

EDITOR

David Jewell, BA, MRCGP
Bristol

DEPUTY EDITOR

Alec Logan, FRCGP
Motherwell

JOURNAL MANAGER

Catharine Hull

SENIOR ASSISTANT EDITOR

Erika Niesner

ASSISTANT EDITOR

Moira Davies-Cinar

EDITORIAL ASSISTANT

Tania Marszalek

ADVERTISING EXECUTIVE

Brenda Laurent

DISPLAY ADVERTISING SALES EXECUTIVE

David Cox

CLASSIFIED ADVERTISING SALES EXECUTIVE

Peter Wright

EDITORIAL BOARD

Richard Baker, MD, FRCGP,
Leicester

Stephen Barclay, MD, FRCGP, DRCOG
Cambridge

Chris Butler, MD, MRCGP
Cardiff

Kath Checkland, PhD, MRCGP
Manchester

Mark Gabbay, MD, FRCGP
Liverpool

Clare Gerada, MBE, FRCGP, MRCPsych
London

Roger Jones, FRCP, FRCGP, FFPHM, FMedSci
London

Murray Lough, MD, FRCGP
Glasgow

David Mant, MD, FRCGP
Oxford

Tim Peters, MSc, PhD, CStat, FFPH
Bristol

John Sandars, MSc, MD, FRCGP, MRCP
Leeds

Mark Shapley, FRCGP, DCH, DRCOG
Newcastle-under-Lyme

Niroshan Siriwardena, MMedSci, PhD,
FRCGP
Lincoln

Theo Verheij, MD, PhD, MRCGP
Utrecht, The Netherlands

Sue Wilson, BA, PhD, PGA
Birmingham

EDITORIAL OFFICE

14 Princes Gate, London SW7 1PU
(Tel: 020 7581 3232, Fax: 020 7584 6716).

E-mail: journal@rcgp.org.uk

<http://www.rcgp.org.uk/bjgp>

PUBLISHED BY

The Royal College of General Practitioners,
14 Princes Gate, London SW7 1PU. Registered
charity number 223106. The *BJGP* is published
by the RCGP, but has complete editorial
independence. Opinions expressed in the *BJGP*
should not be taken to represent the policy of
the RCGP unless this is specifically stated.

No endorsement of any advertisement is
implied or intended by the RCGP.

PRINTED IN GREAT BRITAIN BY

HPM Limited, Prime House, Park 2000,
Heighington Lane Business Park,
Newton Aycliffe, Co. Durham DL5 6AR.

Printed on 100% recycled paper



ISSN 0960-1643 (Print)

ISSN 1478-5242 (Online)

September Focus

Imagine that your great-grandmother, say, had fallen asleep for 100 years. Waking up, and kitted out in modern clothes, she decides to accompany you on the weekly family shopping trip to the supermarket. How would she react to the cornucopia of goodies on display? We who do this every week are used to it, but stand back a moment. In the spirit of investigative journalism at my local supermarket I counted at least 21 different brands and flavours of extra virgin olive oil, 23 different sorts of pasta, and more than 30 different kinds and brands of rice (I lost count). Do we really need this range of goodies? Every so often I catch myself finding it rather revolting.

Such musings are set off every time there is discussion about choice in the NHS, where the policy makers seem to want to turn us all into some kind of healthcare supermarket. This month we have two related papers addressing what kind of choice people want as patients. On page 609 in a qualitative study participants reported that the idea of having a choice was important, and made them feel their autonomy, and their ability to weigh up options was being respected. But they were wary of being offered meaningless choices, such as a choice of consultants without any relevant information to differentiate between them.

The accompanying quantitative study on page 614 backs up these findings, with the authors suggesting that there is a clear distinction between having a choice, and deciding which option to take. This will strike many as intuitively true, and the editorial on page 603 helps to explain why. 'Having a choice' may mean more than it appears, and includes being able to question and express any kind of personal preference. But 'making a choice' carries with it more responsibility than patients want to have to bear, especially when they are seriously ill. The authors of the editorial argue that we should be trying to bridge the gap between the two by encouraging shared decision making. Such research should encourage us to try to keep some

kind of control over the terms of the debate, so that 'choice' is seen as participation not as some kind of NHS supermarket — glossy, meretricious, confusing, and wastefully competitive.

Not that it doesn't matter. In case readers think it is all so much candy floss have a look at the study on the perceptions of women in prison on page 630. It's likely that some of their feelings about their health care would have been coloured by their feelings of being imprisoned, but through the accounts is a sense of not being listened to or being treated with respect. At least they have access to health care; on page 664 Helen Lester appeals to doctors to stand up for the rights of asylum seekers not to be denied such access altogether.

David Jewell

Editor

DOI: 10.3399/bjgp08X341986

© *British Journal of General Practice* 2008; **58**: 601–672.