

Politics, faith and medicine

Julian Tudor Hart is a GP best known for his 1971 inverse care law (patients with the greatest need tend to receive the poorest healthcare). He reflects on the influence of his own beliefs: 'I was such a big public figure as a Communist and an Atheist, and this upset some of the strict chapel people, who virtually don't exist now, who in those days were a powerful force'. But he is even handed: 'Anybody who insists on high standards of care for poor communities - it doesn't matter what angle they come from, whether Christian or Conservative or whatever - all of them, as far as I am concerned, are involved in progressive politics, helping people to stand up for themselves'. (*New Generalist* 2007; 5.1: 62-65)

State funding for hospices?

An article on state funding for hospices revisits the formation of the country's earliest hospitals, commenting favourably on their Christian origins. St Thomas's was founded with 40 beds in the 12th century and run by nuns and monks to care for the 'sick and the merely needy' and Bible-seller and MP Thomas Guy opened his hospital in 1721 for 'incurables'. These had to wait up to 800 years for full state funding; hopefully hospices will do better. (*BMA News* 2007; 7 April: 14)

Medicine to ministry

Is it just Eutyclus, or is there a lot more about spirituality in the journals these days? A careers piece considers Rainer Verborg who trained as a surgeon in trauma and orthopaedics in the West Midlands before becoming a monk in 1998; vicar Steven Benford, ordained for six years and an associate specialist in anaesthetics; and Margaret Jacobi, a respiratory physiologist who became a part time GP and is now a rabbi at the Birmingham Progressive Synagogue. (*BMJ Careers* 2007; 7 April: GP134)

Suburban shaman

However, the spirituality in question isn't always positive. Opting out of out-of-hours care freed time for Enfield GP Ian Rubenstein to join a 'psychic development circle' and his occult-sounding experiences there have continued into his consultations. He does have a sense of humour though. Describing himself: 'He plans to become a medium by starting off as a large and going on a diet'. (*New Generalist* 2007; 5.1: 73-74)

Reincarnation researcher

Hopefully similar factors were not at work in the career development of Ian Stevenson, a 'psychiatrist who researched reincarnation with scientific rigour'. According to his whole page *BMJ* obituary, the vice president of the Rockefeller Foundation told him: 'The most important question is, "Is there a life hereafter?"' Stevenson devoted the next 50 years to parapsychology and an associate concluded 'He believed the evidence was sufficient to permit a reasonable person to believe in reincarnation'. Eutyclus thinks Hebrews 9:27: 'Man is destined to die once, and after that to face judgment' answers the question. (*BMJ* 2007; 334: 700)

Judaism and the sanctity of life

Rounding off this review of spiritual coverage in the journals, the *British Journal of General Practice* devoted almost two pages to a religious consideration of the sanctity of life, with 'Judaism, a religion that delights in encapsulating everything possible in codes and laws' as its context. Eutyclus couldn't agree with everything in the article, but was pleased to see it. (*BJGP* 2007; April: 332-333)

GPs and gambling

With the supercasino coming, health concerns associated with gambling are being reviewed. A *BJGP Viewpoint* tells us: 'Pathological gambling is a known diagnostic category. Problem gambling is enmeshed in other addictive behaviours, most notably drinking and smoking. There are a variety of other mental health concerns of varying severity, from stress and depression through to increased risk of suicide among people with more serious gambling concerns.' The authors go on to ask whether all this is to become the responsibility of GPs, and if so, predict that 'may well be uncomfortable for the majority'. (*BJGP* 2007; April: 327)

Circumcision to prevent HIV

Championed for years by the *Lancet*, some doctors have long been recommending routine male circumcision to prevent the transmission of HIV. Two recent randomised trials from Kenya and Uganda suggest male circumcision cuts the risk of HIV by half. The *BMJ* countered that 'unhygienic circumcisions may increase risk of HIV in Africa' but the debate seems to have been settled by WHO and UNAIDS jointly recommending circumcision as an additional intervention. Director of HIV/AIDS at WHO, Kevin De Cock, said: 'The recommendations represent a significant step forward in HIV prevention'. (*Lancet* 2007; 369: 643-56, 657-66, 617-9, 615, 708-13. *BMJ* 2007; 334: 498. <http://news.bbc.co.uk/go/pr/fr/-/1/hi/health/6502855.stm>)

Alert on MedicAlert

To accompany the enactment of the Mental Capacity Act, Dignity in Dying (the former Voluntary Euthanasia Society) is running a campaign to petition Lord Hunt to establish an online database for advance refusals of food and fluids, and then to get all its supporters to sign up and wear MedicAlert bracelets advertising the fact. Eutyclus finds such bracelets helpful clinically, but this scenario seemed to echo the words of Jesus to Peter in John 21: 18: 'When you were younger you dressed yourself and went where you wanted; but when you are old you will stretch out your hands, and someone else will dress you and lead you where you do not want to go'. (See www.livingwillscampaign.org.uk/ Click on 'Your questions answered' and scroll down to find the link to MedicAlert.)