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- No letter should be more than 400 words.
- For letters on scientific subjects we normally reserve our correspondence columns for those relating to issues discussed recently (within six weeks) in the *BMJ*.
- We do not routinely acknowledge letters. Please send a stamped addressed envelope if you would like an acknowledgment.
- Because we receive many more letters than we can publish we may shorten those we do print, particularly when we receive several on the same subject.

Efficiency savings or financial cuts

SIR,—The increasing ineffectiveness, uncertainty, and strife resulting from the financial cuts forced on medical services in Birmingham, which Professor Michael Langman describes so clearly (10 October p 902), stem partly from a lack of capital expenditure over the years. This has made Birmingham expensive to run.

The city has more specialist hospitals than other provincial cities, a legacy of the days when Birmingham spawned great pioneering institutions. These outdated hospitals, including the Accident Hospital (the first in the world), a neurosurgical hospital, several maternity hospitals (one of which pioneered the world's first neonatal unit), and several surgical subspecialty hospitals, would have been moved to general hospital sites by our administrators many years ago, but they never

possessed the capital to make this possible. While much good work still goes on, these specialist units are afflicted by planning blight and professional isolation: the duplication of investigational, portering, catering, and other facilities make them very expensive to run. No successful private enterprise would survive with the small capital reinvestment which the Treasury allows our health service.

Privatisation alone is not going to be able to produce a revival. The plant needs judicious pruning certainly; but it also needs repotting and a liberal amount of water and fertiliser.

T S LOW-BEER

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The patient mentioned by Mr Anderson who was bleeding postoperatively was supplied with 18 units of blood and died because he had an untreatable carcinoma. Blood was at no time taken by Mr Anderson from one patient to give to another—double crossmatching is a standard procedure when there is an acute shortage of blood—and the third patient had stabilised by then. In spite of severe difficulties we supplied all the blood that was clinically indicated in the circumstances.

It is a pity that the national press picked up the one letter from several published that had an adverse effect on public opinion.

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The blood transfusion service and the National Health Service

SIR,—As a result of Mr P Anderson's letter (3 October, p 850) and the subsequent statements made by the regional blood transfusion director on television the staff in the blood transfusion department at Frimley Park Hospital have had to endure unfair criticism and this health district has been nationally misrepresented.

To correct a few details in Mr Anderson's letter and put matters into perspective, we faced one of our worst problems with blood supplies on the day in question and six patients requiring blood of the

same group were admitted as emergencies. The regional blood transfusion director skilfully skirted around the problem by saying that adequate supplies of blood are distributed around the South West Thames region and implying that we should have been able to manage our blood stocks to avoid the acute problems that we faced. In fact, there was a severe shortage of O positive blood at the regional transfusion centre when the problems arose, and in the period before this we had received roughly 40% of the blood that we had requested.

SIR,—Dr John Cash's leading article (12 September, p 617) produced several responses which require further comment. Among them was a letter from Mr P Anderson (3 October, p 850) about blood shortages, which is responded to in the letter above from Drs Van de Pette and Shirley.

Regrettably, hospitals in the South West Thames region have suffered a long period of blood shortage. Shortages were particularly acute in early September. Firstly, I am sorry if I gave the impression that I was apportioning blame for Frimley's problems. My appearance on *London Plus* was stimulated as much by Professor Cash's leading article as by Mr Anderson's statements,