when found to have a positive urine test for steroids after winning the 100 metre gold medal at the Seoul Olympic Games, was immediately declared a 'victim' by sports writers in Canada, who suggested his urine had been tampered with to give a positive result. It was even suggested that this had been done by his American rival, Carl Lewis. Clearly poor Ben Johnson had been the victim of a dastardly plot; after all had he not steadfastly refused to admit he had even taken steroids? Later at the Dubbin Enquiry Ben Johnson admitted to doing so without apparent concern for his previous denials. Despite this cheating and lying, Ben Johnson was fêted at a fair in Brantford (where Alexander Graham Bell invented the telephone), and later was allowed to represent Canada at the 1992 Barcelona Games. In the USA Tonya Harding admitted to being complicit in a coverup by withholding her knowledge of the attack on her rival Nancy Kerrigan. Tonya Harding did not explain her silence, and it would appear acceptable to cover up a crime if you did not know about it in advance. Ms Harding had in any case to overcome so many odds, being a daughter of poor working class parents and being physically abused by her husband. In short she was a victim and her sandpaper personality was evidence of the hard life that she had had. But there is no excuse for breaking the law. Representing one's country at the Olympic Games is not a constitutional right; it is a privilege. We have come a long way from 'Chariots of Fire'.

The Western world began a journey of riotous freedom in the 1960s, which has now turned into licence. There has been a decline in organized religion with many of the churches failing to take a stand against the depravity from which we now suffer. The failure of the educational system is merely symptomatic, as is the degraded and demoralizing mass media. Our political leaders are spineless being only too willing to react to the wishes of interest groups, rather than defend individual rights. Mr John Major's return to basics (we must understand a little less, condemn a little more) is like limp spaghetti when it comes to dealing with members of his own cabinet and party. The leaders of other Western nations are no better.

The recent papal encyclical disappointed the press since it dealt with morality in terms of principle rather than practice. The press would have preferred more exciting stuff. Instead the Pope said that there are absolute things in the order of existence and things that are intrinsically evil. One may not agree with all the Pope's prescriptions, but one has to respect His Holiness's diagnosis.

MISCELLANEA MEDICA

COLLEGE AFFAIRS IN THE PAST: AN HONORARY FELLOW

From Council Minutes 22nd August 1705

Dr David Gregory
admitted a Fellow

The said day a motione being made that Dr David Gregory Doctor of Medicine and Savalian professor of astronomie in the university Oxford be received into the socitie It was unanimously agreed to by the Colledge, and he accordingly Declaired a Socious with all the priviledges and immunities belonging to the Members of the Colledge And his Diploma ordaine to be made ready and given to him.

David Gregory (1661–1708) was the first Honorary Fellow to be elected for his learning and scholarship. The three previously elected were influential politicians and aristocrats. Gregory was no stranger to Edinburgh as he had been professor of mathematics at the university from 1683–91 and was a personal friend of Archibald Pitcairne (1652–1713), the most distinguished Edinburgh physician of his time. He was appointed to the Oxford chair on the recommendation of Isaac Newton. There he was distinguished for his learned writings, his teaching and as a man of affairs. His Doctorate of Medicine was an honorary degree and at no time did he study or practice medicine. However he belonged to the distinguished Aberdeen family which produced 16 professors of mathematics and medicine. His cousin, James, was professor of medicine at Kings College Aberdeen 1725–32 whose son, John, grandson, James, and great grandson, William Alison, were all three to be professor of medicine at Edinburgh.

In the eighteenth century only 46 Honorary Fellows were elected. Of these 32 were physicians, 11 noblemen and only 3, David Gregory, Hans Sloan and Joseph Banks for their contributions to mathematics and science. Then, as now, an Honorary Fellowship was a rare distinction.

REFERENCES

¹ Granger Stewart A. The Academic Gregories. Edinburgh: Anderson and Ferrier 1901.

COLLEGE AFFAIRS IN THE PAST: CONCERN FOR MORALITY IN QUEEN STREET A letter to the College Secretary, 15th September 1869.

City Mission Office 5 St Andrew Square Edinburgh

Dear Sir, I am instructed by the Committee of the Edinburgh City Mission to submit, through you to the Royal College of Physicians, the following statement with reference to the house No 12 North St David Street,—at the corner of Queen Street.

This house was for many years notorious as a moral nuisance to the inhabitants and frequenters of a most respectable locality, until May 1868 when a Sub Committee of the City Missions rented the drawing room floor for the use of their missionary to the fallen, Mr Mackie and his family, who paid one fourth of the rent and taxes,—these amounting in all to £48. At the same time, they

MISCELLANEA MEDICA

induced the agent for the bed-room floor to have it vacated at that term; and it has remained vacant ever since.

No sooner did Mr Mackie get possession than he discovered that the attic floor was still used for immoral purposes. He therefore immediately kept watch, night after night under the gas-light of his own door, quietly inspecting every one who passed up and down the stair. The consequence was that, within two or three weeks after Whitsunday, 1868 the occupant of the attic floor offered to give up his lease to the gentleman who had taken the drawing room floor for Mr Mackie. This offer was accepted, and a respectable tenant, a church officer, took the flat at a somewhat reduced rent, and he retains it this year also.

Although these changes involved an expenditure of £40 or thereby for the past year, the Committee judged it necessary to renew their efforts for another year or two, so as to prevent the risk of an improper class of tenants returning to the house. Partly with the view of saving expense, and partly to obtain a more complete command of the whole house, they thought of taking for their missionary the dining room floor,—which is on a level with the street door,—as they understood that the pawnbroker who occupied it was to leave it in May. They succeeded in obtaining a three years' lease of that floor at a rent of only £20 per annum, on condition of their making certain necessary repairs which will amount to fully £20. From the door of this floor the missionary can watch every entrant so effectually as to preclude the risk of the former class of tenants taking any of the floors above him; and thus, long before the expiry of his lease the house will be purged from its taint, and the locality freed from all apprehension.

In meeting the expenses incurred by them last year, the Committee were liberally aided by the Head Masters of the Edinburgh Institution,* the Directors of the Philosophical Institution, the Finance Committee (or Trustees) of the Queen Street Hall, and by other gentlemen who, from the situation of their chambers, are interested in the purity and respectability of the neighbourhood. They confidently look for a repetition of this liberality for the present year only,—or, as in the case of the Royal College of Physicians, for a single contribution,—in consequence of the large sum that has to be paid immediately for the repairs. The excess of rent and taxes, beyond what the missionary can afford to pay amounting to £6 or £7 per annum, will be borne by the Committee themselves for the remainder of the lease.

I am, Dear Sir, Your obedient servant, Alasdair Millar, Superintendent of Edinburgh City Mission.

N.B. The Head Masters of the Edinburgh Institution have just contributed £5 towards this year's expenses. A.M.

Received from the Royal College of Physicians per Dr Somerville, Treasurer, the sum of ten pounds sterling, being their contribution towards promoting the amenity at the corner of Queen Street and St David Street.

On behalf of the Committee of the City Mission, Alasdair Millar, Superintendent. Edinburgh, 16th October 1869.

COLLEGE LITERATURE

The College is grateful for the gifts of four books written or edited by Fellows which are now in the Library.

*The Edinburgh Institution was a school which then occupied No. 8 Queen Street. It moved to Melville Street and later it merged with Daniel Stewart's to become Stewart's Melville on Queensferry Road.

The Intervening Years by N. C. Begg (Dunedin, New Zealand: McIndoe Ltd., 1992, p 316) is an Anzac saga and fascinating bedtime reading. It tells the story of a Scottish family which carried its culture and traditions across the world to New Zealand. The author, Neil, like his father Charles, is a Fellow of the College. Both father and son returned to Europe as medical officers with the Anzac forces and took part in bitter fighting, the one in Gallipoli in 1915 and the other in Italy in 1944–45. These experiences made them both enthusiastic Kiwis but each cherished their Scottish roots. Sadly Charles died in February 1919 in the great influenza epidemic. Neil returned to New Zealand and has had a distinguished career in child health, greatly extending the pioneer work of Truby King. The story has numerous diversions into New Zealand history and travel and about many Maori friends. It is a tale which raises the spirits because it shows what the people of a small country can achieve with energy and determination, despite the population being a mixture of two races of very different traditions, and despite some prime ministers with rather woolly heads.

R.P.

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The Raj and Medicine in India (1994 Chhuttani charitable trust, Chandigarh, India pp 172 Rs 150, £7.00) is the autibiography of a Fellow of the College, Amir Chand (1889-1970), published now for the first time. The grandson of a landowner and the son of a government official, he was born in Ludhiana, Punjab, and educated at the Lahore medical college. Coming to England he passed the then highly competitive exam for entry into the Indian Medical Service on 1st August 1914. The army claimed him at once and it was many years before he entered academic medicine, first in Amritsar and in 1936 he became professor of medicine at Lahore. As a Hindu he and his family were forced to leave at the Partition, and after harrowing experiences settled in India. There he became the doyen of the medical profession, being President of the Indian Medical Association and of the Association of Physicians of India and a member of the Indian Medical Reserch Council. Amir Chand was a natural rebel all his life, with high personal standards and a ready pen. His book is scathing about most of his colleagues, both British and Indian, in the IMS and of the service for which they were responsible, but he could not have been more appreciative of the help and support of three British officers at critical stages of his career. The book is a valuable source for historians of the British Raj and of medicine in India and of the outlook of a thoughtful nationalist. There is also a long and entertaining account of how he passed the MRCP exam in Edinburgh. True to his character there are very hard words about some examiners and much appreciation of the kindness which others showed to him.

R.P.

* * * *

Muse in Torment by Alex Mezey (The Book Guild, £12.95) is an analysis of the creative works of writers who have presented evidence of psychological dysfunction and looks for the effects of this psychopathology in their creative output. The writers studied are necessarily limited to those who left diaries and letters describing their lives and feelings, or who had others around them recording in detail their lives. These are the sources of the data used by Dr Mezey for his

psychoanalysis and for his reports of analysis by others. This book is very readable and not littered with psychoanalytical terms, and uses liberally extracts from the works of the writers discussed to illustrate the argument. The book is structured not upon individual writers, but upon psychopathological themes and underlying causes of the psychopathology are discussed. Some like neurosyphilis and upbringing by nurses due to distant parents are less well-recognised today, whereas others like psychiatric illnesses, traumatic experiences, unrequited love and substance abuse are easier to recognise as still being prevalent today. It will be interesting to look back on the effect of contemporary chronic illnesses such as HIV infection and cancer and observe the psychological sequelae of these on the output of creative writers. This is a thought-provoking book which does not argue that psychological upset can be responsible for creative ability, but that the two are synergistic.

J.S.P.

Edinburgh's Contribution to Medical Microbiology by Charles J. Smith and edited by J. G. Collee (Wellcome Unit for the History of Medicine, University of Glasgow. Publication No 7, 1994, £20) begins with the story of how Joseph Lister, in 1870 at the Old High School/Surgical Hospital in Infirmary Street, infected his houseman, William Cheyne, whose paper Micro-organisms in surgical disease appeared in the BMJ in 1881. In 1884 Pasteur visited Edinburgh for the University Tercentenary and in 1887, the Royal College of Physicians' laboratory opened in Lauriston Lane moving to Forrest Road in 1896. Introduced for the purpose of research, it also provided a bacteriological service until 1902 when this was moved to the Usher Institute, but the research continued until 1950. In 1913 the Robert Irvine Chair of bacteriology was founded and first was filled by James Ritchie whose department had previously camped in the department of pathology in the medical school. The development of the department by five distinguished professors, Ritchie (1913-23), T. J. Mackie (1923-55), Robert Cruickshank (1958-66), B. P. Marmion (1968-78) and J. G. Collee (1779-91) is fully documented. The author is well known for his books on Historic South Edinburgh. Like these, this book is informative, entertaining, lavishly illustrated with photographs and peppered with stories of old and not so old people and places. The laboratories of the Royal Infirmary, the Sick Children's and City Hospitals, the Municipal Hospitals, the Astley Ainslie and the Lister Institute are all described. Drs Gould, Watson and Milne elaborate on the Central Microbiological Laboratories; Hamish Inglis records the origins of the regional Virus Laboratory and Professors Crofton and Duguid chronicle matters historical including tuberculosis. There is something in this book for everyone to remember and rejoice in.

A.G.L.

A NEW JOURNAL

Health Care Analysis, a quarterly journal, first appeared in 1993. It publishes articles on research on any topic relating to the philosophy, the policy and the delivery of health care. Papers relating to law and health care and conceptual issues in nursing are also welcome. The editor is Hilary Seedhouse of the University of Auckland, New Zealand. The journal may be ordered from John Wiley & Sons, Baffins Lane, Chichester PO19 1UD.

THE LONDON COLLEGE

Anyone walking to the College through Regent's Park this summer will have been amazed at the recreation of the Victorian pleasure garden designed by Nesfield in 1863. A profusion of tazzas, vases and fountains set among elaborate, gaudy coloured flowerbeds almost blind the eye; but after crossing the road the College's own peaceful garden and the rose beds in the St Andrews Place precinct restore the retina's raped rhodopsin, allowing the visitor quietly to examine two new portraits on the lower ground floor: one, painted by David Poole, of Dame Margaret Turner-Warwick, the previous President, the other of David Pyke, the previous Registrar, painted by Sue Ryder.

On the way upstairs to the Osler room, it is worth pausing at the display cases showing Sir Denys Lasdun's architectural plans for an extension to the College which will provide a 100 seat lecture theatre and a Council chamber for 75. The latter has become a necessity as a result of the decision to abolish the poorly attended quarterly meetings of Comitia and replace them with a more representative annual general meeting of Fellows: an enlarged Council will now assume more immediate responsibility for preparing and implementing College policies and assessing reports of committees and working parties before publication.

In the Osler room itself, the visitor's eye will be drawn to two large abstract paintings; one by John Hoyland, owned by the College since 1968, the other by Basil Beattie, recently loaned to the College by the Arts Council. The two paintings give warmth and colour to an otherwise drab wall space and will no doubt provoke a variety of comments at College dinners. Dr John Horder, a Fellow and a former President of the Royal College of General Practitioners, has donated two water colours of the College painted by himself, and we hope from time to time to add more pictures painted by some of our gifted colleagues to take their place beside the many portraits of good and great, but mostly dead, doctors.

A Knighthood was conferred on the President in this years' Birthday honours. Four weeks later Professor Sir Leslie Turnberg gave the address of welcome to the new Fellows of the R.C.P.s of Glasgow where he himself was one of the new diplomates.

We elected three new Honorary Fellows this year: the Countess of Limerick CBF, Chairman of the British Red Cross; Denis Noble FRS, professor of cardiovascular medicine at Oxford University and a founder member of Save British Science; and Elsie Widdowson FRS, a name to conjure with in nutrition science.

The high spot of the year's eponymous lectures at the College is the Harveian Oration, given this year on St Luke's Day by Professor Dame Margaret Turner-Warwick, on 'The marvel of the lung and human responsibility'. Dr Samuel O. Thier, President of the Massachusetts General Hospital in Boston, used the occasion of the annual Lilly lecture to consider 'The social and scientific value of biomedical research', a topic of much anxiety in many countries and only partly assuaged in the UK by the recently published recommendations of the Culyer report. The tide of reform sweeping over the health services of the western world prompted a College conference on 'Health care: international comparisons', at

which speakers from the UK, continental Europe, USA, Canada and Australasia spoke of the problems posed by the rising demands and costs of patient care and the attempts to solve them in their own socio-political settings. The proceedings of this conference will be published as a book edited by Dr Roger Williams.

College conferences and meetings in London and around the country, from Carlisle in the north to Swansea in the south, from Huntingdon in the east to Belfast in the west, continue to attract sizeable audiences; they are open to consultants, junior doctors and medical students, the latter two groups helped by grants from charitable and other organisations. As in previous years, the Advanced Medicine conference was fully subscribed, mainly by consultants eager to keep up to date, while the Science and Medicine conference was well attended by junior medical staff, medical students and members of the Medical Research Society, preparing themselves to apply the fruits of medical research to their clinical practice in the next millennium.

It has become necessary to publish the Journal six times a year instead of quarterly and the list of other College publications continues to grow apace, with reports on 'Health care for people of ethnic minorities', 'Part-time work in specialist medicine' and 'Rationing of health care in medicine' among many others; also guidelines on the management and/or audit of stroke, angina and gastrointestinal haemorrhage; books on current themes in rheumatology, diabetes care and in allergy and immunology, and 'Horizons in medicine'; and Dr Alec Cooke's autobiographical account of his 75 years of medicine.¹

The College bade farewell to three Censors and welcomed three new Procensors; it accepted Professor Brian Pentecost's resignation as Linacre Fellow and realised that two people were needed to do this work: Professor John Wass, the new Linacre Fellow, will be responsible for developing GPT programmes on behalf of the College, and Professor David Shaw will coordinate JCHMT activities for the four Medical Royal Colleges. Dr Robert Mahler decided it was time to stand down from the editorship of the College Journal and has handed it over to Professor David Kerr.

R. F. MAHLER

REFERENCE

¹Cooke AM. My first 75 years of medicine. London: Royal College of Physicians, 1994.

THE GLASGOW COLLEGE

In November 1994 Sir Donald Campbell leaves the Presidential Chair after two years of hard grafting in the job. There are perhaps few who realise the workload and the onus of responsibility on College Presidents. The College will no doubt express its thanks to Sir Donald at the end of the Annual General Meeting in November 1994 and will in turn welcome Professor Norman MacKay as the new President, the first President to embark on a three year term of office. The college has also approved the appointment of Vice-Presidents (both Medical and Surgical) to assist with the routine of college business.

College 'busy-ness' has been very apparent in this past year. On the educational side the success and repetition of the International Surgical Forum has led

to the organisation of an International Medical Forum for April 1995, under the aegis of Professor C. D. Forbes of Dundee and Dr Ian Boyle of Glasgow. Stroke disease, cardiovascular disorders, asthma, oncology, diabetes and osteoporosis will be the main topics to be presented and discussed. The policy document on Continuing Medical Eductaion for Physicians, a joint production by the three Royal Colleges has been circulated widely and discussed in detail. The philosophy of CME is the Colleges' reaction to increasing Governmental and public sensitivity of the high standards expected of the nation's specialists.

All Fellows have been pleased to note the appointment of Mr Colin MacKay, currently Vice-President Surgical in the Glasgow College, as Chairman of the

joint committee on Higher Surgical Training.

The Clinical Skills Laboratory, opened early in 1994, has been extensively used for surgical training, and even physicians have been allowed to look through the key hole to see the evolution of new surgical techniques.

Another publication of interest was Long term care of frail elderly people, which followed a workshop, organised jointly by the Glasgow and Edinburgh Colleges and the British Geriatrics Society. It makes recommendations about NHS institutional care, and the need for multi-disciplinary assessment of elderly people, and observed that upwards of 15 per cent of the Scottish population are now over 75, and that the proportion is increasing.

Of more local interest is the establishment by the Council of the College of a Court of Patrons to develop appropriate links within the City of Glasgow with business, commerce and the arts. The College maintains its links with the visual arts, and will shortly be awarding its annual prize at the 133rd Annual Exhibition of the Royal Glasgow Institute of the Fine Arts. In the course of the year College has acquired a large bronze medallion of David Livingstone, some 18 inches in diameter, the work of the sculptor James Pittendrigh Macgillivray (1856–1938), and this will be placed in the Livingstone Room of the College extension at 232 St Vincent Street.

Despite the extension of College premises there was insufficient room for all new diplomates at admission ceremonies. This sad fact was recognised early in 1994 and arrangements were made to use the spaciousness, grandeur and beauty of the Bute Hall of the University of Glasgow for the admission ceremonies in March 1994 and again in July. At the July ceremony diplomates, their families and friends were received and entertained, and the address of welcome was given by Sir Leslie Turnberg, President of the Royal College of Physicians of London (published in the College Bulletin of October 1994). Prior to the ceremony small parties and groups of families and friends were shown around the College premises at St Vincent Street. Because of current structural repairs the College could not be available this year for Glasgow's Open Doors Day. Throughout the summer months repairs have been carried out on the roof, the chimney heads and the front facade of the older parts of the premises. Inevitably in buildings dating from 1825 there had been deterioration in stone and wood, rafters and joints, and like the Forth Railway Bridge, maintenance becomes a continuous (and expensive) challenge. Acknowledgement is made to Historic Scotland for substantial

assistance towards the restoration of external and internal appearances in the

Bi-monthly publication by Council of its Newsletter has been welcomed as a more rapid means of communication with the fellowship. The monthly College meeting which would, ordinarily, be the principal means of communication of College affairs, is attended by decreasing numbers of Fellows and Members. This is an unfortunate trend, probably related to demands on time and to clinical commitments, and it could be that National Health Service Trust Hospitals have brought new pressures to bear upon their staff members. Meetings in the city in the late afternoon have become a great problem for individuals. Council has been greatly concerned by the falling attendances, and has searched for better ways of involving more and more of the Fellows and Members in the corporate life.

The College Bulletin's new format, and especially the inclusion of a section of colour photographs, has been well received. The College, at the top of Blythswood Hill in St Vincent Street, is a grey edifice in a grey environment. The Saltire flies, and the College ensign flies occasionally, and they offer flickers of colour against the flat monochrome. The Bulletin tries also to add more colour, equating this, hopefully, with liveliness. As the motto says 'Non vivere sed valere vita', especially vita.

IAN D. MELVILLE

Letters to the Editor

A NEW ERA IN THE DIAGNOSIS OF BLADDER CANCER. THE BELATED CONFIRMATION OF HUBERT HUMPHREY'S DISEASE

Sir, When Hubert Humphrey, the American Vice-President, developed bladder cancer, the consensus of several skilled pathologists favoured a benign lesion although Dr John K. Frost declared the condition was malignant. His physicians settled for a conservative regime during which untreatable malignancy supervened. His history can be summarised as follows. In May 1967 he was admitted to Bethesda Naval Hospital with haematuria, Cystoscopy showed chronic proliferative cystitis and a microscopic focus of dysplastic change. The urinary sediment cells were thought to be benign. In 1969 a biopsy showed in situ carcinoma and he remained without symptoms for a further four years when another biopsy revealed in situ transitional cell carcinoma with a focus of probable microinvasive carcinoma for which he received both radiation therapy and intravesicular thiotepa. In August 1976 a biopsy showed infiltrative carcinoma and lymph node metastases were present at radical cystectomy. Humphrey died of cancer on January 13 1978. Had he lived the course of history might have changed.

What now is the best way to detect early bladder cancer? In 1987 Mullis discovered the polymerase chain reaction (PCR) by which specific regions of DNA can be copied and amplified, making possible a new approach to the study of genes. In 1991 Sidransky¹ working at the Johns Hopkins, with colleagues from other hospitals, studied invasive bladder cancer for the presence of gene mutations in the p53 suppressor gene! They suspected that the chromosome 17p deletions in bladder cancers reflected underlying mutations in the p53 suppressor gene, p53 gene mutations having been observed in other human tumours with 17p deletions. Eleven of eighteen tumours showed genetic alteration of the p53 gene. Amino acid substitution and base pair deletion were noted, leaving the affected cells with only mutant forms of the p53 gene product. They examined also the urinary sediment from three of their pateints and identified and found in them the same mutation as was in the primary tumour. A small but significant percentage of sediment cells, between 3 and 7 per cent, contained the mutation.

In 1994 Hruban and colleagues,2 with the permission of Humphrey's widow, obtained formalin fixed paraffin blocks of the invasive bladder cancer resected in 1976. Exons 5-9 of the p53 gene were amplified by PCR and revealed, after cloning and sequencing, a transversion from adenine to thymine. Next they extracted DNA from cells on the filters prepared from Humphrey's urine when he presented in 1967. Their results showed that a number of cells in Humphrey's urine in 1967 harboured the same mutation in p53 that was present in the resected primary carcinoma in 1976. Thus these genetically abnormal cells were present two years before a diagnosis of carcinoma in situ and nine years before Humphrey underwent cystectomy.

Hall, Dowell and Lane³ point out that PCR techniques are costly and are applicable only to a few laboratories.3 Their approach is based on the over expression of the p53 protein in a wide range of malignant tumours. They recommend the use of immunohistochemistry as an adjunct in the diagnosis of 'borderline' biopsies. Culliton⁴ mentions that mutations of another tumour suppressor gene on chromosome 9 are linked with some bladder carcinomas and