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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.

Refugee health programmes

SIR,—The recent paper by Professor Neil R M Buist (5 July, p 36) makes many valuable and stimulating points concerning the problems of management of refugee camps. In particular, he rightly comments that "each crisis seems to catch the world unawares." This is exactly our experience with regard to the availability of appropriately trained personnel.

In a recent paper¹ we have made the point that in the present-day turbulent world refugees already exist in large numbers in all parts of the world—12-20 million, depending on definition. It seems, unfortunately, very likely that the number will increase in the coming years. The need is (and will be) for appropriately trained volunteer health professionals from the USA, the UK, and other countries relatively well endowed with money and trained health personnel who can be readily available to work in such circumstances. At the moment, millions of dollars are spent

in humanitarian and charitable responses to an emergency refugee situation when it develops. Currently, only two courses related to problems of refugee health programmes ever appear to have been held—one at the School of Public Health, University of California, Los Angeles, and the other at the London School of Hygiene and Tropical Medicine.

It is completely ludicrous and unbelievable that no training centres are available to prepare skilled workers in this unfamiliar field and

also to offer brief orientation sessions for those willing and available to work as volunteers for shorter periods of time when acute refugee calamities occur, as occur they will.

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¹ Jelliffe DB, Jelliffe EFP. In: *The sciences*. New York: New York Academy of Sciences (in press).

Compulsory language tests

SIR,—I was appalled to read that "the Government is preparing to abandon compulsory language tests for Common Market doctors."

From many years' experience of teaching

English to overseas doctors I know that whereas many doctors from the Indian sub-continent and the Middle East have a good command of English and need help mainly with the colloquial language of the doctor-