's story

and he therefore feels less involved. Training in communication skills is a useful tool, but let's start by listening to the patient. It is a therapy in itself.

Yours sincerely
Margaret Ellam
Consultant in palliative care
St John's Hospice
Lancaster

NEW APPOINTMENTS

Consultant Radiologist



Dr John Brunton has been appointed as a consultant radiologist for the Lancaster and Kendal hospitals and took up his post in July 1999.

He was born in Ashton-under-Lyne but educated in Edinburgh and Aberdeen, graduating from Aberdeen University in 1985. After junior posts in medicine, surgery and microbiology in both Scotland and England he worked in radiology as a registrar and senior registrar for five years in Aberdeen Royal Infirmary and associated hospitals. This included six months spent at Raigmore Hospital, Inverness.

In January 1998 John embarked on a year working as a senior registrar in radiology and lecturer in clinical and radiological anatomy at the Royal Perth Hospital in Western Australia and the University of Western Australia. After this he returned to the radiology department at Aberdeen Royal Infirmary for the few months between his return from Australia and moving to Lancaster.

John's special interests include cross-sectional imaging, non-interventional gastrointestinal radiology, oncology radiology (including breast radiology) and ENT radiology.

His leisure interests are hill walking, sailing, the cinema and theatre.

Consultant in Palliative Medicine



Dr Margaret Ellam took up a post as a consultant in palliative medicine in June 1999. The appointment is shared between the Morecambe Bay Hospitals Trust and CancerCare, Dr Ellam sharing her time between Royal Lancaster Infirmary and St John's Hospice.

Dr Ellam was born and brought up in mid-Wales. After qualifying at Leeds University in 1970 she had a career in anaesthetics for fifteen years. Initially she worked in the Yorkshire region and then moved to Cornwall, with her husband's career.

In Cornwall she discovered palliative medicine and has worked in this speciality for fourteen years. She came to St John's Hospice in 1994, initially working as an associate specialist and more recently as a locum consultant.

She looks forward to developing palliative medicine in the area, particularly in the infirmary and community settings.

LANCASTER MEDICAL BOOK CLUB

Minutes of Lancaster Medical Book Club

This interesting book provides an excellent introduction to the oldest medical society in the region, and gives a synopsis of the changing medical and social practices over the past 170 years. Its production was started by LMBC members in 1993 and the book was written by the then archivist, GH Anderson. With help from a number of former committee members the production and printing costs were underwritten, allowing the book to be sold for £10 per copy (£12 including postage and packing), and it is obtainable from the treasurer, IJ Page, through the Postgraduate Medical Centre at the Royal Lancaster Infirmary.

Copies can be ordered at the centre, and cheques should be made payable to Lancaster Medical Book Club.

Retired GPs Lunches

These informal lunches will be held on the following dates at the Shrimp Inn, Morecambe:

Thursday, 4th November 1999 at 12.30 pm

Thursday, 16th March 2000 at 12.30 pm

All retired GPs are invited to attend.

WESTMORLAND GENERAL HOSPITAL EDUCATION CENTRE PROGRAMME September – December 1999

SEPTEMBER

Tuesday 14th

7.30-9.30 pm Speaker: Dr Albert T Day,
Medical Protection Society
Title: Courting disaster – medicological aspects of sudden death
PGEA: 2 hours SM

Education Centre

NOVEMBER

Wednesday 3rd

Joint meeting with PCG
Afternoon workshop at the Netherwood Hotel,
Grange-over-Sands

Provisional – to be confirmed

In addition there will be the following 'live' teaching sessions held once a month on Tuesdays, 1-2 pm at the Windermere Health Centre (each session 1 hour DM):

Interactive live dermatology teaching on the management of skin problems via a video-conferencing link between Windermere Health Centre and the Dermatology Department, RLI – 21 September, 19 October, 23 November, 14 December.