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All material submitted for publication is assumed to be submitted exclusively to the BMJ unless the contrary is stated. All authors must give signed consent to publication. Papers will normally be referred and may be statistically assessed before acceptance. Priority and time of publication are decided by the Editor, who retains the customary right to style and if necessary shorten material accepted for publication.

Manuscripts will be acknowledged only if the author encloses a stamped addressed postcard or international reply coupon.

Original articles are usually up to 2000 words long, with no more than six tables or illustrations; they should normally report original research of relevance to clinical medicine and may appear either as Clinical Research papers or in the Papers and Short Reports section. Short Reports are up to 600 words long, with one table or illustration and no more than five references; clinical case histories and brief or negative research findings may appear in this section. Papers for the Practice Observed section should cover research or any other matters relevant to primary care. Medical Practice articles are mostly written by invitation, but we welcome reports of 2000 words about the organisation or assessment of medical work and about sociological aspects of medicine. Talking Point articles are concerned with the organisation, financing, and manpower of health services. Contributions for the Personal View and Materia Non Medica columns are always welcome and should contain up to 1150 and 400 words respectively. Letters should normally be of not more than 400 words, have no more than 10 references, and be signed by all authors.

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<sup>1</sup> Soter NA, Wasserman SI, Austen KF. Cold urticaria: release into the circulation of histamine and eosinophil chemotactic factor of anaphylaxis during cold challenge. N Engl J Med 1976;294:687-90.

<sup>2</sup> Osler AG. Complement: mechanisms and functions. Englewood Cliffs: Prentice-Hall, 1976.

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