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EDITOR'S CHOICE



The way in which medical happenings in one part of the world increasingly quickly affect thinking elsewhere is well illustrated in this week's issue. The experiment to try and explicitly ration medical care in Oregon is dissected by Professor Rudolf Klein (p 1), and he draws out one central lesson: you can't ration care simply with managerial or technical gimcrackery—you must talk to the public. And talking to the public is complicated, as Michael O'Donnell illustrates in his review of a recent television programme on whether the antidepressant fluoxetine (Prozac) causes suicide (p 56). The United States has been gripped by this debate, which has had less coverage in Britain, and Dr O'Donnell argues that the manufacturers, Eli Lilly, and the Committee on Safety of Medicines made a

mistake by not appearing on the programme to present their good case that there is no strong evidence that the drug causes suicide. Another manufacturer, Shiley, has meanwhile declared its intention to defend vigorously actions in the United States courts by non-Americans with functioning Bjork-Shiley valves to claim compensation for the fear that they might fracture (p 12).

Finally, we begin the year sadly by having to say goodbye to Dr John Dawson, one of the best known doctors in the BMA, who died just before Christmas (p 45). John's entrepreneurial energy made him well known all over the world and made the BMA widely respected for its reports on issues like boxing, pesticides, and nuclear war.