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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).