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## RCGP

Research  
Funding



Applications are now being invited for grants for research in or relating to general medical practice, for consideration by the Scientific Foundation Board. In addition to its general fund, the Board administers a number of special funds including the **Windebank Fund for research into diabetes**.

The Scientific Foundation Board's definition of research is catholic and includes educational research, observational as well as experimental studies, and accepts the methodologies of social science as valid. It does not fund educational activities.

If the study involves any intervention or raises issues of confidentiality, evidence of Local Research Ethics Committee approval should be provided as part of your application, or justification given of why it is not necessary to obtain such approval.

Studies which do not, in the opinion of the Board, offer a reasonable chance of answering the question posed will be rejected. It may be useful to seek expert advice on protocol design before submitting an application.

Care should be taken to ensure that costs are accurately forecast and that allowance is made for inflation and salary increases.

The annual sum of money available is not large by absolute standards and grant applications for sums in excess of £5,000 are unlikely to be successful.

Application forms are obtainable from the Clerk to the Board at: The Scientific Foundation Board, The Royal College of General Practitioners, 14 Princes Gate, London, SW7 1PU. The Board considers applications for funding three times a year, usually in January, May and October. The closing date for applications is eight weeks prior to the date of the meeting. Information on precise closing dates can be obtained by contacting the Clerk to the Board. Any forms received after the closing date will, unfortunately, be ineligible for consideration at the meeting.

Chairman's action can be taken between meetings to approve grants of up to £1,000. This may be particularly appropriate for applications for funding of pilot studies.

## Doctors as patients

### *Magnetism and pain relief*

Sir,

After successfully completing the 1995 London marathon, my mind soon turned to pain relief. Interestingly, participants were given four complimentary, 5 mm button ferromagnets, advertised to relieve pain and stiffness. The day after the race, I experienced severe pain in both thighs and was extremely stiff. Determined to do my normal quota of surgery and visits, I used this as a unique opportunity to test magnetotherapy. In the absence of specific instructions except 'place over the painful area', I placed the four magnets, secured with plasters, at 10 cm intervals to form a square on my right anterior thigh. My left thigh was equally painful and acted as the control. I wore the magnets for 48 hours. I perceived no difference in pain, stiffness, or walking ability over the two days; both legs recovered at the same rate, and to my relief I was jogging again five days later.

Magnetism can be produced by simple ferromagnets or electromagnets. The latter are usually pulsed for medical treatments. There are a few reports on the use of magnets for analgesia. A literature search revealed only one report of the use of ferromagnets; magnetic necklaces were used in a randomized, double-blind, controlled trial and were found to have no effect on chronic shoulder and neck pain in 101 volunteers.<sup>1</sup>

Pulsed electromagnetism has been demonstrated as an effective analgesic in several studies, including the treatment of neck pain,<sup>2,3</sup> perineal trauma following childbirth,<sup>4</sup> refractory rotator cuff tendinitis,<sup>5</sup> dental analgesia,<sup>6</sup> and osteoarthritis of the knee and neck.<sup>7</sup> There seems to be no evidence to support the use of simple ferromagnets sold as alternative therapy. However, pulsed electromagnetism is worth further study for relief of chronic pain.

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