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We may return unduly long letters to the author for shortening so that we can offer readers as wide a selection as possible. We receive so many letters each week that we have to omit some of them. Letters must be signed personally by all their authors. We cannot acknowledge their receipt unless a stamped addressed envelope or an international reply coupon is enclosed.

Correspondents should present their references in the Vancouver style (see examples in these columns). In particular, the names and initials of all authors must be given unless there are more than six, when only the first three should be given, followed by et al; and the first and last page numbers of articles and chapters should be included. Titles of papers are not, however, included in the correspondence section.

Medical school intake and manpower implications

SIR,—It has been widely suggested that the Conference of Colleges and Faculties together with the universities, the BMA, and the Health Departments should set up a standing forum which would review statistics relating to medical staffing and career structure. This forum could provide the Government and other relevant bodies with continuing informed and up-to-date advice on medical manpower from student intake to retirement. We, as representatives of the collegiate members of the three Royal Colleges of Physicians, support this suggestion and consider that a solution to the problem is a matter of urgency and that, in the light of the information available, medical school intake should be held static until such time as the standing forum has been established.

The current output of graduates from

United Kingdom medical schools appears to exceed currently available career posts by 50%.¹ In the Irish Republic there is a similar situation with output greater than needs. In the short term it may be possible for some of these graduates to take up junior training grade posts at present occupied by overseas graduates, but it should be emphasised that under the existing organisation many of those in SHO and registrar posts have no hospital career prospects. Because of changing policy in the United States, Canada, and Australasia, British and Irish graduates have fewer opportunities to emigrate. On the available information further medical school expansion without a radical restructuring of hospital medical staffing in the UK Health Service will result in medical unemployment. We should like to stress that this is not a problem which might

arise in the future, but one which already exists.

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¹ Department of Health and Social Security. *Medical manpower—the next twenty years*. London. DHSS. 1978.

Medical charities and prevention

SIR,—I have been impressed but somewhat saddened by the defensive and even slightly petulant reactions of foundations to your