

The policy which the Minister has announced with regard to the purchase of practices finds its explanation in the following paragraph: "Apart from areas deemed to be fully served by doctors, the medical practitioner will be free to set up practice anywhere; private practices may continue so long as they are in public demand, but, as they fall vacant, they will be filled in conformity with the district's special needs instead of being offered to the highest bidder."

The free choice of doctor which is dealt with in the B.M.A.'s Principle III is explained (and limited!) in the following paragraph: "There will be no interference with the right of the patient to choose his own doctor and there will be nothing to stop him from paying a private fee, *in addition to his annual subscription* (the italics are mine), if he can find no better use for his money." We have been warned.—I am, etc.,

House of Commons.

E. GRAHAM-LITTLE.

### Questionnaires, Past and Future

SIR,—May I suggest that one question, such as the following, is all that is necessary: "Do you wish to enter a centrally controlled service?" If the service be centrally controlled the central authority could convert, by regulation and without reference to Parliament, an originally attractive service into one which would be repugnant to both patient and doctor. If the present system, which in the main is on a basis of peripheral control by patients and doctors, were set free from unnecessary financial restrictions nothing would stand in the way of the rapid adaptation of its structure to meet the various and varying demands made upon it to the advantage of all concerned (except those whose pleasure is to exercise power over the lives of their fellows). A similar question to the one suggested above was recently put to 30,000 doctors. Of the 10,000 who made the effort to reply, 77% were opposed to a centrally controlled service. Full details of this questionnaire are, I believe, available for the use of the Negotiating Committee.

As part of a comprehensive and long-term policy directed against the freedom of the individual all official proposals, actual and foreshadowed, conform consistently to a centrally controlled type of organization. In this the executive of the B.M.A. acquiesces. The Negotiating Committee avoids the fundamental issue and discusses mere details.—I am, etc.,

Bexley, Kent.

E. U. MACWILLIAM.

### A Burning Topic

SIR,—At a time when the future of the medical profession in this country and the immediate prospects of so many of its members are in the balance, it can only cause irritation among your readers if you continue to give up columns of space to letters, however flippant or however magisterial, advocating that a venerologist should be called a venerologist (or alternatively a "moskovend" or a "priapologist") or that the operation of myringotomy should be called "syngomyringodiacentesis." There are more burning topics. For example, the present plight of those many practitioners who through war service, voluntary or otherwise, have lost their practices, and on demobilization find that they are debarred from acquiring new ones, so that they can now only go to work as salaried employees in other men's practices.

There is a feeling in the air that in future general practitioners will be paid, not according to how good they are at general practice, but according to the letters after their names. The natural course, then, for those now suspended in this limbo, especially for those with definite specialist ambitions (which they may have forgone for the security of the practices they have now lost), would be to use the Government scheme for rehabilitation, by a Class I or a Class III appointment, to acquire some higher or specialist qualification. This, it seems, is completely ruled out under the scheme. Neither the man who has spent any time in general practice nor the specialist is allowed anything beyond a contemptible two-week refresher course. If one pays a visit to the H.Q. of this postgraduate scheme one may be confronted by an individual who at the mention of the word "right" or "claim" jumps up from his chair, flourishes a disability at one, and declares that *he* has no claim against the country; and while one is still gasping from the impact of such mawkishness the interview comes to an end.

One is led to understand that the only people to benefit by this scheme are those who have avoided war service or served in the E.M.S. long enough to become graded specialists. Was this the country's intention in setting aside this sum for rehabilitation of Service doctors? Have we (who have lost most and need most rehabilitation), in fact, no claim on these facilities nor right to ask for them? Can we not now use these opportunities, which we had so counted on during long evening hours of study in the Forces?

I suggest that we hear no more of "moskovends" or of "syngomyringodiacentesis," and that the space thus released be given over to one weekly letter on this subject until enough interest has been aroused to get something done.—I am, etc.,

Tacolneston Norfolk.

W. J. GARDNER.

### A Tribute to Honorary Staffs

SIR,—Undergoing rehabilitation at my old London teaching hospital I have been forcibly struck by the very apparent ageing and tiredness of those of the honorary staff who remained behind to carry on during the war years. This change is apparent enough when I recall their pre-war appearances, and it becomes even more obvious when I compare them with their youthful-looking colleagues now returned from the Services. An acid tongue might remark that everyone knows how little work was done in the Services, but in the case of Service specialists I am quite certain that most have done their full share. The difference is due to the drag of everyday wartime civilian life, the frustration of shortage of nurses, of laboratory staff, of instruments, etc., the drag of travelling, and, not least, the very considerable amount of time spent by many under constant threat of enemy air activity.

Not only do I wish to pay a belated tribute to their devotion and loyalty, but I want to point out that the teaching hospitals are now faced with having tired men both to teach the new generation and to help deal with the very difficult years stretching before the medical profession. My humble suggestion is that during the next few years these leaders of our profession should be rehabilitated by six months in Canada and the U.S.A., studying their own specialty and incidentally resting, feeding, and rejuvenating.

Feeling that the motives behind a letter of this nature might be misunderstood, I would prefer to remain

"EX-MAJOR, R.A.M.C." (Non-specialist).

### A United Nations Medical Association

SIR,—Now that the United Nations Organization is meeting in London, is it not apposite to consider the possibility of forming a United Nations Medical Association? The excellent achievements of the League of Nations Health Organization are known and appreciated (though not perhaps as widely as they should be). Undoubtedly this or a similar body must continue to study and organize public health projects of international importance. But some of us working with U.N.R.R.A. recognize the need for an organization somewhat similar to the B.M.A. or the A.M.A. The social and professional benefits which such an organization could offer to our numerous displaced and distressed colleagues in many countries are apparent to all who have worked in the camps. These, our colleagues, have now no homeland, no books or journals (though we try to make good this deficiency). The aid which might come to them through U.N.M.A. should be socially and psychologically preferable to selective charity from any other source. It would enable them to identify themselves with their professional fellows in every land.

The above is, of course, but an expedient reason for proposing the function of such a body as U.N.M.A. at the present time. Other important professional reasons will be obvious. Furthermore, it is reasonable to suppose that so large an international body of mainly cultured, tolerant, and enlightened people would form a considerable contribution towards maintaining world peace. The first step that suggests itself in the development of such an organization is the publication of a U.N.M.A. journal to be printed in English and several other languages. The choice and decision as to these languages should not lead to as much dispute as some might anticipate. It requires no fertile mind to imagine the interest and value such a pioneer journal should otherwise possess.—I am, etc.,

U.N.R.R.A., Austria.

F. M. PURCELL.