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## Editorials

- 693 **Transplantation for alcoholic liver disease**  
James M Neuberger
- 694 **Functional endoscopic surgery to the sinuses**  
Charles A East
- 694 **Adult consequences of early parental loss**  
David Quinton
- 695 **Regular Review: Difficult asthma**  
Peter J Barnes, F Fan Chung

## News

- 699-702 **A nightmare realised · Bloodborne infection in the workplace · Prenatal diagnosis and genetic screening · Continuing American surveillance of AIDS · Haemophiliacs sue British government · Creating medicine at Cambridge · Warring Australian medical researchers · Non-smoking West Australians · The baffling Japanese**

## Papers

- 703 **Development of hypertension and uraemia after pyelonephritis in childhood: 27 year follow up**  
Stefan H Jacobson, Ole Eklöf, Claes Göran Eriksson, Lars-Eric Lins, Bo Tidgren, Jan Winberg
- 706 **Collected and neglected: Are Oxford hostels for the homeless filling up with disabled psychiatric patients?**  
Max Marshall
- 709 **Use of medical record linkage to study readmission rates**  
J Henderson, M J Goldacre, M J Graveney, H M Simmons
- 713 **Psychological and social problems in HIV infection: interviews with general practitioners in London**  
Michael B King
- 718 **Rape and subsequent seroconversion to HIV**  
S Murphy, V Kitchen, J R W Harris, S M Forster
- 718 **Osteoporosis and immunosuppression in multiple myeloma**  
A L Dolan, T K Wheeler, D H Jones, A J Crisp
- 719 **Cost analysis of prophylaxis with antibiotics to prevent infected knee arthroplasty**  
Sten Bengtson, Lars Borgquist, Lars Lidgren
- 720 **Slipped upper femoral epiphysis in an amenorrhoeic athlete**  
R L Wolman, M G Harries, I Fyfe
- 721 **Awareness of AIDS in India: effect of public education through the mass media**  
K S Jacob, Harriot Jayakumari, Jacob K John, T Jacob John

## Practice Observed

- 722 **Referrals from general practice to hospital outpatient departments: a strategy for improvement**  
John Emmanuel, Nigel Walter

## Middles

- 725 **Use of hospital services by homeless families in an inner London health district**  
Christina R Victor, James Connelly, Paul Roderick, Colin Cohen
- 727 **To flourish or fade: the NHS in Dumfries and Galloway**  
Richard Smith
- 731 **ABC of Child Abuse: Abuse: the experience**  
Sylvia Fraser

- 733-750 **Obituary · Correspondence · Notes · Medicine and the Media · Opinion · Personal View · Medicine and Books · Minerva · (in detail overleaf)**

# CONTENTS pages 730-750

730 **Fillers** Materia Paramedica Bernard J Freedman

733 **Obituary**

P T Northover, M Maureen Roberts, C R Salkeld, R R Wilson, K A Grassick, J H Thompson, C R McClure, Mary Owen-Flood

735 **Correspondence**

- |  |  |
|--|--|
| 735 Needlestick injuries in syringe exchange projects<br>J Strang, FRCPSYCH  | 740 Treatment of benign prostatic hyperplasia<br>K McPherson; G D Chisholm, FRCS   |
| 735 BMA against again<br>N Higson; G F Williams, FRCOG; G Hartley, FRCR  | 740 Follicular stimulation and ovarian cancer<br>R Kulkarni, MRCOG, and J M McGarry, FRCOG                               |
| 736 Angiotensin converting enzyme inhibitors and renal artery occlusion<br>G Stansby, FRCS, and others                           | 740 Treatment of shingles and post-herpetic neuralgia<br>R J Crooks, PHD, and others; T Battcock, MRCP, and R Finn, FRCP |
| 736 Screening for antibodies to anaesthetics<br>M Sinclair, FFARCS   | 741 The role of health economics<br>Miranda Mugford, BA  |
| 736 Bone mineral response to brief exercise test<br>J C Stevenson, MRCP, and Belinda Lees, BSC;<br>M C Beverly, FRCS, and others | 741 Twenty four hour care in inner cities<br>J N Hardy, MB, and R M Patel, MB  |
| 737 Cricoid pressure during cardiopulmonary resuscitation<br>N W Penfold, FCANAE, and M B Smith, FCANAE                          | 741 Early thrombolytic treatment<br>R Lim, MRCP; G H Hall, FRCP  |
| 737 Advanced life support<br>I W B Grant, FRCPED; D A Chamberlain, FRCP  | 742 Child sexual abuse<br>Felicia Eke, MD  |
| 737 Ethics of clinical research<br>L A Price, MD; M Baum, FRCS, and others   | 742 Marker for alcohol abuse<br>L N Sandle, MRCPATH  |
| 738 Ignorance about listeria<br>B Facinelli, PHD, and others   | 742 Passive smoking and cardiorespiratory health in Scotland<br>P N Lee, MA  |
| 738 Don't put your daughter into medicine<br>Morag Chisholm, FRCPATH   | 742 Donating drugs to the Third World<br>Patricia M Keefe, MB  |
| 739 Managing acute limb ischaemia<br>Averil O Mansfield, FRCS; M Dennis, MD  | 743 Junior doctors' rotas<br>G McDonald, MB  |
| 739 Parents' beliefs about vaccination<br>C V Reddy, MB  | 743 Why a two tier fee for night visits is right<br>A Walters, MB  |
| 739 Treating gastric cancer<br>S M Griffin, FRCS, and others   | 743 Consultants' contracts<br>T Coley  |
|  | 743 Women in medicine and crèches<br>Janette Clarke, MRCP  |

744 **Notes**

745 **Medicine and the Media** Poster mortem Tony Delamothe

746 **Opinion** Doctors, lawyers, and experts J O Drife

747 **Personal View** Will power—but not that sort David Dunhill

748 **Medicine and Books**

- 748 Jonathan S Carey: *Walking Tall: an Autobiography* (S Weston)  
748 D J Jeffries: *Pathology and Pathophysiology of AIDS and HIV-Related Diseases* (Ed S J Harawi, C J O'Hara)  
749 Emanuel Rosen: *Ophthalmic Surgical Procedures* (P S Hersh)  
749 Noted  
749 Selection

750 **Minerva**

## EDITOR'S CHOICE

# BMJ

Two perennial themes surface again in today's issue: AIDS and NHS reform. As well as the News items on injury compensation and claims from haemophiliacs (p 699), and the reassuring paper that London general practitioners are quickly becoming involved in the care of patients with HIV infection (p 713), Dr John Strang argues the need for action in a grey area. People who may not be eligible for NHS compensation for occupationally acquired infection, as in needle exchange schemes, should be granted this as a matter of right (p 735).

Next there is the strange case of the newspapers who in the space of a week all came out with editorials attacking the BMA and by inference praising the

white paper—despite the fact that nothing has changed and some of their own correspondents provided facts that do not support the views (p 745). The idea that the BMA is anti-everything is refuted by the secretary (p 736) answering some letters regretting the current campaign (p 735): months ago the association proposed extending properly organised medical audit as well as the resource management initiatives. But that thoughtful people are worried about the review is borne out by Richard Smith's survey of Dumfries and Galloway (p 727); much of the resentment comes from a feeling that politicians far away are making decisions without understanding what goes on.