activity. The patient usually complains of pain in the hip or knee for a week or ten days, and he may have a limp. The physical signs may be slight at first—there may be no more than a few degrees of limitation of movement of the hip, with some pain at the extremes of movement. More rarely displacement of a complete fracture will occur, and the patient will collapse, unable to walk.

The earliest radiographic change is the appearance of a faint haze of osteoid callus within the neck of the femur. Though this can usually be seen in retrospect, it may be missed at first, and a definite crack is likely to develop in the cortex. If there is no fracture line on x-ray treatment may be limited to bed rest followed by protection from weight-bearing until the pain has gone. When a crack can be identified it is better to use internal fixation, and, as it is difficult to insert a trifin nail into hard young bone, thin pins of the Moore or Newman type should be used.

**New Look at the N.H.S.**

The initial response in the press to the B.M.A. Council's request to the Government for an immediate independent inquiry into "the finance, administration, and staffing" of the N.H.S. has been favourable. If this reflects the view of people generally it implies that patients as well as doctors would welcome it.

Almost exactly six months ago the Representative Body turned down a motion calling for a Royal Commission to advise on the finance and structure of the Health Service, "bearing in mind that the hospital and general practice services are so starved of money that both are in danger of breakdown." Twelve days later the freeze set in. Since then much has happened. Discontents have sharpened and risen to the surface. This has occurred in each of the three main divisions of the Health Service. What has been new is the emphasis on the running down of the Service itself, on its undercapitalization, on the increasing workload it imposes, and on its dependence on overseas doctors. The latest estimates of the number of British doctors emigrating were disturbing evidence of lack of confidence in the future of medical practice here, which the Government's treatment of clinical teachers has only increased. At last it is becoming generally realized that the country is faced with several choices: to find much more money, to ration free medical care by accepting priorities of need—or to let the Service go on running down. Against this background of uncertainty and dissatisfaction the General Medical Services Committee on 20 October debated afresh the financing of medical care in Britain and recommended to Council that the time had come for taking stock.

The success of the inquiry the B.M.A. Council asks for will depend on three principal factors: firstly, the stature and independence of those who conduct it; secondly, determination by all concerned not to use the occasion for delay or to side-step awkward issues; thirdly, and most importantly, on the quality of advice which the medical profession itself offers. This is a chance—perhaps the last chance—for profession and public together to hammer out a service worthy of modern medicine.

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**Twenty Years of Abstracts**

The expansion of theory and the revolution of practice seen in medicine over the last 20 years have of necessity fostered the idea of "continuing education." To keep pace with events methods of communication have themselves had to expand and change. One of the notable ways they have done so is in the growth of abstracting services and journals of all kinds over the years. Hardly a field of knowledge now exists without its abstracting service to help its students to keep abreast of new work.

At the end of the second world war, foreseeing the need for such a service on a substantial scale in medicine, Dr. H. A. Clegg, then acting editor of the *B.M.J.*, laid plans to include a journal of abstracts in the expansion of the B.M.A.'s publishing activities. The plans came to fruition with the publication in January 1947 of the first issue in two parts, *Abstracts of World Medicine and Abstracts of World Surgery, Obstetrics, and Gynaecology.* (These were later fused into a single journal, concentrating mainly on medical abstracts.)

With the present issue, therefore, in January 1967, *Abstracts of World Medicine* looks back on its first 20 years. Though other abstracting journals for medicine and the allied sciences have since appeared, *Abstracts of World Medicine* remains unique in providing a carefully selected conspectus of the most important articles to appear in the world's periodicals. Covering as it does every country in the world that produces a medical journal, it gives in English a valuable source of information and reference for medical workers in Great Britain and elsewhere throughout the world where English is the language of medicine. In fact, as visitors abroad have often noted, *Abstracts* finds a prominent place in the libraries of medical schools in many countries where English is not the native language. Few, if any, abstracting services can be run at a financial profit, and this one is no exception. But the B.M.A. has always regarded it as an irreplaceable contribution to the furthering of medicine in accordance with the first object of the Association—"to promote the medical and allied sciences."

Some changes in its scope and content have been made from time to time. A notable feature—running now for two years—has been a series of review articles on growing-points in medicine. In the present anniversary number Sir John McMichael, F.R.S., surveys progress in medicine generally over the last 20 years. His review takes as its point of departure the state of medicine as it was recorded in the first two volumes of *Abstracts* in 1947. The amazing diversity of advance, ranging from the ceaseless invention of new drugs to the continual discovery of the gene's mysteries, certainly enriches the work of the doctor, as Sir John says, "provided he retains his habits of study and scholarship and is willing to relaem the basis of his job." The aim of *Abstracts* is to help him to do just that.

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The size of the *B.M.J.* is now so large that the two volumes it makes each year are awkward to handle. In order to assist librarians and others who bind their journals, the *B.M.J.* will appear in future in four volumes annually, numbered 1 to 4. Each will have an index. A cumulative annual index will also be available.