



in practice, it took me at least 5 hours to deal adequately with 16 patients: 4 hours'-worth of 15-minute appointments followed by an hour of patient-related admin. Those 5 hours exclude management and teaching work and continuing professional development (CPD), let alone lunch.

So a full-time GP is one who does seven clinical sessions per week plus some teaching, CPD, and audit, and has the occasional coffee break to debrief with colleagues. To achieve their stated aim of encouraging 'an accurate portrayal of general practice', Shemtob *et al* should answer their own question far more assertively: '10 sessions of clinical general practice' is not 'doable', and definitely not sustainable.

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#### REFERENCE

1. Shemtob L, Driessen J, Howe A, *et al*. Notes for a profession in difficulty. *Br J Gen Pract* 2023; DOI: <https://doi.org/10.3399/bjgp23X733041>

DOI: <https://doi.org/10.3399/bjgp23X733257>

## Sludge and ordeals in primary care

In his briefing this month our Editor cogently explains the way in which healthcare systems often harm patients.<sup>1</sup> I must, however, disagree with part of his final sentence.

My experience, as an RNID volunteer who meets people seeking help with issues around hearing loss, is that GPs do not seem to recoil from deliberately imposing ordeals on our patients. If they did, they would not be withdrawing ear wax services and making them only available to those who can afford to pay for treatment – indeed, a 'Tax on Wax'.

This issue is one that is harming patients, promoting the Inverse Care Law, and resulting in negative publicity for our specialty. Even RNID is weighing in on this indefensible change.<sup>2</sup>

Munro *et al* provided a helpful review of

the subject for GPs and their staff in the BJGP February 2023 Issue.<sup>3</sup>

GPs need to restart ear wax removal in our practices.

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#### Competing interests

Ted Leverton has moderately severe hearing loss and contributes to research and articles on hearing loss.

#### REFERENCES

1. Lawson E. Sludge and ordeals in primary care. *Br J Gen Pract* 2023; DOI: <https://doi.org/10.3399/bjgp23X732549>.
2. RNID. Our ear wax removal campaign. <https://rnid.org.uk/get-involved/campaign-with-us/ear-wax-removal-campaign> (accessed 12 Jun 2023).
3. Munro KJ, Giles TC, Smith-Howell C, Nazareth I. Ear wax management in primary care: what the busy GP needs to know. *Br J Gen Pract* 2023; DOI: <https://doi.org/10.3399/bjgp23X732009>.

DOI: <https://doi.org/10.3399/bjgp23X733269>

