

While in farmers and mushroom workers antigens from micro-organisms are the cause of the allergic alveolitis, it is worth noting that organic dusts from any source are possible causes of similar serious disease. There is evidence that precipitins are commonly present in persons exposed to a wide range of vegetable dusts.¹

Doctors for Industry

There are about 2,000 appointed factory doctors in Britain, most of whom are general practitioners. They examine young persons entering industry, advise both the employer and the employee in cases where a disease or disability is likely to be affected by working conditions, and have various other statutory duties. Last year a Ministry of Labour report^{1 2} recommended that these part-time factory doctors should be replaced by a much smaller group of 100 "A doctors," still responsible to the Ministry of Labour.

The report has been the subject of much controversy, both among doctors in industry^{3 4} and elsewhere, and the Industrial Health Committee of the Royal College of Physicians⁵ has now commented on it. The Royal College report agrees "that the present Appointed Factory Doctor Service does not meet the needs of the working population," but goes on to point out that the envisaged 100 A doctors will serve only that part of the working population covered by the Factories Acts, whereas those covered by the Shops, Offices and Railway Premises Act will be left out, as will many other groups of workers, such as fishermen.

The Royal College report suggests that as the A doctors' role would be mainly to give advice they should answer to the Ministry of Health and not the Ministry of Labour. As well as emphasizing the advisory function of A doctors this would improve their career structure and facilitate their recruitment from the National Health Service, especially as they might be part-time in the first instance. A doctor could have secretarial assistance and trained ancillary services provided by the N.H.S. for carrying out radiological, physiological, and haematological investigations. The Royal College report suggests that an industrial hygiene service could be organized by regions, preferably based on the universities.

The most contentious proposal in the original report from the Ministry of Labour was that school doctors should issue all school-leavers with a standard certificate, which would make the examination at entry to industry unnecessary. The Royal College Committee agreed that the numerous young persons' statutory annual examinations at present carried out by the appointed factory doctors are largely a waste of time and took the view that the pre-employment medical certificate was a satisfactory substitute.

However, the B.M.A. Occupational Health Committee is far less happy with the idea of the certificate and has made its views known to the Minister of Labour. At any pre-employment examination of a young person by an industrial medical officer or an appointed factory doctor, not only is the employer already chosen but the actual job that the school-leaver is going to do is known to the examiner. If the School

Medical Service issues a certificate of fitness for most leavers and a small group receives a "disabled" certificate it may lead to the employer deciding which jobs are "heavy" or have a "high dermatitis hazard," and may also make it easy for an unscrupulous employer to refuse all but the healthy school-leavers. This is an interference with the individual's freedom to apply for any sort of occupation which he himself chooses, and another step in the creation of a State dossier on each citizen. This restriction is to be foisted on school-leavers as part of an inescapable administrative scheme, and is based only on the evidence of a school doctor at the beginning of this person's working career. The doctor may err, or the patient's condition may improve.

The solution put forward by the B.M.A. is that a handbook should be issued for the guidance of school medical officers, listing the medical handicaps which might be hazardous for school-leavers in open industry. Young persons with these disabilities could be referred to the A doctor for his advice. He could then take the matter up with the general practitioner and the youth employment officer and eventually with the proposed employer.

The Association of Certifying Factory Surgeons, which is the recognized body of the appointed factory doctors, has not yet committed itself to print but seems to be viewing its members' demise with equanimity, while at the same time regretting that all the emphasis has been placed on the time-wasting statutory examinations of young persons and that no mention has been made of the valuable service that appointed factory doctors have already carried out in the field of occupational health.

However, the climate of expert opinion appears to favour the appointment of A doctors, if they will become occupational health advisers under the Ministry of Health serving on area health boards as envisaged by the Porritt Committee.⁶ These men could then become the basis of a national occupational health service, a service which the Treaty of Rome demands in a field where Britain lags behind most other civilized countries.

Treatment of Addicts

The Dangerous Drugs Bill was introduced to "provide for the control of drug addiction." Moving the second reading in April, Miss Alice Bacon¹ claimed that the Bill paved the way for a major change in the organization of treatment for addicts. Fundamental to that change was the establishment of treatment centres in hospitals. However, until there are enough of these centres to cope with the number of cases there is no possibility of getting away from the existing practice of individual doctors prescribing heroin and other drugs as they see fit.

Government spokesmen have repeatedly stated that plans for the provision of these centres are proceeding smoothly, and that they hoped that the regulations limiting prescription of drugs to addicts would be introduced in 1968. But the Ministry of Health has refused² to provide hospital boards with the money for treatment centres, and there is little evidence that they are being established. The Ministry refuses to name the hospitals where the centres are to be or to give any details of their progress. The existing out-

¹ *The Appointed Factory Doctor Service*. Report by a Subcommittee of the Industrial Health Advisory Committee. H.M.S.O. 1966.

² *Brit. med. J.*, 1966, 2, 539.

³ *Trans. Soc. occup. Med.*, 1966, 16, 37.

⁴ *Ibid.*, 1967, 17, 81.

⁵ *The Appointed Factory Doctor Service*, Report of the Royal College of Physicians, 1967.

⁶ *A Review of the Medical Services in Great Britain*, Social Assay, London, 1962.

¹ *Brit. med. J.*, 1967, 2, 187.

² *Ibid.*, 1967, 3, 58.

³ Edwards, G., *ibid.*, 1967, 3, 425.

⁴ *Ibid.*, 1967, 2, 498.