

Prescriptions for slimness



I've always assumed that doctors must be fit because, well, they're doctors. They deal with the health and wellbeing of others; ergo, they are in pretty good nick themselves. Actually, I suppose, expecting doctors to be that

little bit springier in the step than everyone else is rather like expecting sportswriters to be sporty. Whereas, after 17 years as a member of the breed, I feel duty bound to reveal the truth. Sportswriters are overweight, they drink to excess, they are addicted to nicotine. The nearest they get to aerobic movement is hailing taxis to take them to Wembley. Their idea of hard exercise is lugging the crate of empties back to the off licence. They are a merry bunch, as you would expect folk to be who get paid to watch the world's greatest sporting events from the best seats in the house, but Sebastian Coe they are not.

One of the drawbacks of being a writer or journalist is the number of hours spent sitting on one's backside. It is just not possible to scribble in a notebook, operate a Tandy word processor, appreciate Swindon Town's system of playing four men in defence plus a sweeper, or concentrate on Ivan Lendl's return of serve while simultaneously enjoying a brisk walk or doing 100 press ups. You simply have to sit down. If you do not, a man in a steward's uniform will arrive to remove you. Then again, sportswriters tend to travel everywhere by car because the last thing they want to do after producing a 900 word report on Liverpool v Chelsea is to ride back to London on a football special full of rambunctious young men running up and down the corridors shouting profanities at old ladies.

The trouble with keeping fit, too, is the amount of time it takes up in the journalist's action packed life. For instance, just to attend a one hour aerobics class in the basement of a friend's house last night involved the following. Drive one mile to venue in rush hour—20 minutes. Find space to

park car—five minutes. Have argument with resident about occupying their own personal parking spot—three minutes. After reparking car, meet garrulous former neighbour in the street, the one you moved house to get away from—five minutes, which would have been longer had you made the mistake of asking about her operation. Jump up and down in lumpy and uncoordinated fashion in the company of four housewives—one hour. Return home, where during *News at Ten* you realise that your ankle has swollen to the size of a Swiss roll. Attend surgery the next morning—one hour because they're running late.

It is while sitting in the surgery that the realisation dawns on you—every single doctor in the practice is thin. You run a quick mental check on all the doctors you know socially and they too are as trim as Sainsbury's skinless chicken fillets. Yet they, like journalists, spend a lot of their days sitting down. Oh well. I refuse to feel guilty. Everyone knows doctors burn up a hell of a lot of calories scribbling on prescription pads. That's my theory, anyway.—JULIE WELCH, *freelance journalist, London*

Third World debt

One of the most heartening recent achievements in medicine has been the success of the World Health Organisation's campaign to make immunisation against the common fevers available to all children around the world. Nearly 80% of children are now being immunised, even in remote mountain and desert regions.

It makes little sense, however, to improve the health of the world's children if we are then going to starve them. Many African and Asian countries face economic problems all too familiar to mortgage debtors in Britain: they were lent money by eager bankers in the boom years of the '70s and '80s and now cannot afford to pay the interest, let alone repay the debts. We hear a lot about rescheduling and writing off Third World debts, but Africa's debt rose from \$212 billion in 1986 to \$272 billion in 1990, and there seems little chance that it will be reduced in the foreseeable future.

There are many reasons why Africa and much of Asia are so poverty stricken, some of them familiar—fortunes spent on armaments and rapidly rising populations. But

one reason for the economic problems of the Third World stands out as being directly attributable to the rich Western countries. We pay them far too little for their exports.

Goodness knows they are trying to climb up the economic ladder. African countries have steadily improved their agricultural performance, increasing output by around 3% a year in the 1980s. The problem is that the West has been paying ever lower prices for the products that the Africans sell. In the past five years the volume of exports from Africa has risen by 7.5% while their unit value has fallen by 24 points. In other words, developing countries are working ever harder to grow more crops such as tropical fruits, sugar, coffee, tea, and cocoa and earning less for their efforts. These countries need export revenues to balance their trade and pay for vital imports such as medicines and machines. If their cash crops earn poorly their only answer is to increase production—often at the expense of food for their own people.

If the widening gap between the rich and

the poor nations is an inevitable consequence of the operation of a free market system then we have to change the system. From time to time reports such as that of the Brandt commission appear, calling for steps

to be taken to redress the economic imbalance between the northern and southern hemispheres. Nothing much seems to happen. Multinational companies talk about their duties to their shareholders—arguing that these absolve them from having any international social responsibilities. The coming year is going to see enormous upheavals in the world's economy as the countries of the former Soviet empire are put back on to their financial feet. We in the West should not lose patience with the poorer countries; we should use the peace dividend to give them more help.—TONY SMITH, *associate editor, BMJ*

