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# **EDITOR'S CHOICE**



Two themes dominate this week's issue: junior doctors' hours and mammographic screening for breast cancer. Plainly there are no final answers to these difficult questions, but it is difficult to see how a society where increased leisure is becoming the norm can continue to tolerate a state of affairs better suited to Engels's description of the abuses of the industrial revolution than a liberal profession (p 993). With such a long history of argument (p 937) data are needed for change, and the rules for pilots and truck drivers (p 938), the effect of sleeplessness on performance (p 931), and the legal pitfalls may all thrust our authorities into sanity (p 938). If we are going to cover

this load by spending more money on more junior doctors then we have to look for savings elsewhere. Is mammographic screening one candidate? Two opposing views (p 969 and p 971) show that the debate is far from over (see also the editorial; p 932), and the difficulties are well illustrated by the results of the Malmö study: screening may reduce mortality in women over 55, but the overall results do not prove the need for introducing screening in an urban population (p 943). More research, as they say, is needed, but in the meantime one way of saving money might be to cut down on the number of times the *Drug Tariff* is published every year (p 981).