

Correspondence

Censorship

SIR,—The letters from Mr. J. Johnston Abraham (Dec. 27, 1947, p. 1053) and from Mr. R. F. West (Jan. 10, p. 69) draw attention to what is one of the great dangers in any State medical service: the fettering of free expression of opinion. The strength of medical practice in Britain has been the doctor-patient relationship. The patient knows his doctor as a man. He knows his wife, his children, his dog, his car, his way of life. He chooses him when he is ill because he trusts him as a man. He comes to him for his opinion and his help, believing that the opinion will be honestly given and the help the best he can provide. Were he to think, or even to suspect, that he was being handed out the stock doctrines of authority, or given the treatment enjoined in the latest circular from headquarters, he would lose this belief.

We have passed through a long period in which truth has been at a discount and honesty an unpopular virtue. Speakers and writers have uttered advisedly rather than freely. They have said what they were told to say, what they felt they ought to say, what they were afraid they might cause alarm and despondency and let the side down by not saying, rather than what they passionately desired to say. We want truth and freedom to walk among us again. How many enjoy them to-day?

Men who enlist in a service lose the right to publish as they like. Those who work for the Medical Research Council must submit to a benevolent guidance. Servants of Government departments must express opinions that fit the policy of the moment. Experts who are asked to report must suppress their report if its findings fail to confirm the views of the Minister who asked for it. Ration analyses, health statistics, nutrition surveys, all fall obediently into line with the propaganda programme. Are potatoes plentiful?—they are magnificent food. Are they scarce?—they are starchy rubbish.

Medicine can advance only while the right to speak and publish freely is open to all medical men; while the small man working without a research grant or the help of a well-equipped laboratory can put forward his humble thesis with as much right to be heard as the hall-marked and salaried professor; while new ideas gain ground because they are backed by facts and not because they are backed by authority, and old ones disappear because they are disproved and replaced by something better, and not because they are suppressed.

Magna est veritas et praevaleret. Will it after the appointed day?—I am, etc.,

London, W.1.

HENEAGE OGILVIE.

SIR,—My attention has been drawn to the letters of Mr. Johnston Abraham (Dec. 27, 1947, p. 1053), and Mr. R. F. West (Jan. 10, p. 69). Their insistence that the medical press must at all times and at all costs be kept free from official interference is one which appeals to my heart and one which specially concerns tropical medicine. To this subject workers of all nations have contributed, and for this development unfettered and unbiased criticism has been most necessary. On many occasions when official views have been promulgated—as, for instance, in the manner of transmission of yellow fever, malaria, cholera, or plague—they have proved erroneous. Therefore I cannot imagine any Government in this country being so foolhardy as to press for a muzzling of medical publications, and if there is any tendency to do so we must fight.—I am, etc.,

London, W.1.

PHILIP MANSON-BAHR.

SIR,—Among those called upon to vote in the plebiscite are medical men who devote most or all of their time to research. One point which has been discussed in your correspondence columns (Mr. J. Johnston Abraham, Dec. 27, 1947, p. 1053; Mr. R. F. West, Jan. 10, p. 69) concerns them directly and vitally. This is freedom of publication. In the absence of specific assurance, which does not seem to have been given, there will be a natural fear that this freedom will be endangered by the operations of the new Health Act.

Other points at issue between the Minister and the profession may not concern the research worker so directly; nevertheless, the freedom and the conditions conducive to good work which he enjoys depend upon the maintenance of the freedom of the profession as a whole. If we as research workers feel that the refusal of the Minister to grant the desired concessions does threaten that freedom, then it is our duty to place ourselves alongside our colleagues who are in practice and return a decided "No."—I am, etc.,

London, W.C.1

J. A. FRASER ROBERTS.

SIR,—Mr. J. Johnston Abraham's letter (Dec. 27, 1947, p. 1053) raised questions of such fundamental importance to medical education that I expected his challenging communication would be followed by correspondence from those better qualified than myself to express their views. The absence of this, combined with a belief that Mr. Johnston Abraham sounded a note that, if not heeded by the profession, may lose us one of our birthrights, causes me to call attention to the fact that, except in the case of medical literature issued by, or on behalf of, the Ministry, the Ministry of Health, while sponsoring a complete health service for the nation, has not established a single priority for medical literature in the important matters of delivery of paper from the mills, printing, or bookbinding. Consequently medical students' textbooks take their turn for paper, printing, and binding with manuals on greyhound racing and "How to Play Poker."

As yet, none of the priority Government publications are designed for the use of medical students, but one must presume that in due course trainees for a Civil Service will be issued with official handbooks. While I am open to conviction, after a critical examination of Government medical publications, I have formed the opinion that the Ministry of Health's official student textbooks, if and when they are available, are not so likely to appeal to medical students as those compiled and produced by private enterprise. In my view something is lacking in the official publications; they fail to reveal the spirit of an unfettered Aesculapius striving to pass on the torch of knowledge for the good of mankind and the advancement of the profession. Undoubtedly it is the censorship which Mr. Johnston Abraham deplores that tends to stultify these and other communications that emanate from the pens of medical writers who must obtain official permission to write.—I am, etc.,

London, W.1.

HAMILTON BAILEY.

SIR,—I entirely agree with the remarks of Mr. R. F. West (Jan. 10, p. 69).

While serving during the war, as M.O. to an Ordnance Depot, I had occasion to write to *B.M.J.* a report of what I considered to be an unusual case of idiosyncrasy to strychnine. I soon discovered that it was not as easy as all that. It had to go through the usual channels. First the C.O. (R.A.O.C.) had to peruse the report, and on his profound knowledge of medicine, acquired as a business executive, allowed it to go through to the A.D.M.S. He in his turn allowed it to go through to the D.D.M.S., who after a considerable delay passed the document as fit for publication.

I take it that this procedure was necessary to protect the Editor of *B.M.J.*, who must have been considered to be incapable of deciding whether this sinister report would have been of use to the enemy.—I am, etc.,

London, E.9.

P. R. SAVILLE.

A Decisive No

SIR,—To one who has followed this controversy as anxiously and closely as I have done, ending up with the masterly analysis of the situation by our Secretary on Dec. 31 and attendance in the gallery at the S.R.M., there will be no difficulty in answering the plebiscite. But I am well aware that there are many doctors who have no time, or no inclination, for study of the complicated issues which have been raised, especially by the astute appeal made by the Minister. I therefore offer what I think is a legitimate simplification of the problem which will face all recipients of the plebiscite.

In a body so large as ours it is impossible to attain unanimity on any point, but on one point we have approached it so nearly as makes no matter. To those who are doctors first and

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