## STA/STA

## BRITISH MEDICAL JOURNAL

SATURDAY 13 FEBRUARY 1982

LEADING ARTICLES	
Rapid onset cancer of the cervix JELIZABETH MACGREGOR 441 Career guidance by computer ALEX PATON	The perils of abstention? N KREITMAN
I MCA LEDINGHAM, B N COWAN, H J G BURNS	A P WATERSON
CLINICAL RESEARCH • PAPERS AND SH	HORT REPORTS • PRACTICE OBSERVED
Mortality among patients with ankylosing spondylitis after a single t	
P G SMITH, SIR RICHARD DOLL	
Psychological sequelae to elective sterilisation: a prospective study Psychiatric study of patients with severe burn injuries ALFRED C WI Healing of gastric ulcers after one, two, and three months of ranitic Spontaneous remission of secondary hyperparathyroidism in patient Endogenous opioid poisoning? IRIS E SYMONS, PIERS C EMSON, JOHN Serum sickness due to hair straightener K E KOTOWSKI	HITE
Influences on prescribing MICHAEL DRURY, KARL SABBAGH  Do appointment systems work? SARA ARBER, LUCIANNE SAWYER	
Great Chapel Street Medical Centre D J EL KABIR	
You're never here I'm never there GEMINI	
William Price of Llantrisant—1800-1893 JOHN CULE	
MEDICAL PRACTICE	
ABC of Alcohol: Help: referral D BISSELL, A PATON, BRUCE RITSON	sk? NICHOLAS BLACK
Any Questions?  Materia Non Medica—Contributions from S L HENDERSON SMITH, TES	490 FED 2 7 1002 493
Medicine and Books	498
Medicine and the Media—Contribution from JAMES OWEN DRIFE  Personal View KEVIN CULLEN	<b>DECOURTE</b> 197
CORRESPONDENCE—List of Contents	<b>OBITUARY</b>
NEWS AND NOTES	SUPPLEMENT
Views	The Week
Medicolegal—Hospital inquiries: evidence and privilege 519	The delight of Renée Short WILLIAM RUSSELL
Parliament	From the CCHMS: Chief Medical Officer speaks on
	manpower; Government's response to the Short Report 525
Medical News521UGC cuts: Select committee inquiryBMA Notices522General Medical Services Committee	

## CORRESPONDENCE

The starving of the medical schools Sir Douglas Ranger, FRCS; J A O Russell, MRCPSYCH	Importation of pathogenic Entamoeba histolytica P G Sargeaunt, AIMLS, and others 507	Gonadotrophin and the human secondary sex ratio W H James, PhD511
Cancer and patients with end-stage renal failure A J Wing, FRCP, and others	Gastrointestinal haemorrhage and benoxaprofen  J P Halsey, MRCP, and N Cardoe, FRCP 508	Reduction of free testosterone by antiepileptic drugs I Martin-Scott, MD
P O Behan, FRCP, and Wilhelmina M H Behan, MRCPATH; H J W Pelly, MB; J F Ackroyd, FRCP; A N Gale, MRCP 504  Reversible causes of altered consciousness	Will breast self-examination save lives? W G Harris, FRCS, and others	Squash ball to eye ball E D Kerr, MB
after spontaneous subarachnoid haemorrhage M G Bamber, MRCP	D P Manning, MD, and others 508  Medical stereotypes G T Watts, FRCS 509	M H Pappworth, MD; D Wray, MB, FDSRCS 513  Masturbation and fornication  R E Goodman, MRCS
Paracetamol-induced acute renal failure in the absence of fulminant liver damage J R T Gabriel, FRCP	Outlook for hip replacement P A Ring, FRCS; A S Baker, FRCS, and G J Benke, FRCS	Simple technique for measuring serum or plasma viscosity with disposable apparatus  R C F Leonard, MD
Parkinson's disease and Alzheimer's disease as disorders of the isodendritic core A B Joseph, MB	Clonazepam: effective treatment for restless legs syndrome in uraemia W M Braude, MRCPSYCH, and T R E Barnes, MRCPSYCH; T G Feest, MD, and	J N de Klerk, FRCSED
Nifedipine and beta-blockade as a cause of cardiac failure C J Anastassiades, MD	D J Read, MRCP	C F Scurr, FFARCS
J M G Williams, DPHIL	R Pérez-Soler, MD, and others; [A doctor member of Alcoholics Anonymous] 510  Assessment of iron stores in inflammation by assay of serum ferritin	F W Wright, FRCR; R M Timson, BPHARM 515  Doctors' pay  R E Dreaper, MB
F Clara, MD; P C Hayes, MB, and others 506  Severe metabolic alkalosis  M Fulop, MD	concentrations K Beldjord, and others 511	Thank you  M O'Donnell, MB
A w Fowler, Pres	race, ras	ductus diteriosus (Darre,

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.

## The starving of the medical schools

SIR,—Your assistant editor, Dr Richard Smith, is to be commended on drawing particular attention to the damage which is being done to medical education and research, and also to the provision of patient services in the NHS, by the cuts in public spending on university education (30 January, p 335). As he so ably indicates, the reductions which have already taken place are only the start of what is planned as a continuing cut.

In commenting on the progressive impoverishment of the British university system (p 294) you state that one of the most distressing features of the current crisis is that medical schools do not have a single forum in which to discuss the options available or a single voice with which to confront the University Grants Committee and the Government. May I draw your attention to the University Hospitals Association, which was formed in 1975 to remedy this very defect? The inspira-

tion came from Dr Kenneth MacLean, who saw the need for such a body which would combine in a single organisation not only university but also NHS interests and expertise. The membership is a corporate one and includes not only university faculties of medicine and medical and dental schools but also hospital medical and dental committees in those health districts which are associated with medical schools. Deans of general medical and dental schools and of postgraduate schools, postgraduate deans, and chairmen of medical committees of the associated health districts meet regularly to discuss the broad issues concerned with medical education and research and the mutual interdependence of the NHS and the universities. For while the Health Service requires the universities to provide graduates in medicine and dentistry the universities in their turn need the clinical facilities for teaching and research which only the NHS

can provide, and this is recognised by the specific duty laid on the Secretary of State for Social Services to make available such facilities as he considers are reasonably required by any university which has a medical school.

Over the years a reasonable working arrangement has developed between the universities and the health services in which precise boundaries have not been clearly defined, a "knock-for-knock" arrangement, and this has been of great mutual advantage. Arrangements which have been built up gradually and which are working well in the interests of medicine and dentistry in their broadest aspects are now in serious danger of being destroyed.

Nearly three years ago, in conjunction with the Medical Academic Staff Committee of the British Medical Association and the Federation of Associations of Clinical Professors, the University Hospitals Association organised a