

of employing bodies. It has also consistently opposed any variation of that scheme which would still contain such defects and has made it clear to the management side of the General Whitley Council and to the Department of Health and Social Security that, in view of the fact that many employing authorities have developed their own disputes procedures, it would be better to have no national procedure at all than to accept a bad procedure.

Only time will tell what procedure, if any, will be agreed by the General Whitley Council, but so far as the administrator is concerned in this matter I am sure that your journal will wish to put the record straight. If in the event a careful history taking and clinical examination shows the administrator's spine to be suffering from some defect, it will be because others have ridden over it.

SIDNEY SHAW
National Secretary, Association
of Chief Administrators of
Health Authorities

Essex Area Health Authority,
Witham, Essex CM8 2TT

Points

Thioridazine and ejaculatory incompetence

Dr E D FREED (St Vincent's Hospital, Darlinghurst, New South Wales 2010, Australia) writes: Your leading article on drugs and male sexual dysfunction (13 October, p 883) prompts me to report the case of a 35-year-old married schizophrenic who had been maintained on stelazine 15 mg daily and who complained of inability to ejaculate following the addition of thioridazine 50 mg at night. His normal frequency of intercourse was twice at weekends. He felt better on thioridazine and was loathe to stop it. By trial and error it was found that by leaving out the drug on Wednesday, Thursday, and Friday nights ejaculation was normal. This suggests that appropriately timed drug holidays may ameliorate some problems of sexual dysfunction.

Drinking and driving: the leisurely approach

FIONA WEIR (London School of Hygiene and Tropical Medicine, London WC1E 7HT) writes: I beg to quarrel with one phrase in your leading article (19 January, p 135)—that "even well-informed and responsible people continue to drive after drinking." Far too many of my well-informed and otherwise responsible friends quite blatantly ignore the law on drinking and driving, among them two disabled drivers who are absolutely dependent for mobility on being able to drive their cars. I believe that the police should be given unlimited powers to test drivers whom they suspect of being unfit to drive before they are allowed to get into their cars outside such places as pubs and clubs. . . .

Speed limits, economy, and road safety

Dr DENIS D HILTON (District Community Physician's Office, Portsmouth and South-east Hampshire Health District, Portsmouth PO1 2JQ) writes: Now that the nation is faced by the rapidly rising cost of fuel together

with great difficulty in maintaining an effective health service within cost limits, it seems appropriate to restore the speed limits which were imposed a few years ago at a time of fuel shortage. The more economical speeds may again coincide with a reduction in road casualties. . . . It certainly seems quite inappropriate to grant liquor licences at the service areas on motorways.

Snail-eating mummy?

Dr JOHN COLE (Dudley Road Hospital, Birmingham B18 7QH) writes: I am grateful to Dr D Rollinson (19 January, p 183) for pointing out my confusion between crustacea and a snail (1 December, p 1412). The error is mine and not that of the author of the chapter concerned, Dr E Tap, who on p 99 of *Manchester Mummy Project*¹ makes the position quite clear.

¹ David RA, ed. *Manchester Mummy Project: Multidisciplinary research on ancient Egyptian mummified remains*. Manchester University Press, 1979.

Drug names that look or sound alike

Dr D P MARKBY (The Medical Centre, Southampton S04 5ZB) writes: I should like to report to you an error made by myself and by a colleague recently—in both cases Depo Provera was mistaken for Depo Medrone. . . . I felt it worth writing to you in view of the similarity not only of the name but of the packaging of these two drugs. The small cardboard box in which each ampoule is packed is of identical colour. The only difference appears to be in the size and colour of the writing of the name of the drug. One is written in red and the other in green. This in itself may be an unwise choice of colours to differentiate a drug.

Benign recurrent vertigo

Dr L SONENSCHER (Bulawayo, Zimbabwe Rhodesia) writes: . . . As a consultant psychiatrist I have had referred to me cases of recurrent vertigo (29 September, p 756; 24 November, p 1369), in some of whom a diagnosis of Ménière's disease had been made and associated treatment had had no result. Treatment of the condition based on finding the symptom to be a manifestation of loss of self-confidence due to a depressive state has produced a resolution of the vertigo. It occurs to me whether referral for a psychiatric opinion is warranted much more frequently in cases of benign vertigo. . . .

Culinary terms in medicine

Dr M G WRIGHT (St Andrew's Hospital, London E3 3NT) writes: Drs S I Terry and B Hanchard (22-29 December, p 1638) are clearly neither dog lovers nor German scholars. Fleckmilz is not connected with milk but is directly translated as "flecked milts." Milts (spleens) are sometimes found in butcher's shops on sale for canine culinary use but this hardly comes within their term of reference.

Simplifying the straight-leg-raising test

Dr NICHOLAS R J HOOPER (Langford, near Bristol) writes: Traditionally, as part of an

orthopaedic examination, doctors have evaluated the straight-leg-raising test in terms of degrees of elevation from the horizontal. I have never found this very helpful as it is not easy to estimate the degrees. This is often unimportant, but on occasions it is useful to measure more accurately when evaluating the progress of a patient with a prolapsed intervertebral disc. May I suggest the simple expedient of a measure from the heel to the bed vertically in preference to angles?

Danbury shakes

Dr WILLIAM E HART (Saint Francis Hospital and Medical Center, Hartford, Connecticut 06105, USA) writes: With reference to the Christmas Quiz (22-29 December, p 1651), an individual with the Danbury shakes, defined as "mercury poisoning among hatters in Danbury, Massachusetts," would reside in the state of Connecticut, not Massachusetts. Danbury is often called the hat capital of the world, but with the decline in popularity of hats has assumed other roles: it is the site of a prominent federal correctional institution as well as a number of corporate headquarters which have been relocated from New York City.

Year of the Single-handed Practitioner?

Dr ARCHIE MUIR (Blackpool, Lancs) writes: Through the courtesy of your columns may I suggest to our negotiators that 1980 be the Year of the Single-handed Practitioner, since partnership and group practice continue to be heavily favoured financially. In past years I have known two older practitioners who had resigned from the BMA on this point alone. . . . To redress the situation might I suggest a "personal doctor allowance," or some such payment equivalent to the group practice allowance, to the doctors in practice on their own.

Matron since Salmon

Mr JOHN POTTER (Newcastle upon Tyne NE20 4AH) writes: I congratulate you on the excellent leading article "On line but off course" (22-29 December, p 1610), and also Nancy Arnold on her excellent article "Where have all the nurses gone?" (19 January, p 199). . . . There was, however, one matter which was not mentioned, and that is the change of the matron since Salmon. The daily ward visits by the matron and her deputies are no more. The matron stays in her office and does not wear a uniform. She did great service by visiting each ward, at least twice weekly, personally. . . .

Corrections

Women and general practice

In the letter by Dr Julie Shepherd (26 January, p 257) we regret that "most" was misprinted as "more" in the penultimate line, which should read, "80% will marry and most will have children."

Correspondence list

We regret that in the correspondence list of 26 January (p 247) Dr E V Kuenssberg was wrongly designated as "PRCGP." In fact he ceased to be president of the Royal College of General Practitioners on 17 November 1979.