

CORRESPONDENCE

Correspondents are asked to be brief

Future of the B.M.A. R. G. Gibson, F.R.C.S., F.R.C.G.P.; M. Sim, F.R.C.P.ED.; E. R. Dansie, D.P.H.; J. K. Murphy, M.B.; M. Goodman, M.R.C.G.P.	Magnetic Needle Dish L. E. Tinkler, F.R.C.S.	Severe Hyponatraemia in Hyperlipaemic Diabetic Ketosis J. M. Rawles, M.R.C.P.
Hammer and Eye D. Gordon, D.M.R.D.; C. F. Eminson, D.O.M.S.	Treatment of Status Asthmaticus K. A. J. Jarvinen	Skin Reaction to Isopropyl Alcohol A. McInnes, M.B.
An Integrated Child Health Service K. S. Holt, F.R.C.P.	Viral Infection and Renal Transplant Rejection W. T. Morris, F.R.C.S.	Drugs in Infertility G. L. Foss, M.D.
P.B.I./E.T.R. for Routine Screening of Thyroid Function Margot Boss, B.Sc., and others	Immunological Responses in Pregnancy V. S. Slijvic, M.D.	Psychiatric Day Care T. M. Cuthbert, D.P.M.
Non-pharmacological Influences on Therapeutic Efficacy A. Kaldor, M.D., and others	Role of Pacing after Myocardial Infarction M. E. Benaim, M.R.C.P.	Intramuscular Injections and Coagulation Defects S. Berkessy
Nitrazepam Nightmares R. H. Girdwood, F.R.C.P.	Persisters F. S. Stewart, F.R.C.P.I.	Intestinal Pseudo-obstruction J. A. C. Neely, F.R.C.S.
Nurses for Nursing P. R. Uldall, M.D.	Safety-belt Snag C. J. McCormack, F.R.C.S.I.; M. R. Warren, M.B.; N. S. Painter, F.R.C.S.	Administration of T.A.B. A. McGregor, M.D.
Care of the Dying W. R. Moore, M.R.C.P.	Case for Free Contraceptives Jean R. C. Burton-Brown, F.R.C.O.G., and others	Clinical Freedom in the N.H.S. K. A. Exley, M.D.
Anthrax M. Ellis, F.R.C.S.	Controlling Inflation E. M. Wright, D.P.H.	G.M.C. Inquiry J. H. Marks, M.R.C.G.P., and J. S. Happel, F.R.C.G.P.
Lead Poisoning from Contaminated Opium B. L. Chia, M.R.A.C.P., and others	Serum Lithium Estimations J. G. Weir, M.D.	C.C.H.M.S. and Consultant Contract J. A. Riedel, F.R.C.S.
Hepatitis and Hepatitis-associated Antigen J. F. Ziegenfuss, M. D., and A. J. Weiss, M.D.	Compensation for Personal Injury A. J. Harrold, F.R.C.S.	General Practitioners and the E.E.C. A. J. Rowe, M.R.C.G.P.
	Cutaneous Sarcoidosis in Venepuncture Sites G. A. MacGregor, M.D.	

Future of the B.M.A.

SIR,—I, too, have hesitated for a long time before adding my name to your list of correspondents on the "Chambers affair."

I feel driven to speak now for one particular reason: for several years we have worked hard in all fields—scientific, political, and social—to build up a strong B.M.A. so that in times of crisis (or "war," if you like) we should have immediately available one single, tightly knit body to represent and fight for a united profession. That we succeed pretty well was illustrated in our confrontation with the last Government.

Yet we were always working under difficulties, for the present constitution of the B.M.A. is as dangerous as it is absurd. This has long been recognized, laughed at, jeered at, or worried about. It has, in particular, always been a matter of concern to those who are ultimately responsible for upholding the status and dignity of the profession against all comers. They know, as all thinking doctors must know, that if the B.M.A. were to fail there is no body in existence that could take its place.

In ordinary, everyday affairs the Association manages pretty well; but when building up towards a confrontation with Government or to give evidence to the Review Body everyone intimately involved is aware of the agonizing exercise entailed in achieving even an appearance of unity and of maintaining it throughout one entire episode (and episodes have a habit nowadays of following one after the other in rapid succession).

It can fairly be said that any exercise of this sort was only made to work because we knew that when it came to the crunch even the narrowest crack in our defences would be seized on by the other side with possible

disastrous and irretrievable effects on the professional lives of every doctor, whether a member of the B.M.A. or not.

Recognizing this (for it still remains a fact) what on earth are we up to now? How can any member of Council or the Representative Body, of the General Medical Services Committee, or the Conference of Representatives of Local Medical Committees openly deny that if that part of the B.M.A. which represents 75% of general practitioners severs its relationship with the parent body it is at one and the same time committing suicide and bringing down with it every other discipline in the profession—large and small.

No excuse could be found for such naivety (if naivety it be). We ordinary members of the B.M.A. who also pay our dues to the G.M.S. Trust funds—and I should not be at all surprised if those who are not members of the B.M.A. are strangely alike to those who do not contribute to the G.M.S. Committee; in other words, are doctors who, for one reason or another, are obtaining everything for nothing—would do well to breathe a word of caution down the necks of our elected delegates and representatives and to draw their attention to the fact that this is no political game they are playing on our behalf but one which, with any false, ill-advised, or ill-considered move, could result in disaster for those they represent and bring the condemnation of future generations down on their heads.

Sir Paul Chambers has courageously and predictably grasped the nettle the Association has feared to touch over the past two decades or more. Why is it suddenly so

impossible for *all concerned* to sit round a table and extract from his report a stable and secure constitution for the B.M.A.? Why is time being made to be so short? Why is it apparently so heroic to refuse to join in discussion? Who is trying to lead us where—and why?

I submit that there is too much at stake for this unwarranted haste. Even if the discussions range over two years or more they should still be undertaken. Doctors do not want to be led blindly down an alley in which there is only room for one section of the profession. On the contrary, they need assurance that their elected leaders are concerned, first and last, with the welfare and the future of the profession *as a whole*. I do not believe that any referendum is required to prove this.

For all of us who wish our profession well, and who wish to continue as members of one profession, the alternative is too dreadful to contemplate.—I am, etc.,

RONALD GIBSON

Winchester

SIR,—The acceptance of "Chambers in principle" by a very substantial majority at the Special Representative Meeting (*Supplement*, 25 November, p. 55; 2 December, p. 78), instead of ushering in a period of serious debate and readjustment, is being met in some quarters with agitated threats of resignation from the B.M.A. That the issue should become so polarized is due, in part, to the two debates that took place at the S.R.M. The first question, which was whether Chambers should be accepted "in its entirety," was very thoroughly debated and failed to obtain the necessary two-thirds