suppression test without any of its hazards or wasting the patient's time. At present apparently a normal response of TSH to a small intravenous dose of thyrotrophin-releasing hormone virtually excludes appreciable hyperthyroidism, while an absent response usually but not necessarily indicates hyperthyroidism, especially in an untreated patient.

The TSH immunoassay has now proved itself to be a valuable test of thyroid function, particularly in the diagnosis of mild hyperthyroidism. TSH measurements after the administration of thyrotrophin-releasing hormone also provide helpful information in the diagnosis of hypothyroidism secondary to pituitary-hypothalamic disease and in recognizing minor degrees of thyroid overactivity.

Nevertheless, this will not be the end of the controversy, nor should it be. Animal experimentation has produced and will continue to produce results of benefit to human and animal medicine and life in general. A minority of experiments cause suffering, and fewer still severe suffering. Suffering should be prevented on ethical grounds and because it is almost certain to vitiate the experiment. The aim should therefore be not to abandon a method of investigation that is so valuable but to remove from it the undesirable features of pain and suffering.

The subject of animal experimentation is never far from the public or the medical mind. The Universities Federation for Animal Welfare held a symposium in October on the rational use of animals in research, and in May two other symposia on different aspects of the same theme were held by the Laboratory Animal Science Association and jointly by the Comparative Medicine Section of the Royal Society of Medicine and the Research Defence Society. The Littlewood Committee Report is still under consideration by the Home Office, which has already given effect to some of its recommendations. If for many good reasons the Council of Europe's recommendation is unacceptable there is nevertheless a need for those who are better equipped to weigh the matter than some whose evidence was presented by the Council of Europe to work out a more rational, better informed approach to the ethical problems of animal experiments. These should concern a civilized society, and it would be wrong to sweep the whole thing under the carpet.

Animal Experiments

The increase each year in the number of laboratory animals used for research and for various purposes in the pharmaceutical and related industries is reflected in the annual Home Office returns of experiments. These cover Great Britain, but the increase is paralleled in other countries throughout the world and is in itself proof that animal experimentation produces useful results. No scientist or businessman would put himself to the trouble and expense of using animals for investigations if an in vitro test would serve as well. Yet paradoxically the very usefulness of animal experiments begs the question whether, having found a system that gives such consistently valuable results, scientists are giving enough consideration to alternative methods.

The Consultative Assembly of the Council of Europe adopted a recommendation in January 1971 that was severely critical of accepted uses of experimental animals. The recommendation is supported by a summary of evidence collected by several rapporteurs. The council's general thesis is that animal experimentation is used too readily and that a commission should be set up to study alternative methods by various means—some of which would duplicate existing activities—with the hope that ultimately animal experiments might be altogether abandoned. A serious bias may be detected in the evidence collected by the rapporteurs. More than twice as much space is given to evidence from those supporting the council's thesis, many of them frank antivivisectionists, than to evidence from scientists who see no reason for any radical change. In fact, the very incompleteness of the evidence is open to grave criticism, and it is little wonder that the World Medical Association in September rejected the Council of Europe's recommendation.

Ovarian Tumours in Infants and Children

Gynaecologists and surgeons are seldom called on to treat ovarian tumours in children, common though these lesions are in later life. I. Forshall reported only 21 cases of ovarian tumour in over 100,000 patients admitted to two Liverpool children's hospitals, and D. S. Thatcher 48 cases in nearly 160,000 admissions to the Milwaukee Children's Hospital. Moreover, the clinical and pathological features of ovarian tumours in childhood differ in some ways from those in adults. Diagnosis is more difficult and mistakes are therefore more often made. Torsion of the tumour is more often the presenting feature and abdominal pain a more common symptom, and thus appendicitis rather than torsion of a tumour is apt to be diagnosed. The epithelial tumours so frequently found in adults are less common in children, but teratomatous lesions, benign or malignant, and dysgerminomas are relatively more common.

The different histological pattern of childhood ovarian new growths is shown by O. Lindfors in a report on 81 cases of primary ovarian neoplasm in Finnish and Swedish children of up to 14 years of age. Only 10 tumours were