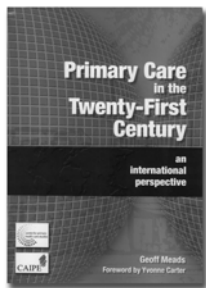


Primary care, as it stands

Primary care in the twenty-first century: an international perspective. Geoff Meads. Oxford: Radcliffe Publishing, 2006 (ix + 153 pp, \$62.60). ISBN 1 85775 711 4.



AT A TIME when primary care is undergoing rapid change, this book is timely, enjoyable and provides useful insights. A vast amount of field-work has been drawn together within this book, with over 200 interviews, 50 visits to local primary care organisations, and many thousands of miles of travel. Meads, based at Warwick University's Centre for Primary Health Care Studies in the United Kingdom, and with a health policy and management background in the UK's National Health Service, visited 33

countries between 2002 and 2005.

As an academic and clinician, my interest lies in how best to influence primary care to provide the most efficient and effective care. This book is the best summary of the current models, worldwide, that I have read. The author describes six models:

- the extended general practice
- the managed care enterprise
- the reformed polyclinic
- the district health system
- the community development agency
- the outreach franchise.

Meads uses a series of case studies (including one from Sydney) to summarise the strengths and weaknesses of each model and how they have evolved within their own country. I would have preferred a more detailed analysis of each of the models, but I sense this was not his main aim. Meads wanted to document and "make sense of primary care in the twenty-first century".

His conclusions are thoughtful, but too brief and lacking in detailed debate. He argues that primary care and the evolving organisational frameworks worldwide are now so intertwined with each country's complex health systems that they can never be considered as stand-alone, independent health care providers. The challenge this book then leaves me with is how to protect the primary care health provider-patient relationship, as the political reality of increased accountability and management becomes more stark. Unfortunately, primary care needs to satisfy both perspectives because, as Meads states, primary care "flourishes most where it has political alliances".

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