Letters to the Editor

Joseph Scherger, MD, MPH
Editor, Letters to the Editor Section

Editor's Note: Send letters to the editor to jscherger@ucsd.edu. We publish Letters to the Editor under three categories: “In Response” (letters in response to recently published articles), “New Research” (letters reporting original research), or “Comment” (comments from readers).

In Response

Response to the Murder of George Tiller

To the Editor:

In his September 2009 commentary, “The Murder of George Tiller—Where Is Family Medicine’s Response?” Josh Freeman, MD, recognized the important role that George Tiller, MD, played as a family physician in his community, prior to being shot to death in his church on a quiet Sunday morning. Dr Freeman appropriately notes the depth of this tragedy for his family and his patients and how inappropriate the use of violence is in expressing an opinion regarding any issue, even one as controversial as abortion. At the same time, Dr Freeman called into question the fact that no family medicine organization has made a formal statement regarding the murder of Dr Tiller.

As the leadership of STFM, we would like to respond to this particular issue as it relates to our organization. First, it is important to note that Dr Tiller was not, nor had ever been, a member of STFM. While we recognize the death of STFM members in our monthly electronic newsletter The Messenger, we do not acknowledge the death of non-STFM members. Just as important, we have chosen to not comment on issues that are not directly related to the education of medical students, residents, or faculty development. This is true on multiple issues, not just abortion. In fact, STFM has made no official comment on the current health care reform debate except as it relates to medical education issues. While we do not officially comment on such issues, we certainly support dialogue among our members and learners on complicated issues, including the well-being and safety of those who provide training and mentorship in the provision of abortions.

STFM is committed to our mission of advancing family medicine to improve health through our membership. While our sympathies are extended to his family, his patients, and his community, STFM stands behind the decision to not comment as an academic organization on the murder of Dr Tiller.

STFM Executive Committee
Terrence E. Steyer, MD
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Scott A. Fields, MD, MHA
Alison Dobbie, MD
Ellen Whiting, MEd
Stacy Brungardt, CAE

In Reply:

We agree with Dr Van der Wouden that great care should be taken in inferring causation from mere associations. In his comments, Dr Van der Wouden correctly points

Prescribing Antibiotics

To the Editor:

Li and coauthors studied antimicrobial prescribing for upper respiratory tract infections and subsequent return visits. Both the title of their paper and their interpretation of the outcomes suggest that the authors may have misinterpreted correlational data as causal. Their finding that prescribing antibiotics did not result in a decrease of return visits should therefore be interpreted with caution. It may be possible that, in case of an antibiotic prescription, physicians more often ask patients to come back than without such a prescription, for instance to verify whether the prescription has had the planned result. If this alternative interpretation would be valid, the study results may be not as helpful in “dispelling an important myth about patient antibiotic-seeking behavior” as the authors advocate.

To reliably assess the effect of antimicrobial prescribing on return visits, the choice of asking the patient to come back should be independent of the prescription.

Johannes C. van der Wouden, PhD
Department of General Practice
University Medical Center Rotterdam
Rotterdam, The Netherlands

Reference