

ther, we very much deplore your insinuation that the M.R.C. has acquiesced in such an intrusion, and we feel that an apology to the M.R.C. is due from you.

One member of the committee of the Carshalton Research Branch of the A.S.T.M.S. was also present at the meeting with the selection committee. He presented a separate and brief report embodying the views of the unit staff on trade union issues alone. We are all aware that the B.M.A. was offered a similar opportunity to express opinions at the same meeting.

We can only endorse your own view that "if an organization is going to appoint a director of a unit, nobody should object to the appointing committee seeking the advice of members of the unit's staff about its future direction. Nor should members of the staff feel reluctant to express their opinion, for they may have valuable experience on which to draw." We have to point out that this is exactly the sort of consultation with unit staff that took place earlier this month and without reference to membership of any professional association. The consultative exercise was appreciated by all the unit staff. Others as well as ourselves express the hope that this formula could become the model to be employed in comparable situations in the future.

In the course of the lengthy discussions with the unit staff that preceded the preparation of our report we heard many expressions of satisfaction that a group had been sufficiently enterprising and responsible to approach the M.R.C. and to achieve this formula. This end having been attained we can only regret that the *B.M.J.* has now seen fit to denigrate a constructive development in relations between M.R.C. Head Office and its peripheral units.—We are, etc.,

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D. M. SHAW

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SIR,—The last paragraph of your leader *Big Brother's Scrutiny* (19 December, p. 701) appears to have been written without knowledge of the true facts.

Representations were received orally from representatives of the staff concerned on general matters which were of concern to the personal futures of the staff—for example, on the future siting of the unit. In agreeing to receive representations the M.R.C. insisted that those making them should be representative of the unit as a whole and not of any union, association, or other group. No representative took any part in the selection procedure and none knew the names of the candidates. There was no negotiation on any matter. All these points had been clearly stated in writing before the meeting and accepted by the representatives.

The M.R.C. regards the right of staff to make representations to it on matters affecting their personal futures as something of fundamental importance. It should also be added that after seeing Mr. T. Pendry's letter (p. 755) the Secretary of the M.R.C. wrote a letter to Mr. Pendry (copied to the directors concerned) in which he said "In the past, the Council has listened to the views of staff on matters of scientific policy,

and will no doubt continue to do so in the future. This, of course, does not mean that scientific policy is a matter which is or ever will be a matter of formal consultation between any union or other organized body of staff and Council, a point which I know you fully realize."—I am, etc.,

N. H. WINTERTON

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Press Officer,  
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SIR.—I am grateful to the *B.M.J.* for publishing, and to the trade union official who signed, the letter from the A.S.T.M.S. (19 December, p. 755) to all staff of the M.R.C. Neuropsychiatric Unit. To read it clarifies one's understanding of trade union methods, and the degree to which one union is prepared to intervene where it may have only doubtful competence. It was interesting that a meeting should have been called both for non-unionists and union members and be denied the right to elect its own chairman.

The agenda chosen beforehand, presumably by the self-appointed chairman, presupposed a decision by the meeting to elect a representative to undertake the proposed functions; for to attend the meeting called for this purpose might be interpreted as agreeing the agenda. Presumably, no other decision would be allowed to such a meeting by the chairman. One can see the powerful position into which he would have placed himself.

The union shows some humility in suggesting that it would be for the chosen representative to collect views from all those working in the unit upon the questions set out in the letter. But the letter does not say to whom these views should be sent or the purpose of their collection. It does say, however, that a union committee member would sit in upon the selection committee and that "he will obtain and receive opinions on purely trade union issues." What does this mean? From whom will these opinions be received? The appointment committee members, the candidates, or whom?

Finally is it implied that all matters raised in paragraphs i. to iv. in the letter are trade union issues? "Future scientific policy of the unit," "the most important aspects of Neuropsychiatric Research at the present day," "the correct relationship . . . between clinical and fundamental research," and others that might be quoted. If these are not considered "trade union issues" why are they on the suggested agenda of a meeting called by a union branch secretary with the chairman of the branch in the chair?"

The union branch secretary very understandably writes "the formula obtained above represents an advance in the procedure between the M.R.C. Head Office and all grades of Unit staff." One wonders whether the Secretary of the M.R.C. intended that the consultations of "Head Office" with its unit staff should be made through a trade union official following a meeting chaired by himself. What will be the next advance requested?

Who spoke once of the price of freedom and of vigilance?—I am, etc.,

F. H. STEVENSON

Andover, Hants

### Abortions under the N.H.S.

SIR,—Mr. H. G. E. Arthure (5 December, p. 617) suggests that in "1969 there were 18 deaths associated with over 54,000 pregnancies terminated." In fact, in the Chief Medical Officer's most recent *Annual Report*,<sup>1</sup> only 10 deaths are shown as resulting from abortions in 1969 "induced for medical or for other legal indications."

This gives a legal abortion mortality rate of about 19 per 100,000 which is similar to the 1969 maternal mortality rate. Since about one third of all legal abortions are performed after the first trimester of pregnancy, when several of these 10 deaths must have taken place, Mr. Arthure is quite certainly right in pointing out that "mortality from legal abortion before 12 weeks may be lower than maternal mortality excluding abortion." This, of course, adds force to his plea for providing facilities so that legal abortions can be carried out as early in pregnancy as possible, when it is as safe a procedure as we now know it to be.—I am, etc.,

MADELINE SIMMS

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<sup>1</sup> Department of Health and Social Security. *On the State of the Public Health: Annual Report of the Chief Medical Officer for 1969*. London, H.M.S.O., 1970.

### Grants for Research in District Hospitals

SIR,—Any organization that cannot support progress is sick. It may be sick right unto death. So often has this diagnosis been made for our N.H.S. that when it does arrive we may fail immediately to recognize it until the chances of rescue have passed.

Some time ago it became possible for clinicians working outside the large undergraduate teaching centres, where other funds existed, to obtain a research grant through the N.H.S. to cover the expenses of research work which they continued to do in their own unpaid spare time. For the total cost this has been valuable and productive not only in tangible results, but also in continuing interest and improving methods and standards of medical practice. Such universal benefits are not always acknowledged by treasurers and administrators, who, often short-sightedly, regard such grants as a waste of finance.

We have recently been warned that, regrettably, these monies are to be cut. In many cases this research work was initially financed from the clinician's own pocket. One wonders what will happen now should he again be asked to personally finance work which is an integral part of the health service.

One of the more potent causes for immigration is the severe lack of facilities of this sort in this country, and their availability in every country to which immigration of our doctors is popular. A training and a continued interest in research is not just a requisite to gain a consultant appointment but is obligatory in maintaining medical standards and progress, both for ourselves and for those who work with us. It is a misconception that all research must be of a pure laboratory type to be of any value. Clinical research, which, as its name implies, is of an essentially practical nature,