



BRITISH MEDICAL JOURNAL NO 6780 VOLUME 302

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Salt is back as a risk factor for hypertension. It has tended to fall out of favour because of the difficulty of reconciling data derived from among and within communities, but in three consecutive papers M R Law and others do just that (pp 811, 815, and 819). They estimate that reducing daily sodium intake by 50 mmol (3 g of salt) across Western populations would reduce stroke by 22% and ischaemic heart disease by 16%. That is a greater effect than could be achieved by using drugs to treat hypertension. These papers have been produced by combining data from dozens of research projects, but in Britain scientific research is at breaking point because of prolonged underfunding, said a House of Lords committee last week (p 809). In contrast to the British government the Australian

government has got the message that funding research is vital for the country's future, and the article on p 840 looks at how scientists produced this change. Not only research but also education is struggling in Britain, but not all of the problems are financial. T W Hennigan and others show how few medical students are formally taught rectal examination, explaining a lack of confidence in performing this important examination (p 829). Another missed opportunity is the widespread failure to provide teaching during preregistration surgical house jobs (p 830). But there are some innovations in medical education: Jennie Buckman on p 854 describes how drama students have been acting the role of infertile couples to help medical students practise difficult consultations.