

448.8 B77

BRITISH MEDICAL JOURNAL

SATURDAY 12 DECEMBER 1987

LEADING ARTICLES

Why a ban on embryo research would be a tragedy	R M L WINSTON	1501
Plastic surgery: a specialty on its knees	D M DAVIES	1502
Sensitive thyrotrophin assays: excellent when properly used	A D TOFT, J SETH	1503
AIDS: the need for data	DOUGLAS G ALTMAN	1503
Seasonal affective disorder: the miseries of long dark nights?	MELANIE ABAS, DECLAN MURPHY	1504
Crisis in the National Health Service	SIR RAYMOND HOFFENBERG, IAN P TODD, SIR GEORGE PINKER	1505
Regular Review: Community care I: problems	ELAINE MURPHY	1505

CLINICAL RESEARCH • PAPERS AND SHORT REPORTS • PRACTICE OBSERVED

Effective chelation of iron in β thalassaemia with the oral chelator 1,2-dimethyl-3-hydroxypyrid-4-one	GEORGE J KONTOGHIOGHES, MAADH A ALDOURI, A VICTOR HOFFBRAND, JOAN BARR, BEATRIX WONKE, THEO KOUROUCLARIS, LYNDON SHEPPARD	1509
Effects of sleep disruption on cognitive performance and mood in medical house officers	IAN J DEARY, ROSEMARY TAIT	1513
Respiratory effects of non-tobacco cigarettes	JOHN W BLOOM, WALTER T KALTENBORN, PAOLO PAOLETTI, ANTHONY CAMILLI, MICHAEL D LEBOWITZ	1516
Alfa-2a recombinant interferon in HIV associated thrombocytopenia	M E ELLIS, K R NEAL, C L S LEEN, A C NEULAND	1519
Treatment of thrombocytopenia with alfa interferon	ANDREW M L LEVER, M GARY BROOK, IVY YAP, HOWARD C THOMAS	1519
Concentrations of free serum digoxin after treatment with antibody fragments	MARIUS LEMON, DAVID J ANDREWS, ALLAN M BINKS, GEORGE A GEORGIU	1520
A controlled study of two psychotropic agents for the relief of pain in osteoarthritis	H A BIRD, V WRIGHT, P LE GALLEZ, R BOJAR, JS DIXON	1521
Major abdominal operations on patients aged 80 and over: an audit	A V POLLOCK, MARY EVANS	1522
Interim discharge summaries: How are they best delivered to general practitioners?	DAVID A SANDLER, J R A MITCHELL	1523
Thirty five years of the William Budd Health Centre	STEPHEN LOCK	1526

MEDICAL PRACTICE

Study of 100 patients injured by London underground trains 1981-6	ROBERT A COCKS	1527
Effect of the 1983 Mental Health Act on the management of psychiatric patients	L WEBSTER, C DEAN, N KESSEL	1529
Medicolegal audit in the West Midlands region: analysis of 100 cases	CLIFFORD HAWKINS, IAN PATERSON	1533
Logic in medicine: an economic perspective	ALAN MAYNARD	1537
ABC of Dermatology: Leg ulcers	P K BUXTON	1542
Epidemiology: Report from the PHLS Communicable Disease Surveillance Centre		1545
Research Policy: The legless dual support system and the new dawn	RICHARD SMITH	1547
King's Fund forum consensus statement: screening for fetal and genetic abnormality		1551
Going to law to get treatment	CLARE DYER	1554
Medicine and the Media—Contribution from SIR REGINALD MURLEY		1555
Multicultural Medicine	ZOE KENYON	1541
Materia Non Medica—Contribution from DIANA GRIFFITH		1550
Any Questions?		1553
Medicine and Books		1556
Personal View	JOHN HULBERT	1559
Correction: Medicine and the Media	MURLEY	1555

CORRESPONDENCE—List of Contents 1560

OBITUARY (Correction) 1572

NEWS AND NOTES

Views	1569
Medical News	1570
BMA Notices	1571

SUPPLEMENT

The Week	1575
Too simple by half, says minister	JOHN WARDEN 1576
From the CCHMS: Further legal opinion on HIV testing to be sought	1577
BMA advises doctors on new pension arrangements	1580

CORRESPONDENCE

Motorcycle messenger mania A R Cope, FRCS, and others.....	1560	Doctors with AIDS Lesley Kay, MRCPATH.....	1564	Obstetrics on the labour ward J S Samra, MRCOG, and others.....	1566
Gender reassignment today F C Rutter, MB; A P Rubin, FFARCS; R P Snaith, FRCPsych.....	1560	Testing for HIV P Noble, FRCPsych.....	1564	Soviet health care at first hand P J Carter.....	1567
Child abuse and osteogenesis imperfecta C R Paterson, DM, and Susan J McAllion, MB	1561	Control of HIV infection with confidentiality M Barnham, MRCPATH, and M McEvoy, FRCPATH.....	1564	Confidentiality and AIDS C Shepherd, MB.....	1567
Adult epiglottitis M Chester, MB, and others; Linda V Booth, MRCPATH.....	1562	Severe rombergism due to gentamicin toxicity D G Swain, MRCP; R Duncan, MD, and I D Melville, FRCP.....	1565	Medical research and training Sir Christopher Booth, FRCP.....	1567
Psoriatic science B S Baker and others.....	1562	Gonadotrophin hormone releasing analogues open new doors in cancer treatment A J Arnold, FRCS, and A D Desmond, FRCS....	1565	Death of Oscar Wilde J B Lyons, FRCPi.....	1567
Compulsory treatment in the community for the mentally ill? G Thornicroft, MB.....	1562	Waiting for Godot I McKinlay, FRCP.....	1565	Points Butter and government food policy (A A McInnes); Prognosis in asthma (C K Connolly); Familial adenomatous polyposis (J P S Thompson); Alzheimer's disease: ignoring achievements (R Levy); Access to personal health data held on computers (F V Flynn); Walking through labour (Sheila Kitzinger); Diagnosis of deep vein thrombosis (J Martin and E Cameron); Medicine and the media (S Dickens); Obstetricians on the labour ward (D J Houghton); The Isle of Wight's new hospital (P Brand).....	1567
Secretor state of patients with insulin dependent or non-insulin dependent diabetes mellitus P-J Lamey, MB, and others.....	1563	Waiting list statistics R Tilston Austin, FRCSed.....	1565		
Hormonochemotherapy in advanced breast cancer R W Blamey, FRCS; Helen J Stewart, FRCSed; Margaret W Ghilchik, FRCS, and others; M R Williams, FRCS, and M P Mohajer, MB....	1563	Hospital and community health service costs: England and Scotland compared A C A Glen and J K M Hulbert, MD.....	1566		
Euthanasia in The Netherlands Else Borst-Eilers, MD.....	1563	Spending more on turning patients into people R N Baldwin, MRCP.....	1566		
		Physiotherapists and rehabilitation T Simon.....	1566		

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- No letter should be more than 400 words.
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- We do not routinely acknowledge letters. Please send a stamped addressed envelope if you would like an acknowledgment.
- Because we receive many more letters than we can publish we may shorten those we do print, particularly when we receive several on the same subject.

Motorcycle messenger mania

SIR,—Further to the Minister of Transport's recent launch of a scheme to provide suitable training for motorcycle couriers, you may be interested to note that the accident and emergency department of St Bartholomew's Hospital has been investigating the increase in injuries resulting from this type of service. We questioned all 33 motorcycle messengers attending the department over nine months. The results are summarised in the table.

Seventy per cent of the couriers who attended

*Details of riders attending St Bartholomew's Hospital
accident and emergency department*

	Average	Range
Age of rider (years)	22.3	17-27
Power of motorcycle (cc)	403	125-1000
Riding experience (months)	49.1	3-144
Riding that particular machine (months)	9.2	2 days- 36 months
Previous accidents per rider per year	0.7	0-4
Days off work due to accidents in past year	2	0-20
Expected days off work after this injury	14	0-90

the accident and emergency department had had an accident in the past year and they had been riding that particular machine for an average of only 9.2 months.

The mean cubic capacity of newly registered motorcycles and mopeds in 1986 was 199.2 cc with 82% of these vehicles being below 400 cc (personal communication, Motor Cycle Association). This compares with an average of 403 cc among the injured motorcycle couriers, indicating that these couriers use particularly powerful machines. High acceleration does not appear to be necessary for the job but unfortunately the method of payment is in most cases "by the job" or by the distance travelled. This piecework would suggest that the inexperienced rider would be tempted to drive faster and take more risks.

In London 550 companies are listed as providing couriers but no records exist on the number of riders concerned. There is no legislation to force companies to ensure that their employees have insurance, road tax, or roadworthy vehicles. Furthermore, few keep accurate staff records.

Although the scheme launched last month is a voluntary code of conduct for couriers, it is hoped that more courier companies will appreciate the

need for such a scheme. At present only 15 of the 550 companies have expressed an interest.

Clearly only a small proportion of accidents affecting couriers have been studied. Ten accident units serve central London, and data are currently being collected from them. The figures shown in our table highlight the prevalence of such accidents, representing considerable morbidity. Fortunately, there have been no recorded deaths yet, but one cycle dispatch rider was killed two months ago in central London (personal communication, City of London coroner). Accident prevention is clearly a role in which the medical fraternity must be actively concerned, especially as this affects an already vulnerable group of road users.

A R COPE
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Gender reassignment today

SIR,—I can understand Mr Grant Williams's reservations about gender reassignment when he