

naires sent to all members of the Victoria Faculty of the R.A.C.G.P.).

19. WATSON, G. I. Use of amantadine in an epidemic of 'Hong Kong' influenza type A₂ in family practice. *Practitioner*, 1970, **205**, 351-7.

20. WILSON, J. B. Influenza in general practice, 1969-1970. *Practitioner*, 1970, **205**, 360-1.

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In Memoriam

ANTHONY BEADMAN, London, W.3.
D. A. DAVIES, Tregaron, Cardiganshire.
ERNEST HARDING, Iver, Bucks.

REGIONAL COUNCILS

SCOTTISH COUNCIL

The fourth meeting of the Seventeenth Scottish Council was held at Inverness for the first time on 17 October, 1970. Professor Ian M. Richardson, general practice teaching and research unit, Aberdeen University, had been invited to this meeting and was welcomed by the chairman who congratulated him on his recent appointment. An open invitation to the members of the North of Scotland Faculty Board to be present, afforded an opportunity to debate the problems of communications within the college. This has arisen out of discussions during the preparation of a memorandum to the Academic Review Working Party earlier this year. Many points were raised and several suggestions are to be investigated. It was felt that the existing faculty representation affords good lines of communication from the centre outwards (if properly used) but only as far as the faculty board. If members are to be kept informed of college activities they must attend local meetings and it was generally agreed that this could be supplemented by short news items in the *Journal*. One request for a faculty insert will require further thought to see if it is practicable. It was accepted that communications from members to faculties and to Scottish council were also deficient and a discussion paper is to be prepared in the hope that improvements will be achieved.

Scottish council members were delighted to learn that a general practice research support unit, whose services will be available to all general practitioners in Scotland, is to be jointly sponsored by the Scottish Home and Health Department and their own council. Its aims are:

1. The provision of advisory service for general practice research in Scotland
2. The provision of certain facilities for research in general practice, by general practitioners in the various areas of Scotland
3. The provision of technical assistance and support during the planning, executive and evaluative stages of such research by general practitioners.

The unit will be financed for five years by the Scottish Home and Health Department who have laid aside a sum of up to £25,000. An initial grant from the Research Foundation Board, RCGP of £500 has also been promised. Premises for the unit and its staff which includes

a full-time statistician and a part-time general practitioner, will be provided by the University of Dundee in relation to and in close co-operation with the Department of General Practice. Steps were taken to set up an Advisory Board to further this project.

Other matters which were considered included Scottish Council's First Report on Vocational Training, issued in June 1970—organization and development of rehabilitation services in Scotland—the East Scotland Faculty Board's report on *The general practitioner and the hospital service*—medical records—computer development in the health service. Reports were received from the five faculties and from Professors Scott and Knox who had attended a European Conference on Reaching General Practice, organized by the Flemish College of General Practitioners, held in Brussels earlier this month.

At the close of the meeting a paper on *The prevention, treatment, and management of skiing accidents* was given by Dr Neil Macdonald who had been awarded the Ian Dingwall Grant Award two years ago to study this aspect of his work in general practice at Aviemore. Dr Macdonald had just received an analysis of his second year's figures and already he can show that certain types of accidents are not so frequent following action taken on inspection of the first year's figures, e.g. the redesigning of the T-bar chair lift platforms and emphasis during instruction of the paramount importance for each skier to ensure correct adjustment and proper function of the boot straps and the release mechanism (especially with hired skis).

This first meeting in the North was considered to be most successful. For many members it was a long day—some 17 hours away from home but the discussions on the train travelling north were useful. The conversation on the homeward journey was less erudite but none the less congenial and certainly entertaining.

Correspondence

Rubella

Sir,

I was appalled to read the letter by Mary Herford;¹ she lightly suggests that we might abort those women "who may" produce affected infants after checking them for anti-rubella antibodies. I too, have given this matter much thought and found your editorial in June, a very good summary of the subject. However, it seems reasonable to undertake massive immunization of girls aged 13 which is being done at the moment and I feel that one can hardly assume that a significant number of these are going to become pregnant within three months of being given the vaccine. Neither do I feel it necessary, to give these girls the contraceptive pill, which as Dr Herford so rightly points out, might be objectionable in any case to their parents. Surely this is an excellent opportunity to give these girls some health-education on the subject of sex and, to point out why they are being given immunization against rubella.

Manchester.

A. D. CLIFT.

Sir,

I would like to correct some misconceptions in Dr Mary Herford's letter to you about rubella vaccination.¹ Smith Kline & French Laboratories make no specific recommendations restricting the use of 'Cendevax' rubella vaccine to 11 to 16-year-

old girls. The Department of Health has, however, recommended vaccination for girls between 11 and 14 years but has otherwise no special advice about the risk of pregnancy in this age group. An extract from the manufacturers prescribing information should clarify matters. 'Cendevax' is indicated for "... Routine immunization of pre-pubertal girls and for use in women of child-bearing age *who are not pregnant* and in whom the possibility of pregnancy can be excluded for *at least two months* following immunization; ..." These latter precautions stem from the theoretical possibility that vaccine virus could damage the foetus when given during or shortly before pregnancy. It should be pointed out that there is at this time no evidence that this occurs with 'Cendevax'.

L. K. FOWLER.

Medical Department,
Smith Kline & French Laboratories Limited.

REFERENCE

¹*Journal of the Royal College of General Practitioners*. 1970, 20, 238.

Courses for district nurses

Sir,

The Queen's Institute of District Nursing provides a varied programme of courses for district nurses throughout the year. Some of these are general 'refresher' courses, others deal with