

they feel that an inaccuracy of this description may destroy the whole factual basis of Dr Baker's excellent research.

R. S. V. MARSHALL,

Honorary Secretary,

Wolverhampton

Wolverhampton Local Medical Committee

We have shown Dr Marshall's letter to Dr Baker who writes as follows:

I can well understand any annoyance felt by the doctors of Wolverhampton if they have been pressing their local authority without success for H.V. attachment and then find their city highly rated for such attachments in my survey! I sympathise with them and apologise to them.

The figures given in tables I and II were compiled from the replies received from M.Os.H. in answer to my questions. I had a long letter from Dr James Galloway, M.O.H. of Wolverhampton. In it he gave me the names of seven doctors as "co-operators" in H.V.-G.P. liaison. Questionnaires were sent to these doctors and I had replies from two of them stating that they had no H.V. attached. But I also had a reply from another doctor (not one of the seven) with a Wolverhampton address who was enthusiastic about his H.V. Seven minus two plus one, sir, makes six! This figure was credited to Wolverhampton and helps make up the sum (not totalled in the tables) of 284 H.V.-G.P. attachments. As stated and analysed in table III replies were received from 246 general practitioners who claimed to have H.V. attachments. The discrepant 38 could have been contained in the 46 questionnaires *not* returned by general practitioners. What a pity the other five doctors in Wolverhampton did not return my questionnaire!

Having now looked again through the returned general practitioner questionnaires I admit one mistake; namely, that the doctor mentioned above with a Wolverhampton address lives in a village *near* Wolverhampton and should be included in Staffordshire.

Dr Marshall and his Committee may, with justification, feel that I ought not to claim attachments without positive replies from general practitioners. I can only restate that the figures were taken from letters from M.Os.H., corrected as far as possible by general practitioner returns.

What they ought not to assert is that the inaccuracy in the Wolverhampton figure (annoying though this is) "may destroy the whole factual basis" of the rest. I hope that they will allow themselves another look at table III. This is compiled from answers from 246 general practitioners who claimed some form of attachment or liaison with a H.V. It is difficult to refute this evidence and, as I have already said, the 284 apparently claimed by answers from M.Os.H. is not so far removed from the 246 actually proved. I am sorry that six of the possible 38 mistakes should belong to Wolverhampton. There could only be another 32 possibles.

I hope that the Wolverhampton Local Medical Committee will accept this explanation and that they will be able to use the evidence of table III to bring successful pressure to bear upon their local authority in the near future.

[Editor]