

present-day side effects of rigidity, involuntary movements, and sleepiness.

The trouble with the programme was the jargon the doctors used. The contributions of two research workers were sandwiched between introductions by the presenter, John Maddox, and his subsequent comments, which sounded as if he was translating from the original Bulgarian. Once or twice these comments opened by saying "Dr X's point is that . . ."—very necessary in a discussion that included phrases from the doctors such as "a well-known tract which goes from a small nucleus (the substantia nigra in the brain stem) up into the corpus striatum and this pathway is known to utilise dopamine as a transmitter."

Surely the doctors should have been coaxed to follow the tradition of Sherrington, Adrian, and Eccles and make their points in everyday English. Instead, I suspect that the programme was based on tape-recorded conversations in the language scientists use among themselves. Presumably these two obviously first-rate scientists were given neither scripts nor any emphasis on keeping their language suitable to a lay audience, and then an explanatory comment was added. As a result, a great opportunity was missed to show a large audience (who as taxpayers have some influence on the direction of research) what exciting discoveries are being made in a specialty that was once shamefully neglected by both research and clinical workers—SL.

DISCO MUSIC by way of introduction and the strident tone of Brian Walden didn't endear me to *The Gene Machine*, Weekend World's programme on genetic engineering (London Weekend, 5 November). Called the greatest breakthrough in biology, with the prospect of mass production of living material and cheap drugs, it was breathlessly illustrated by the usual irrelevant laboratory shots and some more helpful animated diagrams of *Escherichia coli* and recombinant genes. But it soon became clear that Mr Walden's purpose was not scientific but political: to highlight the sinister possibility of laboratory escape of virulent organisms, and exploitation by unscrupulous drug companies while governments dragged their feet. The NIH guidelines of genetic engineering were criticised for their illogicality, and the Genetic Medical Advisory Group (GMAG) set up by the MRC was accused of secrecy and a lack of urgency, in spite of its more stringent controls. Shirley Williams at least seemed to keep a sense of proportion and hoped that it might be possible to move towards agreement with the EEC and eventually to some form of international control which would include both academic and commercial interests. Sir Gordon Wolstenholme, chairman of GMAG, gently characterised Mr Walden's approach as "a bit of impatient exaggeration," and the programme was a good example of the way in which an emotional and uncritical stance "on behalf of the public" not only belittles the complexity of science but effectively obscures the evidence on which that public must make up its mind—AP.

WILL THE stockbroker who refused to wear a seat belt die from his chest injury, and did his manic driving—or his previous drinking—have anything to do with the pile-up? I suspect that we shall have to wait for the end of BBC2's eight-part drama series *Accident* before we have the answers to all the questions. During the first half of the opening episode I might have switched off had it not been for a commitment to write a review, bored by the unsatisfying and confusing "jigsaw of past and present," as the *Radio Times* puts it, and the sometimes incomprehensible dialogue. But as the picture grew it became more absorbing; and the flashbacks from the casualty department, starting months before and drawing nearer and nearer to the actual crash that ended the episode, built up the suspense.

By the end the characters had taken on some life, and I look forward to discovering the deeper reasons why they were on the road to the airport on that particular day. But will we have just

another set of TV clichés? I hope not; for if the series justifies itself as drama (or even, possibly, if it doesn't) it could be worth more than all the road safety campaigns of the Department of Transport and local authorities put together, the lessons about seat belts and so on being not moral exhortations but part of the action—DG.

VIOLENCE ON THE TV screen is a subject that worries all of us, including a couple of recent contributors to the correspondence columns of *Radio Times*. They were angry about the showing of *High Plains Drifter*, in which there were three killings and a rape in the first five minutes or so; another rape and lots more murders in the rest of it. One of the writers reasonably suggested that the "censor's certificate" (X, AA, A, or U grading) should be published in advance.

In his reply, the head of purchased programmes, BBC Television, said that, "we certainly did not take the decision to show *High Plains Drifter* lightly. We had to balance the knowledge that it was a very popular film (confirmed in the event, by the number of viewers—more than 16 million—who watched it) and that it is a film of considerable style and imagination against the possibility that some people would find the violence disturbing. It is an area of difficulty and subjective judgment." He then agreed that it was unfortunate that the billing did not give a more accurate guide to the nature of the film, but rejected outright the suggestion that the original film gradings should be published—on the grounds that "many older X films would now be classified A or AA and to label them X today could be quite misleading and confusing as a guide to selection of family viewing."

I find this viewpoint of a person responsible for buying films for BBC Television alarming, but not unexpected. Nevertheless, however imperfect a system the censor's grading may be, I strongly urge the powers-that-be at the BBC (and IBA too) to consider the idea—U and occasionally A films to be shown before 9 pm, A and AA afterwards, and X only after 11 pm. Even then, many children who would not legally be able to enter a cinema showing them will see X films in their homes, but at least it will be their parents' responsibility. In cases of doubt, perhaps a "family viewing panel" could help those making the decisions—MG.

TO WRITE A PLAY about British mental hospitals today and keep the audience laughing most of the time needs either callousness about the patients' miseries or a superb literary talent. Mary O'Malley in her new play *Look Out . . . Here Comes Trouble* (RSC Warehouse) uses her art to entertain and make you think. She shows how patients in a psychiatric ward do not have illnesses comparable with physical disease, but just cannot cope outside the institution. The psychiatrist is expected to provide a husband, new flat, or new family, and he protests that he "cannot wave a magic wand"—instead he dishes out Valium. The patients consider him incompetent because he cannot satisfy their needs under the National Health Service. It is difficult to see how Mary O'Malley keeps the audience laughing without being nasty to anyone. Psychiatrists will be grateful to her for at last understanding their plight. Although the intimacy of the theatre is a great asset to this play, it is a pity that it has been staged by the Royal Shakespeare Company in the tiny Warehouse Theatre, which holds only 200 people: it deserves larger audiences—HBV.

Correction

In the review of the television series *Let's Go* (14 October, p 1081) we regret the reference to the "National Association for Mentally Handicapped Children": the correct title is the National Society for Mentally Handicapped Children.