

to encourage or indeed permit detailed publication in the lay press of scientific data that should first appear in medical journals. We believe that there may be enough interest in general discussion of topics that are of legitimate public interest. This is being tried as an experiment, and experience will show whether or not there is good reason to repeat it. Another initiative we plan with the media will involve occasional lunch time meetings with one or two correspondents. Their principal purpose is to establish contact which will aid liaison in the future rather than to seek publicity over current issues.

We consulted the Royal College of Physicians over the title for the new post of specialist career advisor. The suggestion of Postgraduate Dean might, it was felt, cause confusion with Regional Postgraduate Deans. We have therefore accepted advice that Howard Swanton should be known as Postgraduate Cardiology Advisor. We hope that members of the society or indeed others seeking a future in cardiology will consider consulting him if they need specialist information that can supplement the help they will receive from Regional Postgraduate Deans: we do not seek to duplicate a service that is already available and of proven value.

Members of the society should now be aware of the need to register completion of specialist training in cardiology with the General Medical Council, although the entry will show only T(M) for general medicine. Many currently in consultant posts did not have the opportunity to become accredited because the scheme did not exist during their training years. For an interim period all who have been appointed to a consultant post with the agreement of a representative of one of the medical Royal Colleges can obtain registration. This clause should embrace all who hold National Health Service contracts at consultant level. Those wishing to take advantage of the "grandfather clause" (the name was invented by one more considerably distinguished than ourselves) should write to the registrar of the college and should receive in return a copy of a formal letter to the General Medical Council. We suggest you take this action without delay.

A meeting was held at the Royal College of

Physicians in February for National Health Service managers entitled "New Approaches in Cardiology". The programme was arranged by Michael Petch. The topic of heart transplants led to a lively discussion, especially on cost implications. Other presentations dealt with thrombolysis, angioplasty, electrical treatments, training, and academic cardiology. This was a useful meeting. We do not do as much as we should to give our administrators the background information they need. The increase in the cost of pacemakers (modest we hope) that will almost certainly occur because of the closer financial ties with Europe from 1992 was news to many. A show of hands indicated that few had been warned of this by their local cardiologists. That seemed a good indication of a failure of communication that is worth pondering. Perhaps some cardiologists are not aware that harmonisation (which is the appropriate jargon word) will bring some financial penalties?

Two health authorities have been told by the National Health Service Executive that they may not readvertise senior registrar posts when they fall vacant. Three posts are involved. This has been brought to our attention only in the last week or so, though one letter was received in December. There was a clear implication that these particular changes, needed in order to meet imposed quotas, were agreed at a JPAC review in consultation with the specialty. This is not so. The Royal College of Physicians, the Specialist Advisory Committee, and the British Cardiac Society were all unaware of the action that had been taken. Our numbers are approximately correct by the formula of the Joint Planning Advisory Committee, but may not take account of the arbitrary 20% "top slice" removed from our allocation for the research pool (which is not specialty specific). We have disputed the need and the logic of this curious system that may underlie these recent cuts. We believe that any action to cancel a senior registrar post should be the subject of negotiation with the specialty, and we hope that the National Health Service Management Executive will have second thoughts about the wisdom of actions taken without appropriate consultation. "Achiev-

ing a Balance" can be made to work effectively only if a spirit of cooperation is maintained. We have striven to play our part. If any readers know of further actions of this type we would like to know without delay.

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NOTICES

1991

The Annual Meeting of the **British Cardiac Society** will take place at the Scottish Exhibition Centre, Glasgow on 30 April to 3 May. The closing date for receipt of abstracts was 10 December 1990.

XVIII Argentine Congress of Cardiology will be held in Buenos Aires on 18 to 21 September: Sociedad Argentina de Cardiologia, Azcuénaga 980, 1115 Buenos Aires, Argentina (Fax: +54-1-961 6020; Tel: +54-1-961-6027/29).

12th international symposium on **Computer Assisted Decision Support and Database Management in Anaesthesia, Intensive Care and Cardiopulmonary Medicine** will be held in Rotterdam on 2 to 4 October: Dr Omar Prakash, Thorax Anaesthesia, Thorax Centre, Erasmus University, 3000 DR Rotterdam, The Netherlands (Fax: 31-10-463 5240; Tel: 31-10-463 5230).

1991 Pfizer international research symposium on **Epidemiology of Peripheral Vascular Disease** will be held in Edinburgh on 31 October and 1 November: Clare Perry, Edinburgh Post-Graduate Board for Medicine, Pfizer Foundation, 11 Hill Square, Edinburgh EH8 9DN (Tel: 031 650 2610).