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## New Zealand participants in atmospheric nuclear weapons tests in the Pacific

The number of deaths and incidence of cancer in 528 Royal New Zealand Navy personnel who participated in the British atmospheric nuclear weapons tests in the Pacific during 1957 are presented on p 1161. A control group comprised 1504 men who were in the Royal New Zealand Navy during 1957-8 but did not take part in the tests. The death rate in the two groups was very similar 13% of participants and 12% of controls had died during 1957-87, and death rates for most specific causes of death, including most types of cancer, were also very similar. However, seven test participants died of haematological cancers (relative risk 3.3), including four leukaemias (relative risk 5.6). Some leukaemias, and possibly some other haematological cancers, may have resulted from participation in the nuclear weapons test programme. These findings are similar to those among British participants in the same nuclear weapons testing programme.

## Effects of human parvovirus (B19) infection in pregnancy

Parvovirus infection causes a trivial illness in children—fifth disease—but if a pregnant woman is infected the result may be death of the fetus and miscarriage. Moreover, evidence that the virus crosses the placenta

has led to concern that it might be teratogenic. On p 1166 a report from the Public Health Laboratory Service Working Party on fifth disease gives a reassuring verdict: women who have parvovirus infection in pregnancy do not usually miscarry and need not contemplate termination of the pregnancy.

## Is travelling to have operations acceptable to patients?

Much has been assumed about patients' attitudes to travelling away from home for treatment when local waiting list times are unacceptably long, but there has been little researched material. On p 1171 Howell *et al* report the results of a questionnaire survey of 116 patients who had travelled 120 miles (190 km) from Crewe for routine elective surgery at a military hospital in Wiltshire. Their findings suggest that some patients favour such schemes. Just over half of their selected group of 113 patients stated that they would prefer to travel for their routine operation rather than wait more than three months for local treatment. Two thirds of patients said that they would travel as far as 300 miles (480 km) and over three quarters that they would tolerate seven days in hospital without visitors. Nevertheless, when patients were offered the scheme in Crewe as many declined as agreed to travel; moreover, a similar number of NHS patients in Wiltshire had to be deferred to accommodate those who were bussed in. The scheme was without serious difficulties, but the overall benefit to patient management is questionable.

### INSTRUCTIONS TO AUTHORS

*The BMJ has agreed to accept manuscripts prepared in accordance with the Vancouver style (BMJ, 6 February 1988, p 401) and will consider any paper that conforms to the style. More detailed and specific instructions are given below.*

The following include the minimum requirements for manuscripts submitted for publication.

All material submitted for publication is assumed to be submitted exclusively to the *BMJ* unless the contrary is stated.

Manuscripts will be acknowledged; letters will not be unless a stamped addressed envelope is enclosed.

Papers will normally be refereed and may be statistically assessed before acceptance.

**Authors** should give their names and initials, their posts at the time they did the work, and one degree or diploma. All authors must sign their consent to publication.

**Three copies** should be submitted. If the manuscript is rejected these will be shredded.

**Typing** should be on one side of the paper, with double spacing between the lines and 5 cm margins at the top and left hand side of the sheet.

**Abbreviations** should not be used in the text.

**Drugs** should be given their approved names, not their proprietary names, and the source of any new or experimental preparations should be given.

**SI units** are used for scientific measurements, but blood pressure should continue to be expressed in mm Hg.

**Statistical procedures** should be described in the methods section or supported by references.

**Tables and illustrations** should be separate from the text of the paper. Tables should be simple and should not duplicate information in the text of the article.

**References** must be in the Vancouver style and their accuracy checked before submission. They should be numbered in the order in which they appear in the text.

**Letters to the editor** submitted for publication must be signed personally by all authors, who should include one degree or diploma.

**The editor** reserves the customary right to style and if necessary shorten material accepted for publication and to determine the priority and time of publication.

**Detailed instructions** are given in the *BMJ* dated 6 January 1990, p 38.