

and illnesses can be cared for in health centres.—We are, etc.,

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Fire-fighting Equipment

SIR,—Dr. C. W. A. Emery's letter (13 November, p. 430) pleading for standardization of seat-belt fasteners prompts me to plead for standardization of another item of safety equipment, particularly in units such as this where we have large numbers of frail, ambulant, and bedfast old people.

There is a great need for simplification in the operation of fire extinguishers. Even intelligent active young people can waste valuable time and sometimes valuable water by not following the instructions, which can be confusing, particularly under stress. Though there is of course a place for sophisticated fire-fighting equipment, in my opinion water buckets, sand buckets, and asbestos blankets should always be immediately available as the first line of defence.—I am, etc.,

J. F. FLEETWOOD

Our Lady's Hospice,
Dublin 6

Undescended Testis

SIR,—While agreeing with the surgical aspect of Mr. W. Van Essen's letter (23 October, p. 232), I feel that if the botanical meaning of the word "pexis" is considered there is no need to abandon the term "orchidopexy." The lexicon gives an alternative interpretation of *πηξίς*—namely, "set or plant." Thus the planting of the testicle

into the scrotum—where the orchid will thrive—can still appropriately be called "orchidopexy."—I am, etc.,

V. A. J. SWAIN

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Pensions and the Abatement Rule

SIR,—Two years ago on reaching the age of 65 I was compulsorily retired, and since then have been actively employed in my specialty, frequently spending more hours a week in the theatre than when I was fulfilling a maximum part-time contract.

For every three sessions I undertake I probably refuse one because I simply cannot arrange to do it. This situation does not arise from sentiment or because the South-east Metropolitan Regional Hospital Board loves me dearly, but because there is a desperate and world-wide shortage of trained anaesthetists and my services are in demand by the surgeons and, ipso facto, by their patients.

The first letter I opened on my return from holiday this summer was an ill-mannered and peremptory demand from someone in the Paymaster's Office at Crawley for the return of half my pension, and a bald refusal to pay any further instalments of it until a quarterly statement of my N.H.S. locum fees had been furnished.

With the increase in fees payable to locums over the last two years the number of sessions permissible to me decreases pro rata, and the number of operating lists that have to be cancelled or dealt with by inexperienced men increases.

I do not expect the moral aspect of stealing a man's pension to cut much ice with Government departments, but the public should be made aware of this particular form of pig-headed stupidity, producing the

state of affairs I have described, which must sooner or later lead to tragedy.—I am, etc.,

FOLLIOTT SANDFORD

Chislehurst, Kent

Hospital Staff Appointments

SIR,—Mr. Ivor Lewis's letter (17 July, p. 190) about hospital staff appointments gives a distorted picture.

I returned to India in 1968 after nine years of hospital practice in Britain, during which I attended many interviews in different parts of the country. Firstly, I was never paid travelling expenses from any hospital board if I was the selected candidate. Expenses were always reimbursed in the first month's salary. Secondly, some interviews were held for appearance's sake only as the posts had already been promised to certain candidates. On one occasion no one was appointed as the favoured candidate did not turn up. On another occasion eight to nine candidates had been called from places as far apart as Ireland and Cornwall, only to find that the post had already been promised to a local boy.

The general impression gained by many is that the selection boards are guilty of "dishonesty" and "lack of integrity" rather than Indian and Pakistani doctors, who in the majority work with feelings of dedication and sincerity. It is very distressing to read that a man of Mr. Ivor Lewis's qualifications and experience should hold such a jaundiced view against a particular nationality of doctors, who, while carrying the maximum burden of the N.H.S., are not in a very good position to defend themselves.—I am, etc.,

BHIM S. PANDHI

Dehra Dun,
India

Points from Letters

Epitaph for the M.C.H.C.

DR. M. S. ROSE (Department of Haematology, Guy's Hospital, London S.E.1) writes: I am afraid that an error appeared in Figure 1 of my letter (16 October, p. 169). The horizontal axis should be marked MCH pg; the vertical axis MCV μ^3 . I regret this mistake.

Effect of Prison

MR. O. GAYER MORGAN (Walberswick, Suffolk) writes: The questions of penal reform and the condition of our prisons are in the forefront of discussion and future action. I wonder, however, whether those involved are starting, as they should, with the overriding conception of prison as the most diabolical form of mental and physical torture ever invented by man. We think that because we provide many amenities our prisons are more humane than the old dungeons in which people rotted out their lives, but in effect we are perpetuating this evil system because our criminals are removed from the only possible softening influences in their lives—female society, their home and children, domestic animals, plants, nature, and the earth. When they return their wives may or may not be waiting, their children don't understand and hardly recognize them, nor they their children, and the world has changed. . . . The only way to tackle this problem is to make sure that these vital links with the only civilizing influence in their lives are not broken. Give short corporal punishment and send them home, with

the understanding that a further conviction for violence will bring more. . . . This solution, which inadvertently would save millions, is mainly in the interest of the criminal. It is not a return to brutality, but a reaction to the far greater barbarity which involves the spirit as well as the body and almost destroys both in the process.

Driving and the Heart Rate

DR. M. GOLDMAN (Fazakerley Hospital, Liverpool) writes: Among the many factors responsible for coronary disease, I wonder whether the role of motor vehicles has been given sufficient attention? A report appeared in your columns four years ago (18 February 1967, p. 411) on E.C.G. changes in apparently normal individuals while actually driving, following which I suggested (11 March 1967, p. 629) that this work merited a large-scale computer survey correlating the incidence of coronary thrombosis in patients in different parts of the country, urban and rural, with details of their previous driving habits. . . .

Animals and Research

DR. J. D. WHITTALL (Peasmarsh, Sussex) writes: I appeal to the B.M.A. to put pressure on the Government to give top priority to the need for the establishment of a research centre specifically to develop methods of research not requiring the use of living animals. There are two compelling reasons for this. Firstly, many

scientists are now convinced that the use of cell and tissue culture as an alternative to vivisection gives superior results to those that can be obtained by vivisection. . . . Secondly, and more important, vivisection (now the means of torment for millions, not hundreds of animals yearly) is indefensible on moral grounds. . . .

The Loose Back

DR. D. MCGREGOR (Bonar Bridge, Sutherland) writes: It seems clear (your leading article "The Loose Back," 30 October, p. 251) that clinical methods of assessing spinal mobility leave much to be desired. May I draw attention to a simple instrument with which to measure the mobility of adjoining vertebrae of the lumbar or thoracic spine.¹

¹ McGregor, D., *Rural Medicine*, 1971, 2, 83.

Jigger, Chigger, or Chigoe

DR. E. S. BENJAMIN (Cape Town, Republic of South Africa) writes: In his interesting Personal View (11 September, p. 635) Professor Hector M. Cameron includes the term chigger as referring to the sand flea *Tunga penetrans*. . . . However, it is surely preferable to exclude the term chigger when referring to tungiasis and to restrict the use of this colloquialism to describe the harvest mites belonging to the family Trombiculidae causing scrub itch, some species of which are vectors of rickettsial disease. . . .