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INTERNATIONAL

<b>Editorials</b>	929	<b>The heart of the white paper controversy</b> Tony Smith
	930	<b>Ethnic population and general practitioner's workload</b> Tim Carney
	931	<b>Control of Substances Hazardous to Health</b> Tar-Ching Aw
	932	<b>The NHS boot</b> R G S Platts
	933	<b>Cardiotocographs at a distance</b> Philip J Steer, Michael C Carter
	934	<b>Sex and the elderly</b> John M Kellett

<b>News</b>	935-938	<b>Drug industry and 1992 · Smoking in Europe · Labour's attack · Regulating the health market · Drug budgets, competitive tendering, and RMI</b>
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Papers	939	<b>Smoking and occupational allergy in workers in a platinum refinery</b> Katherine M Venables, Michael B Dally, Andrew J Nunn, Jane F Stevens, Richard Stephens, Neil Farrer, Jill V Hunter, Morag Stewart, E Glyn Hughes, Anthony J Newman Taylor
	942	<b>Acute and chronic arterial and venous effects of captopril in congestive cardiac failure</b> S Capewell, D Taverner, W J Hannan, A L Muir
	946	<b>Breast feeding and lower respiratory tract illness in the first year of life</b> Anne L Wright, Catharine J Holberg, Fernando D Martinez, Wayne J Morgan, Lynn M Taussig, Group Health Medical Associates
	950	<b>Are surgical shoes providing value for money?</b> Patricia S Costigan, Gavin Miller, Catherine Elliott, W Angus Wallace
	950	<b>Cold injury from liquid propane</b> N K James, A L H Moss
	951	<b>Liquid crystal thermography and C reactive protein in the detection of deep venous thrombosis</b> E A Thomas, M J D Cobby, E Rhys Davies, W D Jeans, J T Whicher
	952	<b>Completeness of registration of childhood leukaemia near nuclear installations and elsewhere in the Oxford region</b> G J Draper, B D Bower, S C Darby, Sir Richard Doll

<b>Practice Observed</b>	953	<b>Ethnic differences in consultation rates in urban general practice</b> S J Gillam, B Jarman, P White, R Law
	958	<b>Ethnic differences in general practitioner consultations</b> R Balarajan, P Yuen, V Soni Raleigh

<b>Middles</b>	961	<b>"Operation Cataract": a means of reducing waiting lists for cataract operations</b> Hugh F Thomas, Robin H J Darvell, Claire Hicks
	963	<b>How to look after a visiting speaker</b> Patrick Hoyte
	965	<b>Blotting techniques for the study of DNA, RNA, and proteins</b> Peter C Hayes, C Roland Wolf, John D Hayes
	969	<b>American trypanosomiasis</b> Philip D Marsden

971-990	<b>Obituary · Correspondence · BMA Affairs · Personal View · Medicine and the Media · Medicine and Books · Minerva · (in detail overleaf)</b>
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## 964 Fillers

- 964 Any Questions T E T West; Ian Johnson  
970 Multicultural Medicine Bashir Qureshi

## 971 Obituary

- J D Robertson, G G Macdonald, A I L Maitland, C L Greenbury, A D Glasgow, M C Duggan, B Raeburn, J D P Graham, K I Macrosson, J W Taylor, W Doran

## 974 Correspondence

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|---|--|
| <p>974 Application of airline pilots' hours to junior doctors<br/>D R McCoy, FRCOG; B Kennedy, MB; C P Hudson, MB; J A T Duncan, FCANAE</p> <p>975 Ear, nose, and throat symptoms in subacute Wegener's granulomatosis<br/>W D Jeans, FRCR; G R V Hughes, FRCP, and others</p> <p>975 Lyme disease facial palsy<br/>M G Watson, FRCS, and G E Murty, FRCS; D P Markby, MRCP</p> <p>975 Radiology about to go digital<br/>J O M C Craig, FRCR, and J H Highman, FRCR</p> <p>976 Desktop laboratory technology in general practice<br/>P O Collinson, MB, and others</p> <p>976 Surgical footwear<br/>S Soorikumar, FRCS</p> <p>976 Epilepsy in women of childbearing age<br/>H V Firth, MRCP, and R H Lindenbaum, FRCP; P C Rubin, MRCP; M Saunders, FRCP</p> <p>977 My father's death<br/>M D Vickers, FCANAE</p> <p>977 Cholesterol testing<br/>R Mulcahy, FRCP</p> <p>977 Cholesterol screening programmes<br/>A L Macnair, DOBSTRCOG; R A Fisk, MRCP; Kay-Tee Khaw, MRCP, and G Rose, DM</p> | <p>978 Mumps, measles, and rubella vaccination and encephalitis<br/>N T Begg, MFCM, and N D Noah, FRCP; Suzanne Crowley, MRCP, and others</p> <p>978 Epidural anaesthesia in obstetrics<br/>B A Reay, MB</p> <p>979 Provision of hearing aids<br/>P Prinsley, FRCS, and others</p> <p>979 Vision screening<br/>C Essex, DCCH</p> <p>979 Effect of hysterectomy on bowel function<br/>B T Parys, FRCS</p> <p>979 Prolonged vitamin D deficiency and autonomous hyperparathyroidism<br/>A H Sultan, MRCP, and others</p> <p>979 Treatment of benign prostatic hyperplasia<br/>M Baum, FRCS</p> <p>980 Sponsored training for overseas doctors<br/>R Araya, MRCPsych, and A Pelosi, MRCPsych</p> <p>980 Improving clinical effectiveness in the NHS<br/>D Mellor, MP</p> <p>980 <b>Drug points</b> Methotrexate induced skin necrosis: a drug interaction with amiodarone? (N J Reynolds and others);</p> <p>981 Captopril and lymphocytic alveolitis (J C Kidney and others); Neutropenia and metolazone (K L Donovan)</p> |
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## 982 BMA Affairs

- 982 Mr Clarke asked to confirm statement on drug budgets  
984 No case yet for extending RMI  
985 Evaluation of six RMI sites  
986 Juniors want white paper bill to include cut in hours

## 987 Personal View Is a job application a jumble or a jungle? Susannah Slaiman

## 987 Medicine and the Media

- 987 How to care for people with HIV and AIDS A McMillan

## 988 Medicine and Books

- 988 Angela Douglas: *Oxford General Practice Series. No 15. "Psychological Problems in General Practice"* (A C Markus, C M Parkes, P Tomson, M Johnston)  
988 J L Maddocks: *Neurotransmitters, Drugs and Disease* (Ed R A Webster, C C Jordan)  
989 C J Rolles: *Clinical Nutrition in Paediatric Disorders* (D Bentley, M Lawson)  
989 Noted

## 990 Minerva

## EDITOR'S CHOICE

# BMJ

NHS surgical footwear is now costing the country over £15m a year, and yet there is widespread dissatisfaction (p 932). Boots and shoes are both ugly and uncomfortable, and a Nottingham study shows that a fifth were abandoned after three years (p 950). One tactical answer is to find out particularly what patients complain about—and clearly difficulties in putting on shoes are not anticipated enough and Velcro fasteners would help a lot. One long term tactical answer, however, is to recognise foot disorders and their management as an entity in its own right, and establish specialist foot clinics (p 976).

Another topic for widespread dissatisfaction is the long hours worked by junior doctors. The recent paper showing that 26 doctors would be needed to cover the

work done by six junior anaesthetists if the guidelines for airline pilots were applied has evoked a couple of letters emphasising the important role of fatigue, with one sensible sounding plan for ensuring that most juniors get a full night's sleep (p 974-5). But was the comparison valid? Two other correspondents, one whose wife is a pilot, the other a pilot himself, doubt it. We shall see, but in the mean time can we think about extending such services to emergency ambulances (p 977) and the universal availability of epidurals (p 978)? The answer is probably "no," but it would be a pity not to carry on the particularly British tradition of vision and persistence in extending the applications of anaesthesia, as shown in the career of the late Professor James Robertson (p 970).