Minerva · (in detail overleaf)

CONTENTS pages 618-632

618 Obituary

W Davison, JJ Geller, E Stanford, C L Grant, S Smith, T E Burrows, M Brown, G P Oxborrow, R K Arora

620 Letters

- 620 Soft tissue injury of the cervical spine C S McKinstry; V M L Jolliffe
- 620 Fetal blood sampling in retreat H-A Doughty
- 620 Neuroleptics in learning disability
 J Yeo; D Branford and R A Collacott; D Kohen;
 R Curless and G Ford
- 621 Complaints procedures I G Schraibman; L A Ruben
- 622 Transmission of HIV in prison
 A Riley; J Dunn; J A N Emslie on behalf of
 D J Goldberg and others; A Taylor and others
- 623 Microalbuminuria in diabetes D O'Reilly and D T Lyon; J Yip and others
- 623 Pulmonary microembolism and temazepam A Hingorani and R W Ainsworth
- 624 Braer oil spill and peak flow AD Farmery

- 624 Complementary medicine I S Johnson; D St George; C Aus; J Howell
- 625 Management of patients in persistent vegetative state J G Howe; M F Helliwell
- 625 Toxic plants J Percival
- 625 Future of Royal Masonic Hospital E J Davies
- 626 Triazolam A Vela-Bueno; K Adam and I Oswald; A Kales and others
- 626 Cardiopulmonary resuscitation A A J Adgey; G Gambassi and P Carbonin; G Brattebø and T Wisborg
- 627 Infertility information pack for practitioners M Hull on behalf of J Drife and others
- 627 General Medical Council S Lock; T G Barrett
- 628 Thousands starving in Liberia H Veeken
- 628 The Calman report J M Fielden; A P J Ross

629 Soundings A different kind of meeting Bernard Dixon; Modern witch hunting Tony Smith

630 Personal view General practice: a job for life? Melanie Wynne-Jones; Categorica Philip Graves

631 Medicine and the Media The healing arts Alison Tonks

632 Medicine and Books

- 632 Hilary Stirland: Measuring Mental Health Needs (Ed Graham Thornicroft, Chris R Brewin, John Wing)
- 632 T H Turner: The Most Solitary of Afflictions: Madness and Society in Britain, 1700-1900 (Andrew Scull)
- 633 John S Callender: On Kissing, Tickling and Being Bored (Adam Phillips)

634 Minerva

Instructions to authors appeared in the issue of 2 January 1993, p 55

BMJ

Editor's Choice

© British Medical Journal 1993. All Rights Reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted in any form or by any other means, electronic, mechanical, photocopying, recording, or otherwise, without prior permission, in writing, of the British Medical Journal.

US second class postage paid at Rahway, NJ. Postmaster: send address changes to: BMJ, c/o Mercury Airfreight International Ltd Inc, 2323 Randolph Avenue, Avenel, NJ 07001, USA. US (direct) subscription \$250.00.

Published by the proprietors, the British Medical Association, Tavistock Square, London WC1H 9JR. Printed by BPCC Magazines (Milton Keynes) Ltd, Milton Keynes Typesetting by Bedford Typesetters Ltd, Bedford. Registered as a newspaper.

On market forces, videos, and colicky babies

The orthodox v complementary medicine bout goes another round in the letters pages this week (p 624). When the dust has finally settled, we will be left with just two types of medicine: that which works and that which doesn't. Then terms like alternative, non-orthodox, and the rest will become meaningless and we can forget them. (The term "quackery" will still have a future: as before it will describe the medicine that does not work.)

It's not such a futile hope; as Jack Howell writes: "All techniques aim to achieve particular measurable objectives, and the Research Council for Complementary Medicine has maintained that the existing scientific methods and criteria could very well and meaningfully be applied to the evaluation of nonconventional therapies" (p 625).

Of all the consequences of the NHS reforms, the most interesting may well be how the purchaser-provider split accelerated the process of distinguishing between treatments that work (and hence are worth paying for) and treatments that don't. For example, "Should purchasers pay for psychotherapy?" ask Tom Fahy and Simon Wessaly in their editorial (p 576). Only if it can be shown to work, they answer. Those psychotherapists who have so far been uninterested in

formally evaluating their treatments may have to work fast to stay in the game.

In his review of On Kissing, Tickling and Being Bored John Callendar says that psychoanalysis is showing "signs of increasing frailty and precarious health" as it approaches its centenary (p 633). Not only has its efficacy proved elusive in controlled trials but as a theory it is being increasingly challenged. The recent fall in the influence of psychoanalytic theories matters to Callendar because they "have much to offer medical and psychiatric practice."

Munchausen syndrome by proxy would seem to be a case in point. Why do apparently loving parents do such terrible things to their children? Our understanding of the syndrome is poor and so, some would argue, is our diagnosis of the condition. Covert videoing can provide watertight evidence—but is it ethical? Two teams from Stoke on Trent (psychiatrist and philosopher v paediatricians) battle it out (p 611).

Päivi Rautava and colleagues should give psychoanalysts (not to mention parents and their doctors) something to think about from their study on infantile colic (p 600). Unhappy parents are more likely to have colicky babies. Scope here, say the authors, for worthwhile intervention.