Older people often need a different kind of hospital

Professor Jane Cummings in yesterday's Daily Telegraph (*To give high quality care, the NHS must change,* 27.12.16) argues that much hospital care, of the elderly in particular, would be better and more economically served by home care services 'than in old and expensive buildings'.

After many years working as a GP I broadly agree, but with some caveats. Certainly, hospitals are inappropriately expensive for older people because they are best for high tech, high intensity approaches. These are often unnecessary for the elderly frail who instead need respite, good nursing and quotidian medical care: a large proportion of hospital admissions are for 'acopia' due, for example, to falls, worsening infections or heart failure. These patients generally do not need expensive panoplies of investigations, scanning or intensive care. Our consequent and growing overinvestigation and overtreatment probably costs much more than the harbouring buildings indicted by Professor Cummings.

Her recommendation is necessary but, alas, insufficient. Unfortunately home care often becomes unworkable: for example, when relatives or other agencies cannot provide sufficient support; the patient has then to be admitted. So I suggest, in addition, a third option: smaller, local, low-tech hospitals redolent of now extinct Cottage Hospitals. These would provide support, containment and care with a humanity, economy and locality that have become largely lost in our enormous District General Hospitals.

In 1973 EM Schumacher predicted the economic and human unsustainability of such 'Gigantism' in his book *Small is Beautiful*. It surely merits revisiting now.

Dr David Zigmond