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Minerva

EDITOR'S CHOICE



One of the worst features of life in Britain in recent years has been the increase in the poor and the widening gap between rich and poor. Some argue that overall we are getting richer and that the widening gap between rich and poor is an inevitable side effect of freeing up the economy to allow increased growth. That may be, but anybody committed to that line should consider closely the paper of R G Wilkinson (p 165): he shows that in developed countries income distribution is a much stronger determinant of life expectancy than average income. Redistribution of wealth might improve the health of the poor without adversely affecting the health of the rich. These findings have profound political implications and might well be taken up by doctors concerned to improve the health of all the people. But Derek Summerfield in his personal view says that doctors have been closer to those with wealth, privilege, and power than to the poor (p 190). He argues that doctors should "seek to systematically publicise the reality of the lives of the poor, abused, or voiceless whom they see in their clinics and surgeries worldwide." Rich or poor, we all need water, and Alison Walker looks at doubts over the quality of drinking water (p 175). Sales of bottled water increased 40-fold in Britain between 1976 and 1986, and a survey in 1988 showed that a quarter of the population never drank tap water. Yet 99% of the 3.3 million tests carried out on tap water in 1990 met stringent standards, and a litre of bottled water costs 50p or more while a litre of tap water is 0.03p.