Letters to the Editor

The Journal welcomes Letters to the Editor; if found suitable, they will be published as space allows. Letters should be typed double-spaced, should not exceed 400 words, and are subject to abridgment and other editorial changes in accordance with journal style.



A Reader's Perspective

To the Editor:

Letters to the Editor are better received than sent, if one happens to be an editor. I cannot remember when I last wrote such a letter, but the February 1982 issue of The Journal of Family Practice hit the jackpot with me. It contained no fewer than four articles of special relevance to issues and projects of current interest in the UAB Department of Family Practice. I usually consider myself fortunate if I find even one article of special pertinence in any single journal issue—so four is an all-time high. That is not to say that I do not enjoy reading articles of general interest; one reads for perspective, pleasure, self-defense, etc, but one is not often lucky enough just to stumble onto an answer to a question one has been grappling with.

Articles of which Al Berg is coauthor would always attract my attention—no matter what the topic—but the titles, "Outpatient Termination of Pregnancy: Experience in a Family Practice Residency," and "In Search of a Solution to the Primary Care Denominator Problem,"2 are of special pertinence to our Family Practice Center. We have just initiated a therapeutic abortion service, which is limited to persons and the families who are registered with us. We have performed about 10 such procedures and are still formulating policies and procedures as well as discovering the technical refinements we want to use. Finding an article that reports 260 patients treated in a setting very much like ours was a bonus. I hope we can have as good results and as few complications as their department has had over a decade.

As for the second paper, I understand the nature of the "denominator problem" in ambulatory care research. We are beginning a study of the epidemiology of somatoform disorders (a la *DSM III*) in a family practice setting, so we know there is a problem.

Mayer's article on referral patterns in a health maintenance organization³ is down our alley too, because we are preparing a pilot program proposal for local uses. It was very helpful to compare our estimates with Mayer's.

Finally, Gjerde and Coble's "Resident and Faculty Perceptions of Effective Clinical Teaching" is going to become required reading in our department. It is right on target to solve certain problems we have.

You have done an excellent job with *The Journal of Family Practice*. It is still the only "legitimate" academic journal in our discipline. Although we have other journals that are good in certain ways, they do not carry much weight with promotion committees. *The Journal of Family Practice* has made a major contribution to the development of family medicine. It will be a long time before it has a real competitor—maybe never.

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References

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2. Cherkin DC, Berg AO, Phillips WR: In search of a solution to the primary care denominator problem. J Fam Pract 14: 301, 1982

3. Mayer TR: Family practice referral patterns in a health maintenance organization. J Fam Pract 14:315, 1982

4. Gjerde CL, Coble RJ: Resident and faculty perceptions of effective clinical teaching in family practice. J Fam Pract 14:323, 1982