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### **EDITOR'S CHOICE**



The Gulf is sadly still dominating, and we have two related editorials. One advises on treating patients injured by chemical weapons (p 129), and the other looks at how the NHS is preparing for war (p 130). The main burden on the health service if war comes will not be heroic lifesaving surgery but prolonged reconstructive surgery and intensive and psychiatric care. On p 182 Dr P B S Fowler suggests that volunteer retired doctors might be sent to the Gulf: he observes coolly that losing a grandparent is not nearly as bad as losing a parent.

Although pushed from the front pages of the newspapers by drama in the Gulf and the Baltic states, the NHS reforms grind on. The council of the BMA has passed a motion calling for the leaders of the association to visit William Waldegrave and tell him how much the NHS is suffering (p 134). Behind the scenes the BMA is looking hard at how it can arrange to negotiate for doctors in the 56 trusts announced and the many more that are likely to follow (p 136). The prospect of differential salaries by region and specialty looms larger and larger.