Delivery of genetic services

While the principal role of *Journal of Medical Genetics* has always been, and will continue to be, the reporting of original research in the field, the particularly close links between research and service in genetics makes the topic of delivery of genetic services one of relevance to all workers in this area. The occasional series ‘Medical genetics around the world’ has illustrated this as applied to different countries; the following paper looks at how a well developed medical genetics service in one country (Britain) is likely to change as a result of major general changes in the system of health care now being implemented.

Most doctors and medical scientists in Britain (and most of the public) have viewed the introduction of these changes with considerable concern, while relatively small specialities such as medical genetics, whose function is largely a preventive one, have received little consideration and could be seriously harmed if their present structure is needlessly disrupted. Nevertheless, the new proposals for changing the British National Health Service are now law and Professor Harris’s article is thus especially timely in looking critically at how the speciality should respond. This is not a topic of concern only to workers in Britain; all countries are in the process of developing their genetic services, with many different models being used. Countries other than Britain may learn much from how the speciality evolves in the face of this challenge.

For the majority of readers unfamiliar with the British system and the changes proposed, it should be noted that these changes do not alter the principle of a universally available service, free to the user and funded mainly from taxation. The role of health authorities has, however, been radically changed from one of direct provision of health care to one of purchasing it for their population from a variety of sources. Hospitals may now function outside health authority control as ‘self-governing hospital trusts’, though still within the National Health Service.

It could be argued that, in the present favourable political climate of international cooperation, there is a need for a forum where the different patterns of delivery of genetic services can be discussed. The forthcoming International Human Genetics Congress in 1991 could serve as a focus for this; meanwhile the Journal will be happy to receive communications that may help to raise the standards of genetic services generally, as well as those which point out problems and deficiencies which our speciality needs to remedy.

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