

From the Editor

The age of Enlightenment

His was not a household name. He was neither doctor nor scientist but made his mark on history as an eloquent and highly regarded scholar of Rousseau and the age of the Enlightenment.

Robert Wokler (1942–2006) was born in France of Polish and Hungarian Jewish refugees. He was fond of recounting that he began life by saving the lives of his parents since his infant status gained all three of them entry to Switzerland and an escape from the Holocaust. In 1964, he graduated from the University of Chicago with a degree in social sciences and continued to pursue academic posts in Oxford (where his DPhil was supervised by Isaiah Berlin), Cambridge, Reading and Manchester.

Wokler became disillusioned, however, by the rigidity of teaching in the UK, resigning his tenured post to move to Yale University where he found a constructive and supportive environment for his talent and energy. He remained immensely productive up to his death in July 2006; his principal project, *The Cambridge history of eighteenth-century political thought*, which he co-edited, has been published posthumously.¹

Wokler's disillusionment certainly resonates with many aspects of today's medical education and training. If he were to advise us on generating a new 'age of medical enlightenment', of what might this consist?

It would certainly contain a reference to the relative paucity of doctors per head of population in the UK compared with other developed countries. It would recognise that the increase in medical undergraduates is a sensible response and that this would result in a welcome increase in the number of doctors qualifying each year. Plans would be in place for expanding and funding additional training opportunities and permanent posts appropriately.

It would highlight that the medical profession still attracts outstanding undergraduates who undergo long years of training. For that commitment, and to ensure continued effective recruitment, the plan would ensure reasonable prospects for career progression, and permanent employment after completion of training.

Training programmes would be planned well in advance and trainees would have clear guidelines, support and encouragement. They would in turn respond with enthusiasm and commitment to their training and profession.

European Working Time Directives would be modified to ensure that professionalism remained paramount in training and that teamwork was restored.

The increasingly rigid and tightly controlled structure and fixed training objectives to ensure competence would be amended in order to preserve flair, imagination and originality. Arrangements would be in place to ensure that outstanding individuals could pursue original alternative programmes and, like Robert Wokler, tread paths beyond the conventional. The potential lifetime contribution of such rare and talented people is immense and they would be encouraged and cherished in the new age.

Thus far, the 21st century 'age of medical enlightenment' has been little more than a glimmer. The challenge is to ensure that enlightenment prospers and that it is not snuffed out in the current climate.

A new look for 2007

The new cover for the Journal shows the genetic sequence of nucleotide bases from a sample of DNA. The components are common to all but the

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sequence is unique for each individual. This image reflects the modern image of the College and its Journal.

ROBERT ALLAN

Reference

- 1 Goldie M, Wokler R (eds). *The Cambridge history of eighteenth-century political thought*. Cambridge: Cambridge University Press, 2006.

Professor W Ian McDonald

Professor W Ian McDonald, an ambassador for British neurology, a world authority on multiple sclerosis and a musician, died suddenly on 13 December 2006. He was a friend to many in all walks of life and was a valued member of the Editorial Board. We had made plans together for a series of articles in the Journal on music, medicine and the mind. His co-editor, Dr Jason Warren, has kindly agreed to develop the series which will be dedicated to Ian McDonald's memory.

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Modernising Medical Careers and the birth of postgraduate specialty schools of medicine

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Introduction

Across the UK new bodies, to be called the postgraduate specialty schools, are being established to manage postgraduate specialty education. These structures, which reflect the development of mature postgraduate programmes, fuse the functions of the Royal Colleges and the postgraduate deaneries to the potential huge benefit of specialist education. All physicians, at training and career level, will be affected by the new structure which could realise the brightest hopes for Modernising Medical Careers (MMC).

Modernising Medical Careers

Unfinished business,¹ the Chief Medical Officer's report on proposals for the reform of the senior house officer (SHO) grade, recommended that all postgraduate medical education should take place within programmes designed primarily for education. This proposal received general support from the medical profession through feedback from Royal Colleges, deaneries, service delivery bodies, specialist societies and university medical schools. The subsequent white paper entitled *Modernising Medical Careers* crystallised this idea with a two phase introduction of these programmes.² Phase one was the introduction of a two-year foundation programme,

which added a second generic year to the pre-registration house officer (PRHO) year. Phase two merged the SHO grade with the specialist registrar (SpR) grade, to create new run-through grade (RTG) specialty training programmes. These reforms were a logical evolution of the 1996 Calman reforms to specialty training, which, following comprehensive evaluation, were deemed a success.³ In 2005, foundation programmes were established in all deaneries across the UK. Reformed specialty programmes have now been established, and are currently recruiting, for foundation graduates to enter in August 2007.

Why was change needed?

Some commentators have complained that all this reform is quite unnecessary. Why 'fix' an essentially well functioning system? UK postgraduate medical education is, after all, the envy of the world and has produced many of the best specialists. It would be true to say that, for forty or more years, the apprenticeship model of postgraduate education did seem generally effective, but the working and training environment has changed. In the past, the exposure of trainees over 100-hour weeks to many clinical cases, more or less well supervised (depending on the firm) did seem to allow the gradual accumulation of confidence and, in the main, competence. Today, however, the NHS is different. Patients demand to be