sibility if any excessive demand is made on the cardiovascular system at some future date. One thing is probably certain, and that is that no resuscitation of any type would have been effective in restoring a heart with a myocardium exhausted after exposure to a large overdose of metabolites.—I am, etc.,

Coppenhall,
Stafford.

T. K. ELLIOTT.

Nasal Obstruction in Babies

SIR,—Further to Mr. A. E. Howarth's letter (13 September, p. 655) I should like to make two points on the treatment of bilateral choanal atresia. Firstly, in a recent baby, birth weight 6 lb. 12 oz. (3 kg.) presenting with respiratory obstruction, operation was delayed because of pulmonary complications (right pulmonary atelectasis). By the time this child came to operation the oral airway had ulcerated the mucoperiosteum of the hard palate, exposing bone at the junction of soft and hard palate. It may be, and was, argued that the airway was too short, but I feel this does not detract from a note of warning.

Secondly, I agree that "blind perforation" is undesirable. Two years ago I reviewed 28 cases of choanal atresia presenting in the newborn period for an internal meeting. Twenty-six of these were due to a membrane and two to stenosis. Of the membrane obstructions it was clear that the twelve treated

by perforation and resection with a right-angled punch carried a much better prognosis in terms of fewer repeat procedures (six of eight after simple rupture, and three out of 12 after the use of the punch). The punch can be used under vision, with the use of post nasal mirrors or direct palpation via the nasopharynx.

A further argument against prolonged conservative management is the difficulty in feeding. An orogastric tube, in my experience, is difficult to maintain, particularly in the presence of an oral airway.—I am, etc.

Hospital for Sick
Children,
London W.C.1.

J. O. N. LAWSON.

Pregnancy Tests

SIR,—The arrogance of the B.M.A. passes all belief. There are many, many, many good reasons why chemists should not only be allowed, but should be encouraged, to do pregnancy testing, and the nonsense about the necessity for further investigations by doctors (20 September, p. 667) is quite irrelevant to the present situation. It is the patient's convenience that must be considered and not the exercise of a restrictive practice by the B.M.A.—I am, etc.,

Chelmsford, Essex.

J. TUDOR PEMBLETON.

Representation of Hospital Junior Doctors

SIR,—Perhaps as an octogenarian I have no right to air an opinion on the present controversial situation between the junior members of the profession and the establishment. As one who has been active in the B.M.A. and who still takes a great interest, I should like to express my views.

I am very much biased in favour of the young. For many years we have deplored the lack of interest in the Association on the part of junior members and urged their greater participation. Now they are accepting their share in the work, and their views, especially in the matters of training and registration, must receive the greatest consideration. They must be represented on the Council and central committees in proportion to their numbers. After all the future is theirs and they ought to have the largest share in preparation for it. If they make mistakes, and they will, the responsibility will rest with them and not be blamed on the "old men," as so often in the past.

But I would add a firm note of warning to them. They will only obtain satisfaction if they remain a united body, and I believe this they will find inside the B.M.A. and not outside it. They will make a great mistake if they opt out. They will do well to pay heed to the advice and guidance of such as Dr. Ronald Gibson and Mr. Walpole Lewin, whose prescience and clarity of expression are so much to be admired in all the discussions which have taken place. Let them model themselves on such as these and get clear-cut issues to bring forward. These issues should have been agreed among themselves. Once

agreed they should be expressed clearly in the central committees and adhered to firmly.

With every good wish for the future of our profession and the welfare of the B.M.A.—I am, etc.,

Rye, Sussex.

CYRIL F. MAYNE.

SIR,—As the Birmingham Hospital Junior Staffs Group representatives on the H.J.S.G. Council, we wish to thank Dr. J. F. G. Pigott for all the effort and time he has given on behalf of junior staff. It is with great sorrow that we learnt of his decision to resign from the chair of the Hospital Junior Staffs Group Council and also to resign from the B.M.A. However, we deplore the fact that his resignation has been linked in time with the adjournment of the Group Council, a decision which, incidentally, the majority of junior staff representatives rejected at the last meeting.

We dissociate ourselves with the manipulations which lead to the adjournment of the Group Council and to the temporary muzzling of junior opinion within the B.M.A. In particular, we wish to associate ourselves with the views expressed to you in the letters by Surgeon Lieutenant-Commander D. S. Wright (25 October, p. 238) and Drs. E. A. Harvey-Smith and T. H. Taylor (1 November, p. 304).

It is a sad fact that certain Regional Groups, particularly from the north of the country, have been unable to send represen-

tatives to the H.J.S.G. Council. We call on every region to send the existing representatives or elect new ones, and urge them to reconvene the Group Council at the earliest possible date in order that negotiations can continue so that junior staff are fully represented. At a time when junior staff have gained much and the medical profession faces the biggest crisis it has ever faced in the last 20 years the situation is indeed tragic.—We are, etc.,

P. E. H. WILSON,
Chairman, Birmingham H.J.S.G.

J. S. ELKINGTON,

I. MCKIM THOMPSON,
Secretary, Birmingham H.J.S.G.

B.M.A. Birmingham Division,
Birmingham 15.

SIR,—The meeting of the Hospital Junior Staff Group Council on 5 November (*Supplement*, 15 November, p. 37) showed yet again how a determined minority can obstruct the wishes of the apathetic majority. Although in a minority of 15 votes to 18, a discontented group of junior staff almost entirely from the Metropolitan regions were able to prevent the rescindment of the decision to adjourn the council indefinitely which was passed a month earlier, and for which a two-thirds majority was required. The 15 votes were almost entirely from the Home Counties, and it is a pity that some of the provincial regions were not represented at all. The word "democracy" was bandied about rather loosely, particularly by members of the minority group, but it seems a travesty of democracy when an actual minority is able to prevent the wishes of all members of the junior medical staff being fairly represented centrally.

As a result of this meeting, junior staff representation has been inadequate or completely absent at some extremely important sessions with the Department of Health, and the general good will that is held towards junior medical staff will be frittered away.

When one considers the considerable improvements which have taken place in conditions of service for junior medical staff over the last five years it seems a pity that some doctors should behave like petulant children when they cannot immediately get their own way and see the reforms that are so obviously necessary immediately put into action.

There has been a failure in communication in the past between senior and junior members of the profession. I believe that this failure of communication is now lessening, and that many senior staff are conscious of our problems, and sympathetic also. It is true that they have not always been able to gain everything they want, either for themselves or for their juniors, but it is hard to understand the logic which supposes that any more splits in the profession will further our aims. The real problems in the Health Service at the moment are a shortage of money and a failure on the part of the Government to understand the cause of our discontent, and, above all, its inability to take firm and constructive efforts to remedy the defects which have been pointed out in a series of reports recently. Discontented junior staff are striking at the B.M.A. when in fact it