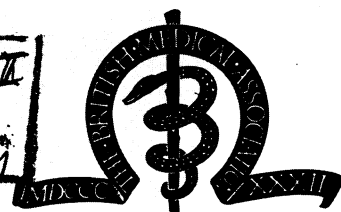
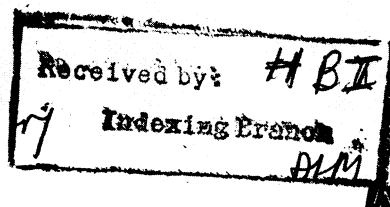


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## EDITOR'S CHOICE

# BMJ

The debate over whether hypotension is a disease is proving fascinating (p 64). The British have been rather scornful of German doctors treating a condition that they, the British, don't believe exists. Then a paper from Britain suggested that hypotension was indeed associated with tiredness and feeling faint. Today we publish further evidence linking low blood pressure with tiredness, dizziness, and anxiety and depression (p 75). We are still some way from British patients being treated for hypotension, but maybe the day will come. The importance of hypotension may be disputed within Europe, but surely no European doctor would dissent from the view that smoking is one of the major killers. It is thus sad that across Europe women are threatening to overtake men in the amount they smoke. A survey of European women's magazines shows that many have far more material promoting

smoking than explaining the harmful effects (p 99). The authors believe that a Europe wide ban on tobacco promotion is needed. Further east in Europe the republics of the former Soviet Union are facing economic catastrophe, and maintaining the quality of health care is tremendously difficult. One news item (p 71) describes how aid is being organised, while another looks at AIDS and hepatitis B in the republics (p 71). Then on p 101 Michael Ryan describes the radical reforms in the financing and organisation of health care that are happening in Russia; they have similarities to what is happening in Britain. Finally, if doctors want to maintain influence within a rapidly changing Europe they need to find a better way of making their voices heard. At the moment—as Tessa Richards shows (p 103)—there are lots of committees but most are ineffective.