LETTERS TO THE EDITOR

Mexico, I would, however, hesitate to encourage small hospital laboratories to culture mycobacteria. Since most of such laboratories will obtain positive cultures at best only a few times a year, their staff cannot gain and maintain enough experience with the procedures involved and with the evaluation of the results to make dependable statements.

I can clearly see why physicians and administrators in small hospitals want to know immediately whether a patient with symptoms and x-ray findings, suggestive of tuberculosis, carries acid-fast organisms in his sputum. Therefore, they may rightly expect their own laboratories to contribute toward making a diagnosis by doing acid-fast or fluorescent stains. If the findings are convincingly positive, isolation of the patient is called for and can be justified for the time being. But, in order to arrive at a definite bacteriologic diagnosis, duplicate specimens should be sent at once to a highly competent laboratory where materials are examined for mycobacteria, and positive findings made, often enough to ensure that the workers are fully acquainted with the difficulties of mycobacteriology.

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TO THE EDITOR:

The title "Pimps, Prostitutes and Policemen: Education of Consumers for Participation in Health Planning" is an unfortunate title. It is quite "catchy" and emotional. It tends to lump all three activities in the lead of the title into one category. Certainly it is unprofessional and not objective.

I was quite naive when I turned to the article, expecting to read about "parasites" (the prostitutes and pimps), and some kind of cooperative effort between public health personnel and the police to work toward a solution to the problem. I had visions of a new approach to VD and vice squads. I really found little in the article to commend it for publication; the three articles preceding were much better.

Perhaps Mr. Paul Henry should be advised that rhetoric (see Webster's Seventh New Collegiate, definition 2b), is in oversupply right now, as is the provocative association of groups or "classes." Also, see Agnew, Spiro, for further examples.

I am writing simply as a person, perhaps a consumer, if you will. I am quite well qualified to criticize, by the way. My work is in the lowest class neighborhood, where I also live. As to Curriculum Vitae, I am sure that Mr. Henry and I would meet as equals, although he might be a better typist.

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TO THE EDITOR:

Dr. William J. Curran, writing in the November, 1970, issue, comments, in general, about the cost resulting from the problem of medical malpractice. He lists some of the conclusions of Senator Abraham Ribicoff's subcommittee report on this problem, several of which relate to the funding of the increasing premiums via the consumer dollar.

Another factor in the cost of the provision of medical care is the increasing use of various diagnostic or laboratory tests (in or outside of a hospital). In some instances, this may be a mechanism for protection. In other instances, excessive tests result from the context in which the medical practitioner finds himself today wherein a disease must be identified—often yesterday—even if such identification has no practical or therapeutic value.

A third factor in the test-routine is