Each measure is easily applied and is a reflection, to some extent at least, of one or more of the criteria of rational prescribing. A doctor prescribing to 60% of patients is less likely to issue unnecessary prescriptions than a doctor prescribing to 80% of patients. A doctor who prescribes generically inevitably prescribes more economically than a doctor who prescribes only proprietary drugs. The experienced general practitioners involved in developing the limited formulary chose 137 well-tried, safe and effective drugs. A doctor prescribing mainly from such a list, eschewing 'expensive, new and fashionable preparations' would expect his prescriptions to be economic, safe and effective.

In this study the rate of antibiotic prescribing was unaffected by the educational intervention. However, the doctors had not been informed of their antibiotic prescribing rates during this intervention, and it is possible that such information might have provoked changes. This merits further research.

References

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INFECTIONOUS DISEASES
UPDATE
Sterilizing medical instruments
There is renewed interest about the most effective means of sterilizing medical and dental instruments. Dentists for example have recently been advised that boiling should not normally be recommended and that autoclaving is preferred. Hepatitis B, herpes simplex, papilloma and human immunodeficiency viruses (HIV) are generally heat sensitive. However slow viruses (causing some forms of encephalitis), spores and cysts may be more resistant. In conclusion the ideal methods of sterilization remains high pressure steam (autoclaving), or dry heat using purpose built equipment. Items that cannot be heat treated can be soaked in glutaraldehyde but this may be absorbed by rubber or plastic components and cause skin and mucus membrane irritation. The use of sterile disposable equipment, where possible, avoids the problem.

HIV
By the end of April 1987, about 5900 people in the UK were known to be antibody positive to HIV. Most infections in England and Wales were related to homosexual or bisexual practices. Of the 1166 cases in Scotland, however, 659 were related to intravenous drug abuse with a third of these cases being female. Forty-four infected infants, born to antibody positive mothers have been found in Scotland compared with 10 for the rest of the UK.

Food poisoning
The very sharp increase in salmonella and campylobacter food poisoning which occurs in the UK every summer has now begun. Some of this is due to holiday-makers contracting infection abroad but most is due to local consumption of infected meat products, particularly poultry. Studies have suggested that 'factory produced poultry' is usually infected when purchased and therefore preventing illness depends upon sound food preparation. The March edition of World Health (published by the World Health Organization) gives some food safety hints.
1. Don't prepare food too far in advance.
2. Don't undercook meat including poultry.
3. Don't store perishable food between 10 and 60°C.
4. Don't 'under reheat' already cooked foods.
5. Don't cook meat that is not fully thawed.
6. Don't allow contamination from raw to cooked foods.

Travel
A case of imported cholera occurred at the beginning of May in a child who had arrived from the Far East. Cholera is usually spread by contaminated water and therefore outbreaks in the UK are unlikely. Where the disease is endemic, principally in the Far East and tropical Africa, travellers need to take care to avoid drinks, ice and so on which may be contaminated. Vaccination is available but it must be remembered that it only gives limited protection. Life threatening malaria due to Plasmodium falciparum is imported into the UK throughout the year usually from Africa. Most benign malaria in the UK is due to P vivax imported from the Indian subcontinent. Illness from this type of infection is usually delayed until the summer months following exposure and therefore can have a long 'incubation' period. Unexplained fever and rigors presents at this time of year therefore warrant taking a travel history covering the previous 12 months or more.

Further information about these subjects can be obtained from the contributor: Dr E. Walker, Communicable Diseases (Scotland) Unit, Ruchill Hospital, Glasgow G20 9NB (telephone 041-946-7120).