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## EDITOR'S CHOICE

# BMJ

It's humbling to realise that Britain still hasn't taken on board the message it has so enthusiastically promoted to the developing world—that children's diarrhoea responds to oral rehydration therapy. According to a study from Newcastle (which is unlikely to be atypical), most pharmacists and many mothers did not know how to manage the problem (p 440). On the other hand, a message that does seem to have got across in Newcastle and the rest of the Northern region is the cost of domiciliary visits. By providing doctors with information on the numbers and costs of these visits the region has halved the total since 1984-5 (p 449). As the authors and our editorial writer (p 426) conclude,

the role of domiciliary visits needs to be more clearly defined. Another slant on the health inequalities debate comes from the paper by Jean Marie Robine and Karen Ritchie: among Western men the difference in life expectancy between the wealthiest and poorest income quintiles is 6.3 years. For disability free life expectancy the difference is 14.3 years (p 457). The debate about surgeons and HIV testing continues in the correspondence columns, with a layman arguing fiercely against compulsory testing—not a view supported by many students at the Royal Free (p 468). And finally, for all those who waited for the warmer temperatures to melt the snow from their pavements, we provide a justification, of sorts (p 469).