is that prolonged driving as part of a job is in many cases an aetiological factor.—I am, etc.,

G. MATTHEWS

London W.5

Recommendations under the Mental Health Act

SIR,—I write to you on the duties of doctors signing medical recommendations under Section 25 of the Mental Health Act 1959. In times past the mental welfare officer who made the application accepted the recommendations of two doctors as sufficient. However, a younger generation of mental welfare officers (now termed social workers) appear to think they should hold an independent inquiry, often including cross-examination of the doctors.

I know of no part of the Act which requires doctors to consult with social workers in this manner; indeed it might be held unethical to do so. Courtesy demands that the social worker should be given what, in the doctor's judgement, is appropriate information. Section 54 subsection 1 of the above Act says that "it shall be the duty of a mental welfare officer to make an application for admission to hospital . . . in any case where he is satisfied that such an application ought to be made. . . ." Though most doctors would wish to be helpful I cannot see any reason why they should be interrogated. I have known of general practitioners having to waste an hour while inexperienced social workers "satisfy" themselves.

In my view the doctor, having given what information he thinks appropriate should then retire and leave the social worker to decide. If he rejects the recommendations of two doctors the responsibility is his.—I am, etc.,

J. ELWES DUFFIELD

Littlemore Hospital,
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Tests of Acupuncture

SIR,—You are to be congratulated on your leading article "Tests of Acupuncture" (2 June, p. 502). The particular emphasis that is laid upon the need for neurophysiological research into a possible explanation for the phenomenon of acupuncture analgesia is certainly to be commended. This technique is employed for most of the major surgery that is undertaken on the Chinese mainland nowadays. Doubtless this is partly because of the near-total lack of modern conventional anaesthetic equipment and the extremely severe shortage of fully-trained anaesthetists.

It is not only in the field of anaesthetics that we Western doctors should interest ourselves. For too long the complete isolation of China from the outside world has resulted in their medical research proceeding along totally different and restricted paths so dissimilar from our own. Likewise there is an extraordinary lack of knowledge among the members of the Chinese medical profession concerning technical advances in Western medicine. When we consider that our Chinese colleagues are responsible for the medical care of nearly a quarter of the world's population, it is greatly to their credit that they have achieved standards of health

in the community which can hardly be improved upon elsewhere. In my opinion, it has become a matter of extreme urgency that a sharing of knowledge between the medical professions of China and the West should now be encouraged.

It is to be sincerely hoped that in Britain the Medical Research Council will initiate a preliminary investigation into the field of acupuncture and that immediate steps will be taken by those in authority to invite a free exchange of ideas between Chinese and British doctors.—I am, etc.,

P. E. BROWN

Gravesend, Kent

SIR,—With reference to your leading article (2 June, p. 502) I would like to comment upon your concept of acupuncture treatment as an "esoteric and far-fetched exercise."

The basis of acupuncture is a large body of observed fact which records the amelioration of certain symptom complexes which occurred when certain "point combinations" were stimulated. In common with other sciences an attempt was made to classify this information in order to derive a theory from which useful predictions might be made about future treatments. It is unfortunate that those responsible for the formulation of the traditional theory had no knowledge of occidental medical science and therefore expressed themselves in the terminology of oriental philosophy. The observation that the traditional theory is an absolute failure in that it does not explain the mechanisms of acupuncture in scientific terms does not mean that it is completely without value in the treatment of patients on a more or less empirical basis and certainly should not be allowed to detract from its basis of observed fact.

Your suggestion that a scientific investigation of acupuncture should take place is timely and there is a wide field awaiting this endeavour which ranges from the elucidation of a hitherto unexplained neurophysiological mechanism to the possibility of translating and classifying the ancient Chinese data. The results and explanations as they emerge should prove very interesting.—I am, etc.,

J. DAVID WATTS

Dundonald, Ayrshire

Vibrating Umbilicus

SIR,—We wish to bring to your attention a new physical sign. Within the space of three weeks two patients were admitted through our accident and emergency department with a painful vibrating umbilicus. Both were young homosexuals, aged 19 and 25 years respectively, who were accustomed to using battery-operated stimulators or vibrators. Hospital admission was occasioned by loss of the vibrators through the anus into the rectum, apparently at the moment of orgasm. Both patients complained of a deep central abdominal ache. Apart from the vibrating umbilicus, a cylindrical mass could be felt arising from the pelvis and a gentle hum could be heard. Rectally the milled end of the instrument could just be felt high in the curve of the sacrum.

In one patient the anus was so lax that four fingers of the hand could be inserted

to grasp the ties of an encasing condom and remove the instrument. The second patient had not used a condom and it proved too painful to deliver the instrument bimanually from the curve of the sacrum. Interestingly, however, this manipulation resulted in the mechanism being turned off, when the vibration and the pain were abolished. A general anaesthetic allowed relaxation and easy removal of the instrument some time later.

The accompanying photograph shows the lateral x-ray of one of the patients and, for those who are not familiar with the instrument, the actual vibrator is shown alongside. —We are, etc.,

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Speech Defects in Children

SIR,—Miss J. Stengelhofen and others (31 March, p. 803), commenting on our study of speech defects in children aged 7 years, (3 February, p. 253), point out that a speech therapist was not included in the assessment team and that the tests used did not take into account vocabulary, frequency of usage, and sentence length and construction. These criticisms seem to us to be based on the misapprehension that individual comprehensive assessment was made by us on all the 15,000 7-year-olds in the national sample studied.

Important though they are, we could not include refined tests of auditory discrimination and phonetic and linguistic usage in individual children by all the doctors and teachers concerned. Nevertheless, the sentence repetition test which was used was backed up by a clinical speech assessment, clinical hearing test, and also audiometry in the majority of children. We thought it was clear from our report that the tests used in this survey were necessarily crude and suitable for a national population and that only a small part could be concerned with language development.

Your correspondents deplore the fact that the children were not tested earlier than 7 years, but this was not by choice, being the first age at which these children could