Canad. Med. Ass. J.
Nov. 14, 1964, vol. 91

THE LONDON LETTER 1081

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A SIDE EFFECT OF PHENOTHIAZINES

A paper read to the Royal Society of Medicine and recently published in the Proceedings of that body (57: 758, August 1964) gave rise to somewhat unnecessary alarm in the popular press. In this paper Hunter and his colleagues from the National Hospital, Queen Square, London, described an apparently irreversible syndrome of abnormal movement following the use of phenothiazine tranquillizers. They distinguished this clinical condition from the well-known reversible parkinsonian state, and described it as a syndrome of abnormal movement developing after some years of phenothiazine medication and persisting after withdrawal of the drug. In a chronic population of a mental hospital they found an incidence of 50% among female patients given phenothiazines, these women being demented and aged from 56 to 84. Six of these patients had undergone leukotomy, and most had received electroconvulsive therapy. They had been on phenothiazines for from 18 months to five years before developing a continuous grimacing with mouth, jaw and tongue movements so gross as sometimes to interfere with eating and drinking. The authors emphasize that this syndrome suggests that the neurotoxic effects of these drugs may be more far-reaching than has been thought and that they may perhaps produce permanent structural changes.

This publication was mentioned in the popular press, and may have caused some alarm to patients taking phenothiazines and to their relations. However, Medical News, on September 11 and 18, was quick to point out that this side effect appeared only after prolonged use of the drugs in older patients with suspected or established brain damage. Apart from the 13 patients described by Dr. Hunter and his associates, 27 other cases have been reported in France and Scandinavia, all but two in women and the majority with suspected brain damage. This finding must be considered in perspective against the fact that some 50 million patients are said to have been given one of the phenothiazines, chlorpromazine, alone. There is no adequate substitute for phenothiazines in the treatment of schizophrenia, and this and other side effects must be accepted as an unfortunate but at present inevitable price for the benefits of this therapy.

SEND FOR THE DOCTOR

The argument about unreasonable demands on the doctor's time in Britain has continued in lively fashion throughout August and September. That part of the press which does not like doctors anyway has been very rude about them and their "bitter and undignified attacks on patients of the National Health Service", while *The Times* printed a revealing account by a special correspondent of the day he spent in a typical suburban practice, ending with a note about a patient who called the doctor out at night for a dental condition and when remonstrated with said that he dare not call the dentist because the latter would be "flaming mad at being disturbed"! A number of people who have entered into the fight continue to suggest that the N.H.S. has had nothing to do with this problem, but

that the population has always included a number of unreasonable people.

Meanwhile, new data on so-called emergency calls to general practitioners continue to be published. Pinsent, a G.P. in Birmingham, recently published an analysis of "out of hours" calls received in practice (Lancet, August 29, 1964), asking himself whether the doctor's skill was necessary and also whether the presence of the patient's own family doctor was of value. His analysis of a series of calls showed that almost a third were occasioned by respiratory disease (which may not be too surprising to those who have lived in Birmingham). Nearly half of this group had a cold and another substantial number some virus infection resembling influenza. Only a little over 10% of calls were due to accident or violence and very few were due to mental disorders. In less than 10% it was necessary to admit or refer patients to hospital and only half of the patients needed a prescription, usually not an urgent one. A surprising number of conditions were found capable of solution by reassurance and advice.

Pinsent looked into the quality of the household, but figures seem evenly distributed among good, fair and bad households in terms of physical facilities and family capabilities. Nearly half the cases could have been adequately dealt with by a nurse, and less than a third really needed the assistance of the patient's own doctor. Many cases were extremely trivial, and Pinsent comments that "all too many calls represented gross abuse of a community service by the thoughtless, the foolish and the malicious". This author wonders whether an authorized emergency call service for out-of-hours work might not be a good thing, and whether more use could not be made of trained nurses to handle house calls. As he points out, under the present system, the practitioner has no redress against the patient who flagrantly or persistently abuses the service beyond requesting removal of the offender from his list, thus passing the client on to some unfortunate colleague. Lastly, he draws attention to the fact that in North America house calls form a much smaller proportion of the practitioner's work, possibly through tradition and possibly through the increased availability of private automobiles.

GEOCHEMISTRY AND LIFE

In recent years investigation has begun into the reaction of living organisms to the chemical composition of their environment. The chemical relationships between rock, soil and water on the one hand and plants and animals on the other are influenced by a complicated series of factors, and the link between human health and geology is often more complex. This theme has been well discussed by Webb in the New Scientist for August 27, in which he presents a consideration of nutritional relationships. Animal nutrition and health are influenced by the composition of the herbage consumed from a variety of soils; human health and nutrition, on the other hand, are less easy to relate because the food may come from distant places and the human being also moves from one geological environment to another. It is well known that in animals toxic and deficiency disorders can be related to trace-