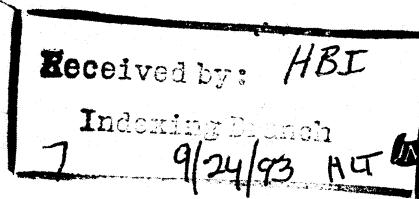


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Editor's Choice

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The ills of the holiday season

Maybe it's the holiday season—or maybe it's the internal market—but a couple of letters in this week's journal suggest a slight irritation with people who become ill or injured away from home. Surgeons at the Royal United Hospital Trust in Bath, for example, calculated that caring for people attending the Glastonbury festival cost about £114 000, about £50 000 of it not recoverable from purchasing authorities (p 561). They suggest that the organisers of big events, such as festivals, should include the cost of "medical insurance" in their ticket prices. A more practical suggestion, and one with encouraging precedents, comes from Barry Ferris in Barnet, who suggests that when patients "are roaming round the country injuring themselves" they should take their x ray films back home with them (to avoid repeat x ray examinations) (p 561).

Still on the theme of holidays, this week's Lesson of the Week warns that a history of foreign travel might be useful when what appear to be viral warts on the vulva turn out to be lesions of schistosomiasis (p 556). People who spend a long time in the tropics often worry about catching tropical diseases, but Bernadette

Carroll and her colleagues show that the risk is not very high (p 541). In a study of over 1000 asymptomatic people just returned from working in the tropics they found that one in four had abnormal results on investigations, many of them not related to their stay in the tropics. They conclude that screening of such returned travellers can be done with a structured history and relevant laboratory tests; specialist assessment adds little.

This week's first letter, from New Zealand, will no doubt strike a chord with the surgeons from Bath and many other British doctors struggling with inadequate funding in the NHS (p 559). In what the authors claim is a landmark judgment the Wellington Area Health Board Ethics Committee has recently ruled that when doctors are unable to give the optimum treatment because of resource constraints they should not try to conceal this from the patient. Patients should be told that doctors "would like to do more but within constraints it is not possible." The authors claim that the ruling also protects clinicians from gagging clauses under the guise of "corporate confidentiality." British ethics committees take note?