

I may have caused some confusion in Sir Francis's mind by writing a letter to *The Times* giving my own experiences and thoughts about the question of the heroin ban. These thoughts were not expressed to the committee and were not, of course, strictly in order. It so happened that my experiences touched on several facets of this question, and I thought that an account might be of interest to readers of *The Times* who were in danger of becoming surfeited with ideas which might turn them into heroin addicts.

You, Sir, and others have raised the bogey of State interference with the doctor's right to prescribe. I hope you will remember that the Government represents the people who are our patients, and that we are the servants of our patients and not their masters. I would also ask you to remember that it is necessary to restrict some freedoms in order to gain others perhaps more important. My freedom to carry a revolver and shoot anyone I dislike on sight is restricted in order that I may enjoy the freedom of walking the streets unmolested by my enemies. Do you not think the same principle might possibly apply to the manufacture of heroin?

I do not deny the right of those who disagree with the advice given by the Standing Medical Advisory Committee to muster all the support they can get from the B.M.A. and Parliament, but they are playing with fire. Heroin is a dangerous drug. Because of the propaganda and publicity of the last few months, I prophesy that, if the manufacture of heroin is not banned in this country in 1956, within ten years the B.M.A. will lead the whole profession in demanding the ban.—I am, etc.,

Cambridge.

C. W. WALKER.

SIR.—There are occasions when one should not pull one's punches; but you, Sir, in your leading article, "Control of What by Whom?" (*Journal*, December 24, 1955, p. 1544) have done so. "Behind the apparently artless observations of Lord Woolton and the dogmatic attitude of Major Lloyd-George is the threat of therapeutic dictation"; but that is a gross understatement: the threat is that of restriction of the freedom of the doctor to accept views that are not those of the "leaders of his profession." This is clearly Lord Woolton's desire, because he says that he cannot admit that an individual who finds himself opposed to the scientific thought of the leaders of his profession should be left as a law to himself. How much poorer the world would be if Harvey had been dragooned by the leaders of the profession; if Semmelweis had followed the leaders who knew so clearly and erroneously that his views on puerperal sepsis were baseless; and Jenner, and Lister, and Freud, and a host of other pioneers would have been "yes-men" if politics had played the nefarious part in medicine that Lord Woolton would, obviously, wish them to play.

Even in the world of commerce—about which I know as little as does Lord Woolton of medicine—there have been examples of successful heretics. The sort of remarks that were made to Henry Ford, when he first started mass-production of his T-model, sound much like the remarks that leaders of our profession have made to each genius in turn. If the price of liberty be eternal vigilance, we doctors must keep our eye on Lord Woolton and on other politicians who also do not stick to their lasts. Their task is to "give us the tools and we will finish the job." The greatest threats to the progress of medicine are "administrative convenience" and authoritarianism.—I am, etc.,

London, W.1.

A. PINEY.

SIR.—The discussions in Parliament and the Press on the proposal to ban the production of heroin in this country have raised issues of considerable importance to the individual and to the medical profession.

The freedom of the individual to obtain drugs prescribed by his doctor is an issue which can only be decided, ultimately, by the community. The profession faces other issues—namely, the right to be heard on this and similar matters, and to choose its own representatives. Time and time again in debates politicians have stated: "The Com-

mittee is representative of the medical profession." This may be true, but the point is: the Committee does not represent us; no State-chosen committee can represent a free profession. I believe we are quite capable of choosing for ourselves, as do other groups in the population.

The British Medical Association must persistently affirm its right to represent the views of a large part of the profession, as it would seem politicians are already confusing us with the National Health Service.—I am, etc.,

Edinburgh, 10.

JOHN HARKNESS

Homosexuality and Prostitution

SIR.—The Council of the B.M.A. is to be congratulated on the achievement of its expert committee in presenting the Memorandum on homosexuality and prostitution (*Supplement*, December 17, 1955, p. 165). In particular, this report is wide in its conception. When grave moral problems are to be faced, it seems a bit archaic and somewhat sad that anyone should feel apprehension over this bold report (Dr. S. L. Sherwood, *Journal*, December 31, p. 1623). Surely to invoke the Hippocratic Oath is to hide behind pre-Christian shibboleths. Modern medicine has brought with it responsibilities far greater than the narrow limitations of the Oath. Any doctor who considers that "morals" is outside the scope of his responsibility is falling into the ditch of mechanistic medicine. This is one facet of the deplorable pressure which urges all practitioners to become technicians and tools in a vast administration.

The much-used catchphrase "Loyalty to the patient" must surely emphasize rather than exclude the doctor's interest in all aspects of his patient's life, physical, intellectual, and spiritual. Dr. Sherwood says, "It is for the people to determine what shall be their mores," but our privileged and learned profession has a duty to the people in advising, and if necessary endeavouring to mould, public opinion. Our Association must surely always give a lead in any moral issue which in the end may affect the spiritual and thus the mental and physical well-being of the community.

Dr. Sherwood claims further that "if [the people's] morals and ethics are 'lax' it is not for the men of medicine to say so." Why not? Our profession is recruited from the community to serve the community, in which individual patients must be helped to live in peace, sanity, and health. Dr. Sherwood appears to believe that potential doctors will escape the laxity of "the people's" morals, or does he believe that six years at a university will raise men and women to the ethical standards and morality of British medicine, whatever "the people" may do? In any case, let him read the Hippocratic Oath again (*New Gould Medical Dictionary*, 1951; Lewis, London)—it is full of morals! Meanwhile let the profession continue to exercise what influence it still has for the public good. Its terms of reference are wide and its opinion respected.—I am, etc.,

London, W.1.

DENIS ELLISON NASH.

SIR.—May I congratulate the B.M.A. on the production of a masterly report (*Supplement*, December 17, 1955, p. 165) which clarifies the whole subject? It is right that the medical profession should be able to speak with the voice of authority on this issue. The guardians of the nation's health may well be concerned with the moral climate of the country and be grateful for this clear and courageous lead.—I am, etc.,

Birmingham, 20.

ROBERT BROWNE.

Prefrontal Leucotomy

SIR.—Mr. Campbell Connolly implies (*Journal*, January 7, p. 48) that the main critics of leucotomy are "those who have no real knowledge of the good results obtainable." I do not think that this applies in my case. I see a certain number of patients at pensions boards, where one should meet both successful cases and failures, also at my psychiatric out-patient department and privately, where one sees mainly failures. I find more failures than successes at pensions boards.