

The Police Surgeon **SUPPLEMENT**



Vol. 15 DECEMBER 1983

ASSOCIATION OF POLICE SURGEONS OF GREAT BRITAIN

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AN ATLAS OF NON - ACCIDENTAL INJURIES IN CHILDREN

A collection of illustrations from past issues of 'The Police Surgeon'.
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THE POLICE SURGEON SUPPLEMENT

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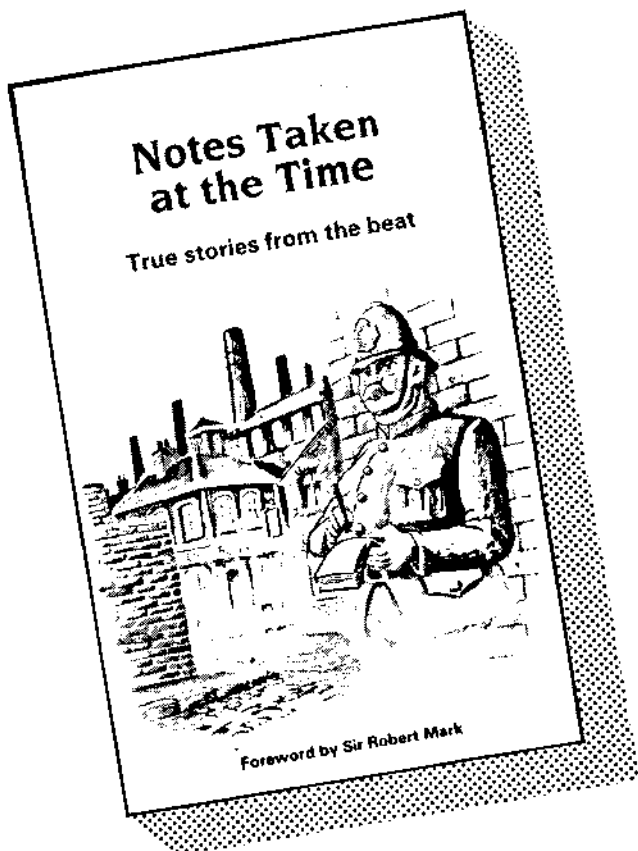


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A police officer asking permission to consult a pocket book in court is invariably asked by the judge or magistrate: 'Were the notes taken at the time?' The notes in this book were. From a tangle with an escaped monkey to an encounter with a nightie-clad lady on the doorstep, from a hunt for a runaway snake to a sudden death in Woolworth's — 40 police officers recall one incident in their career that sticks in their mind.

The book is illustrated by PC John Whittaker of Cheshire and introduced by Sir Robert Mark. Authors' royalties will be given to the Police Pensioners' Housing Association.

In his foreword, Sir Robert Mark says of *Notes Taken at the Time*: 'The stories in this book . . . do not deal with the usual police headline topics . . . But they are unpretentious, enjoyable and they do reveal the personalities behind the uniform — or the plain clothes.'

Notes Taken at the Time would make an ideal present for anyone interested in police work — or buy a copy for yourself, and relax.

ORDER your copy now. Price £2.50 plus 30p ppst and packing from Police Review Publishing Co. Ltd., 14 St. Cross Street, London EC1N 8FE.

HILTON'S LINE



Photo: Current Practice

The season seem to roll by with ever increasing speed! After a glorious summer — who has not enjoyed the long hot sunny days? — autumn is in the air, the harvest is gathered in and we settle ourselves down for the winter's activities. The fields round my home have been cleared of grain and the air has been heavy with the smoke of burning straw. Not very pleasant for the householder as the wind has blown quantities of blackened fragments through all the windows. There are straws in the wind too as far as Association affairs are concerned. The Lion Intoxemeter has now been in use for four months and the effects are being felt in all areas. The summer heat was responsible for a number of machine failures so that many were as busy as ever with blood sampling. The police operators are naturally wary of their new toys and have been referring cases for blood sample whenever there was any doubt. At the same time a number of 'clients' have requested a blood test where their breath reading has fallen between the 40 and 50ugm levels.

Overall it seems that this side of our work has been reduced to about 25-30% of our usual numbers. You may know that some areas are participating in a sur-

vey of the reasons given why a doctor is called to take a blood sample. The results should make interesting reading and so far we seem to have had the ready co-operation of our police colleagues. It will be some time before we will be able to assess the effect on our membership.

WOMEN DOCTORS

The recruitment of women doctors for the examination of females in sexual assault cases is another contentious issue. Some areas have been active in making such arrangements while other forces have no wish to disturb the already very satisfactory service that they get from their police surgeons. It is something that will have to be considered very carefully. There is nothing to replace experience in rape cases and the complaints may receive less than justice if an inexperienced medical witness appears in Court to undergo robust cross-examination. The concept of dual examinations, i.e. a woman doctor performing the intimate parts of the examination with an experienced police surgeon also present seems to me to be fraught with danger. What price the trace evidence?

When one has come across any complainant who has specifically requested a female examiner or who has objected to or complained of the treatment she has received it is difficult to understand what all the fuss is about. Do these ladies object to a male doctor when they seek treatment for a gynaecological condition or for cervical smears, or the pill? The Thames T.V. programme has a lot to answer for.

Insurance

Elsewhere in The Supplement you will find details of the Accident Insurance Scheme which has been devised entirely for the benefit of members.

This arose when a long serving and much respected colleague injured a leg when getting out of his car to attend his local police station. He was laid up for several weeks with all the inconvenience and expense that goes with such an injury, to say nothing of the pain and anguish. He found to his great dismay that he was not covered by any insurance for such an accident. Enquiries to his police colleagues revealed that no insurance existed on their side that would cover him. He was not a little put out to discover that The Association had not given any consideration to the potential dangers that exist when a police surgeon is going about his duties. What would happen, for example, if a doctor was injured during a fracas in a police cell?

This seemed to me to be a serious omission in the services that The Association should provide for its members and I made early contact with Mr. Clive Bischoff who has negotiated a policy with The Norwich Union. The terms are most advantageous and will provide cover for any incident which arises from the time of leaving your base until your return when on a police call.

So far very few enquiries have been received and it is essential for the scheme to become workable that many more members take up the offer. I recommend it to you very strongly. The policy is tailored to your needs and exists solely for your protection. It makes sense.

Incidentally I know from personal experience the excellence of the advice and guidance given by Clive Bischoff on all practice and financial matters.

I have just returned from our autumn meeting in Cardiff. One can say without hesitation that it was a highly successful event. A very good attendance, many new and younger faces, first class programme with lively discussion, enjoyable evenings in the bar and excellent fare. The whole mixture organised and supervised in a quiet almost imperceptible manner by Lawrence Addicott. (I think we will have to re-name him Mr. Unflappable!) Many congratulations, Lawrence, — I am sure you will feel that all the hard work was worthwhile and we are indeed grateful for all you have done. There was a really good turnout at Cardiff and I hope to see just as many and more at the Annual Meeting in Peebles in May.

JAMES HILTON

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JOHN A.G. CLARKE

John Clarke died on Saturday, August 13th, aged 57 after seven weeks in Wordsley Hospital following a stroke.

I first knew John in 1965 when he became Assistant Secretary of the Association. He was responsible for the 15th Annual Conference at Scarborough and the extremely popular 16th Conference in Amsterdam. Meanwhile he had become Honary Secretary in January 1967, a post which held until 1976.

After his appointment John swung immediately into a ceaseless round of work and negotiations on behalf of The Association. He was full of original ideas. He took The Association by the scruff of its neck and thrust it into the fore-front of progressive thought and action in clinical forensic medicine. His was the inspiration for: revision and modernisation of the constitution; the formulation and implementation of a proper contract of service nationwide; the institution of a realistic pay structure which he negotiated with consummate skill, the benefits of which continue to this day; the promotion of the proper appointment of police surgeons, and their conditions of work with memoranda and plans for the provision of adequate accommodation facilities; the production of the Aide Memoire; co-operation with A.C.P.O., The Home Office, B.M.A.D.H.S.S., and many other bodies. His work in the secretary's office was prodigious and he travelled the country dealing with individual problems and difficulties. No member who sought his help in any problem was ever turned away.

He laid the foundations and carried through the full development of a viable and nationally accepted police surgeon



service. He recognised from the educational needs of its members. The contents of the annual meetings and symposia are a reflection of his wide vision and a living monument to his incomparable abilities. He stands as a giant in the history of the Association of Police Surgeons and was the driving force that elevated the Association to the high position which it holds today. Succeeding generations of police surgeons will have cause to be grateful for the energy and foresight of John Alexander Clarke.

It is significant that St. James' Church Dudley was filled to capacity by people from all walks of life who had come to honour him. To his widow, Sue, and all his family we extend our deepest sympathy, and we share their grief in the loss of this great and kindly man. J.H.

A J.A.G. Clarke Memorial Fund has been established to endow a hospital bed in John's memory. Contributions should be sent to:-

*Mr. Peter Tilley
21 Mansfield Road
Lower Gornal
Sedgley.*

Hon. Secretary's Report 1982 - 83



Reference to the 'Police Surgeon' Supplements Autumn 1982 and Spring 1983 give details of the wide ranging activities of the Association and it's members during the year.

Shortly after a successful Conference at Torquay were saddened to hear of the sudden death of Dr. Henry Rosenberg OBE and during the year I regret to report the deaths of the following members:

Dr. D.C. Arthur

Dr. B. Beeson

Dr. J.S. Cameron

Dr. G.E. Crawford

Dr. G.B. Lamberty

Dr. R.N. Midha

Dr. J. O'Connell

Dr. P.M. Scott

Dr. R.P. Shukla

In addition to the Annual Conference at Torquay there were held an Autumn Symposium at Stirling in September 1982 and the 1st Cross Channel Conference on forensic medicine at Rotterdam in March 1983 (the latter in liaison with the Forensic Medicine Society and the Forensisch Medisch Genootschap). Both meetings were well attended the latter attracting a contingent of 100 members (including wives) from this side of the Channel. Both these events are reported fully in the Supplement.

At regional levels the Association co-operated with the Forensic Science Laboratories and Police Forces in organising meetings for local police surgeons attached to the following Forces:

Metropolitan Police

Avon & Somerset Constabulary

Essex Police

Wiltshire Constabulary

Sussex Police

West Midlands Police

Merseyside Police

Royal Ulster Constabulary

The President and myself enjoy attending these local meetings as it is not only an opportunity for meeting the grass-roots of the membership, but it is also an opportunity to recruit new members and persuade established members to join us at some of our larger meetings and Conferences.

The President visited the Province of Northern Ireland and in addition to meeting members of the Branch gave a talk on Child Abuse to which local Paediatricians had been invited.

DMJ

During the year the following members have been successful in obtaining the Diploma in Medical Jurisprudence.

July 1982 (clinical)

Dr. R.A. Bunting Bristol

Dr. J. Crane Belfast

Dr. Ping Yan LAM. (Clin et Path)
Hong Kong

Dr. I.S. Muir. (Met) London

January 1983 (clinical)

Dr. S.G. Abu Belfast

Dr. B.K. Lightowler Stockport

Dr. A. J. Lyons (Met) London

Dr. S. M. Cordner (Pathology)

Representation and Public Relations

The Association was again invited as a minority group to send a representative to the Annual Representative Meeting of the British Medical Association and while I attended in this capacity it was a pleasure to see so many of our members attending in their own right as members of the representative body who were able as always to give support to motions affecting the membership of this Association.

It was good that so many of us were there to join in the standing ovation in honour of Dr. Mike Crawford who served both ourselves and the BMA so loyally and so well. It was he who led us at the start of the protracted and difficult negotiations we have just concluded with the Local Authorities and successfully laid the foundations of the new contract which almost all of our members have opted for.

There were 13 meetings of the working party and the Joint Negotiating Committee before agreement was reached, and it is a pleasure to have M. Andrew Bosi, Secretary of the BMA, Private Practice Committee attending this Conference.

Your Council will be closely monitoring changes in police surgeon practice during the forthcoming 12 months in the light of changes resulting from the Road Transport Act and also forthcoming changes which may take place in response to the Havard Report mentioned below in the report from the Metropolitan and City Group.

Liaison

During the year there has been frequent liaison with the Home Office, the BMA and Association of Chief Police Officers as well as other Medical organisations and other societies with an interest in forensic medicine. The main discussion points have been the new changes under the Road Transport Act, sexual offences and the controversial Police and Criminal Evidence Bill.

In respect of the latter your Council submitted in August comments on a discussion document produced by the Home Office on rules for detention of prisoners and rules governing identification procedures, and although the Bill as drafted would suggest that police surgeons be asked to carry out intimate searches without free and informed consent, this was not in the evidence that we gave to the Royal Commission. Your Council agrees with the paragraph on body searches in the BMA's Handbook of Medical Ethics which will read "it is not part of a police surgeon's role to carry out examinations for non-medical reasons, in exceptional circumstances a doctor may believe he has an overriding duty to do so (a decision he will have to justify) for example, where a person is a danger to others."

Our Association was consulted by the BMA before that paragraph was drafted and our Association also supports the BMA in its support of the conclusion of the Royal Commission of Criminal Procedure that "examination of intimate parts of the body should be carried out only by a medical practitioner and only in respect of the most serious offences".

As an Association our views are being increasingly sought on matters of clinical forensic medicine not only by Government bodies but also by both the lay and medical Press, demonstrating quite clearly that both our colleagues and the public are becoming more and more interested in the work that we do. In this respect Ivor Doney and Reg Bunting are to be congratulated on their forensic medicine display which once again appeared at the BMA, Careers Fair. "Have Stand-will travel!" is their motto, and your Council is considering extending this activity in to Medical schools both in and out of London. I would welcome support from those of you with contacts in the University and Teaching Hospitals so that medical students and young doctors are made aware of what we do.

International Scene

On the international scene Ivor Doney with his forensic globe-trotting seems pretty successful in persuading other colleagues to join him. In November Bert Keen and myself

joined him at Sacramento for the 1st Inter-American Congress of Forensic Sciences and a week later Ivor and Bert carried on to Newport Beach to attend the meeting of the National Association of Medical Examiners. A further contingent from the Association is travelling even further in September to the 1st Asian/Pacific Congress on Legal Medicine and Forensic Sciences in Singapore while an intrepid smaller number intend to proceed to the 8th International Forensic Science Symposium in Perth.

The Association is truly becoming international in it's outlook and once again a significant inclusion in this years Conference Programme is a meeting between Council representatives and representatives of overseas organisations attending Conference. Coming back nearer home the Association is committed to support the meeting of the International Association of Forensic Sciences' which will be held in Oxford from Tuesday 18th September to Tuesday 25th September 1984.

Child Abuse

I have been invited to join Ciba Foundation Study Group on Child Sexual Abuse within the Family. The Group will be publishing a report at the end of the year or early next year and again this could have important connotations for police surgeons. There is strong pressure that lady examiners be retained for the examination of women and children, and also a vocal lobby for these examinations to be carried out either in the surgery or a hospital.

In many areas it is regrettable that some of our colleagues show insensitivity to the needs of the victim and conduct examinations in sub-standard conditions.

The view of your Council is that before one can be competent to deal with these cases one has to be trained in the full range of clinical forensic medicine as so many of these cases also have overtones of drink, drugs and violence. Competence, impartiality and sensitivity to the needs of the victim are more important than the sex of the examiner. Flexibility in adapting to the needs of the victim and the Police is more important than laying down firm regulations as to where patients should be examined and it is pleasing that the recent Home Office directive carries advice to Chief Constables to liaise with their own Force surgeons in reviewing local arrangements which was the advice we originally gave to the Home Office.

While some of the recent interest in no doubt connected with the infamous Thames Valley Rape programme seen on Television earlier in the year, I would remind members that this Association has been pressing for improvements now being made ever since we gave evidence to the Heilbron Committee in 1975.

I report the state of the membership as follows:—

1981/2		1982/3
551	Full members	552
48	Associates	44
56	Life Associates	59
25	Overseas members	25
18	Honorary members	18
698		698

In conclusion I append matters of regional interest submitted to me from Area representatives from Group 5 and Group 8.

H de la Haye Davies
Hon Secretary

REPORT FROM AREA 5 REPRESENTATIVE — SOUTH EAST REGION

Because of the large area involved in the South East Region it has not been possible to organise any regional meetings. When members were circulated some time ago asking for their views on such meetings the response was very poor, and it has, therefore, been left to individual areas to organise their own activities.

We organised a very successful meeting, attended jointly by the C.I.D. and Police Surgeons on 30th November. From the beginning of this year our forensic science work has been carried out by the Forensic Science Laboratory at Huntingdon, instead of the Laboratory in London, and at the meeting in November representatives, including the Director of the Huntingdon Laboratory, attended and joined in discussions with the Police Officers and Police surgeons. It was clear there were a number of differences in procedure between Huntingdon Laboratory and the Metropolitan, and these were discussed in detail and general agreement was amicably reached on a number of contentious points. The outcome of this meeting has been that two further meetings have been arranged at which surgeons will be able to go to the Laboratory and see the work carried out there.

I am sure that such meetings are carried on in other force areas within the region, and it is my intention to request representatives of these forces to notify me of their activities so that one can get a more accurate idea of what is going on.

Additionally, in the course of the year an increasing number of enquiries has been received from members about problems arising from their work as Police Surgeons. I have been happy to deal with these, and hope that members will be encouraged to continue to seek assistance from their Council member or from the Secretariat.

Ian D. Craig

REPORT FROM AREA 8 REPRESENTATIVE (METROPOLITAN AND CITY)

The past year has been an active one in every sense of the word — dominated by discussions on the Harvard Report on police surgeons produced by the Management services department of the Metropolitan Police. Two informal meetings preceded the first business meeting on the 19th December chaired by Assistant Commissioner G.J. Dear when a most cordial and constructive discussion took place. At a second meeting on January 26th no discussion ensued and we were informed, without prior warning, that there would have to be a temporary suspension of negotiations because the Yard's own 'in house' working party were finding it necessary to proceed very slowly. The Agenda was therefore dropped unilaterally. The group's officers received legal advice throughout from Mr. J.M. Wickerson, LL.B. and the group will value the Association's support in this matter as it has proved to be of great benefit in formulating policy and in producing memoranda.

Although the Harvard report relates particularly to Metropolitan police surgeons — there are wider implications and these may well affect Association attitudes in future. Two full meetings of the group took place during the year in addition to two social events — one at the House of Commons and the second at the Cafe Royal — when many members "let their hair down" and relaxed away from the rigours of police surgery!

A number of meetings have been held at the Met. Lab. in connection with the introduction of the Breath alcohol machine and a useful meeting on "Deaths in Police Custody" was held at St. Thomas's in January. Many Met. members attended the Cross-Channel Conference in Rotterdam.

1983-84 looks like being a 'full year when doubtless all the normal difficulties will be met and, hopefully, overcome due to the good sense of the grass-roots' members — "the silent majority" — upon whom we rely especially in regard to any new contractual obligations.

Dr. Robin Moffat

ASSOCIATION EMBLEMS

The following articles bearing the Association motif may be obtained from the Hon. Secretary at the Association Office:

1. **Aide-Memoires** — documents for recording notes made at the time of forensic medical incidents packets of 50 **£2.50**
Postage charge on Aide-Memoires 95p (one packet),
£1.67 (two packets).
2. **Sexual Assault Leaflets**, Packets of 100 **£2.50**
Postage 94p (one packet), £1.57 (two packets).
3. **Key Fob** with the crest in chrome and blue enamelled metal **£1.00**
4. **Terylene Ties** — silver motif on blue. Ties now available with either single or multiple motifs. Please state which preferred **£4.50**
5. **Metal Car Badges**, chrome and blue enamel (for hire only) **£6.00**
6. **Car Stickers** for the windscreen (plastic) each **50p**
7. **Wall Shield** or plaque bearing Association Insignia **£10.50**

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1981/2	RECEIPTS		1981/2	EXPENDITURE	
	Balance at 5th April 1982			Account debit 5th April 1982	157.13
5277	Deposit Account	6667.68	106	Postage	16.00
-	Current Account	-	56	Stationery and Packaging	5.34
601	Interest on Deposit Account	621.36	7	Bank Charges	16.96
700	Sale of "New Police Surgeon"	528.76	50	Grant to Dr. J. Simon	-
371	Donation from A.P.S.G.B.	-		Research Grants	
				Dr. D.S. Filer	
				Research on Divisional Surgeon's workload	170.00
				Dr. J.A. Dunbar	
				Yates Safe Driving Project	1500.00
					1877.93
				Balance at 5th April 1983	
				Deposit Account	6118.40
				Current Account	22.07
					6140.47
		£8019.40			£8019.40

ASSOCIATION OF POLICE SURGEONS OF GREAT BRITAIN

INCOME AND EXPENDITURE ACCOUNT

For the year ended 31st March 1983

1982	EXPENDITURE	£	£	1982	INCOME	£	£
1638	Stock of Goods April 1982	1526		1980	Subscriptions		27293
834	Goods Purchased	83	1611	828	Bank Interest		570
1106	Dues	1607		3100	Conference Receipts		2215
260	Mass Grant from Gaiety Ltd	—	1602	225	Symposium Receipts - Striling		2424
—	Atlas Booklet (new Stock held)		292	1847	Symposium Receipts - Metropolitan	(Net)	28
463	Printing and Stationery etc.		521	761	Sale of Books, Journals etc.		795
968	Telephone		934	—	Sale of Dues		300
1151	Postage		1443	—	Sale of Atlas Booklet		901
3516	Conference Expense		2631	1111	Advertising - Supplement		1077
222	Symposium Expense - Striling		2093	3	Sundry Receipts		174
1581	(Symposium Expense - Metropolitan)		—	658	Sale of Goods	482	
290	(Symposium Expense - Bristol)		—	1528	Stock of Goods March 1983	873	
507	Council Meetings		1213		(Grant from Gaiety Ltd)		1355
—	Donor Research Programme		1700	1080			—
709	Council Facilities Review		612				
—	Northern Ireland Expenses		203				
66	Sundry Publications		84				
6045	Police Surgeon Journal		3689				
3531	Police Surgeon Supplements		4113				
371	(Donation - W.G. Johnstone Fund)		—				
500	Accountancy etc.		658				
—	Presentations to Officers		209				
166	Miscellaneous Expenses		184				
156	Insurance		153				
80	Depreciation - Equipment		30				
123	(Expenses etc. Honorary Treasurer)		—				
400	(President's Expenses 2 years)		—				
371	Expenses - Honorary Secretary		—				
796	Travel and Subsistence	448					
3679	Locums and Attendance	1228	1674				
1208	Assistant's Salary	3703					
806	Assistant's National Insurance & Expenses	1211	5018				
80	Rent and Rates - Office		878				
528	Heating		77				
	Excess of Income over Expenditure		5454				
30621			37132	30621			37132

BALANCE SHEET

As at 31st March 1983

1982	GENERAL FUND	£	£	1982	FIXED ASSETS	£	£
	Balance 1st April 1982	8236			Office Equipment		
	Add Excess of Income over				At cost	1186	
	Expenditure for year	5454			Less Depreciation to date	755	
8236			13690	430			400
1108	CURRENT LIABILITIES				Photographic Equipment		
	Sundry Creditors		1808		At cost	425	
				100	Less Depreciation to date	325	
				42			100
					Medallions - Cost		463
				1526	CURRENT ASSETS		
				2069	Stock of Goods	1797	
				5264	Cash in Building Society	9329	
					Cash at Bank and in Hand	3208	
							14344
9432			15307	9432			15307

ACCOUNTANTS REPORT

We have prepared the above Balance Sheet and annexed Income and Expenditure Account, without undertaking an audit, from the books and information supplied to us and we certify that they are in accordance therewith.

ORTON DESBOROUGH & CO

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- Area 1A (Northern Ireland):** Dr. W.E. St. C. Crosbie,
6 Ranfurly Avenue, Bangor, Co. Down,
Tel: 0247 68207.
- Area 2 (North East):** Dr. A.J. Irvine, D.M.J.,
Mickle Hill Farm, Wolveston, Co. Cleveland.
Tel: 074 — 04280.
or
The Health Centre, Billingham, Co. Cleveland.
Tel: 0642 — 531532.

Area 3 (Midlands)	Dr. R. J. Marsh, 26 London Road, Shrewsbury, Shropshire. Tel: 0743 58735 or 77 Church Road, Shrewsbury, Shropshire. Tel: 0743 54237.
Area 4 (Eastern)	Dr. M.A. Knight, D.M.J., 11 Tuddenham Road, Ipswich, Suffolk. Tel: 0473 57284. or 35 Hatfield Road, Ipswich, Suffolk. Tel: 0473 59556.
Area 5 (South East)	Dr. S.M. Hempling, D.M.J., 2 Onslow Close, Woking, Surrey. Tel: 04862 67020. or Sunnymead, Oriental Road, Woking, Surrey. Tel: 04862 72760.
Area 6 (South West)	Dr. Ivor Doney, D.M.J., "Hazeldene", Hazel Avenue, Chapel Green Lane, Bristol. Tel: 0272 733110.
Area 7 (Wales)	Dr. L.S. Addicott, D.M.J., Hafod, Ewenny, Bridgend, Mid. Glam. Tel: 0656 56527. or Riversdale House, Merthyr Mawr Road, Bridgend, Mid. Glam. Tel: 0656 4343.
Area 8 (Metropolitan & City)	Dr. R.J.R. Moffat, "Winsley", 180 Brighton Road, South Croydon, Surrey. Tel: 01 - 688 1389.
Area 9 (Scotland)	Dr. J.A. Dunbar, D.M.J., The Gables, Drumsturdy Road, Kingennie, Angus DD5 3RE. Tel: 0382 623 - 204. or 325 Strathmartine Road, Dundee DD3 8NE. Tel: 0382 812111.

COUNCIL ELECTIONS

In accordance with the Rules of Constitution, Councillors for Areas 7, 8 and 9 will retire at the next Annual General Meeting. Nominations for Councillors should be made by an Ordinary Member supported in writing by four Ordinary Members, together with the agreement of the nominee to serve, if elected. Nominations should be received by the Hon. Secretary before 15th January, 1984. Note: Area 7 (Wales) retiring Council Member, Dr. L.S. Addicott, Area 8 (Metropolitan & City) retiring Council Member, Dr. R.J.R. Moffat, Area 9 (Scotland) retiring Council Member, Dr. J.A. Dunbar.

AREA REPRESENTATIVES

Photo: Studio 550



MICHAEL KNIGHT

After a short spell in the Royal Air Force studying engineering, Michael Knight qualified at Guy's Hospital Medical School in 1970. His pre-registration house jobs were in the Greenwich group of hospitals, and he then was an S.H.O. in anaesthetics back at Guy's, and subsequently moved to Ipswich where he became Anaesthetic Registrar.

He then decided to move into General Practice in Ipswich, and in 1972 was appointed Deputy Force Surgeon to the Suffolk Constabulary.

Other medical interests include teaching in general practice (he has been a trainer for six years), the use of computers in general practice, and accident rescue work.

Extra-medical activities are mainly sporting, particularly golf and hockey.

He may be contacted at home —
11 Tuddenham Road, Ipswich,
Suffolk, 0473 58284.

Surgery — 35 Hatfield Road, Ipswich,
Suffolk, 0473 79556.

STEPHEN HEMPLING

Stephen attended Manchester Grammar School and Manchester University, qualifying in 1968. He completed pre-registration house jobs at Crumpsall Hospital, Manchester, followed by clinical pathology as SHO at the Radcliffe Infirmary, Oxford. He moved further south to London where he did further SHO jobs in medicine and obstetrics and ended up even further south in general practice in Woking, Surrey in 1972.



He was appointed Police Surgeon in 1972 and obtained D.M.J. in July 1977. He was appointed Honorary Lecturer in Forensic Medicine to Guy's in 1978. Since that time he has been even more involved in forensic work, advising police on cases of special interest throughout the county of Surrey.

Stephen is actively involved in research in forensic medicine, particularly being interested in the applications of ultraviolet photography.

His non-medical interests include philately, photography and an active involvement in Round Table. He may be contacted at:—

Home —
2 Onslow Close,
Woking,
Surrey, GU22 7AZ.
Tel: 04862 67020.

Surgery —
Sunny Mead,
Oriental Road,
Woking,
Surrey.
Tel: 04862 72760.

IVOR DONEY

Ivor Doney is the Council representative from the South West (Area 6). A native of Cornwall, he did 7½ years in the RAMC. He started his medical career in paediatrics, but left at the registrar stage and went into general practice in Bristol. Ivor holds an appointment as Area Police Medical Officer, and is one of five Police Surgeons in Bristol. An avid conference goer, he is accompanied to meetings by his wife Tania whenever possible; Tania is interested in forensic odontology.

Besides forensic matters (he is a council member of the Bristol Medico-Legal Society), he is interested in industrial medicine, and is a part-time industrial medical officer to a number of Bristol firms.



Ivor's father was divisional Police Inspector with the Cornwall Constabulary. Ivor thinks that the police deserve more credit than they get, and believes that the average member of the public has no idea of the things policemen have to put up with.

When he has nothing else to do, Ivor likes "mooching around antiques" — mostly pictures, coins and silver. He plays the piano a bit, and he gardens.

He may be contacted at "Hazeldene", Hazel Avenue, Chapel Green Lane, Bristol, BS6 6UD, Telephone: Bristol 733110.

MERSEYSIDE POLICE SURGEONS

Merseyside Police Surgeons are at present smarting because of a change of taxation rules. Formerly taxed under Schedule D, since the beginning of April 1983 they are now taxed under Schedule E. For one year this means paying double taxation, but more importantly the claiming of expenses in attending Association Conferences and meetings and other expenses incurred in keeping up to date may present difficulties, which at present have not been resolved.

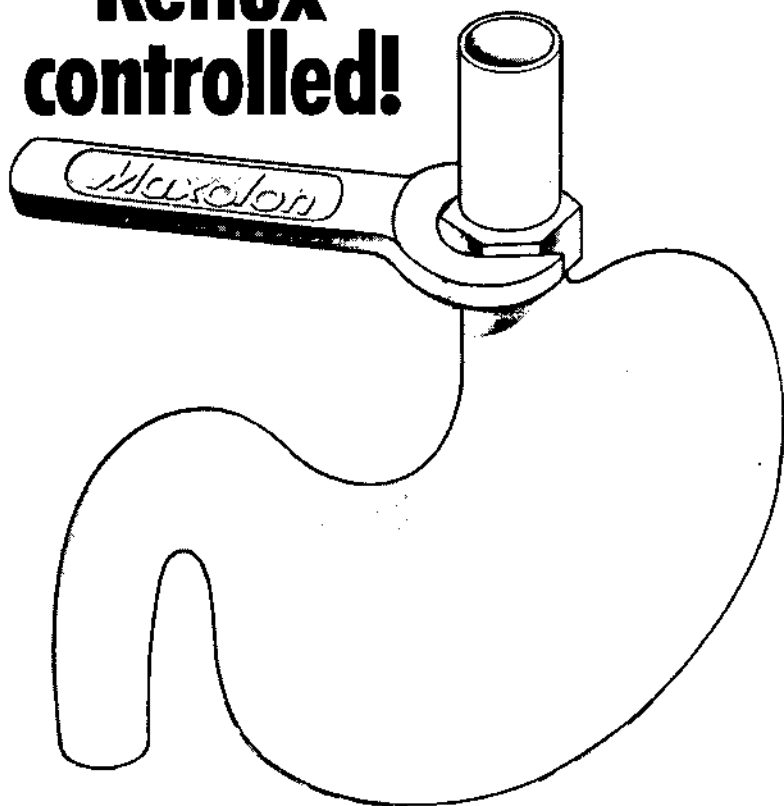
On a happier note, relations between the Police Surgeons and Merseyside Police remain excellent. This year has seen the

introduction of a new and comprehensive equipment list for medical rooms, which was drawn up by the Police Surgeons and approved by the Police.

It was Merseyside Police Force Policy *not* to install the Lion Intoximeter 3000 machines in medical rooms. Considerable ingenuity has been exercised in finding places for the machines in and near to the Charge Offices.

Regular meetings are held for Police Surgeons and between the Police Surgeons and senior officers of the force. A visit has been arranged for Police Surgeons to the Home Office Forensic Science Laboratory at Chorley, to take place mid-December.

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D.M.J. NEWS

The Library, Apothecaries Hall.

D.M.J. SUCCESSES

Dr. Peter Schutte of the Isle of Wight and Dr. Jeremy Smart, West Midlands, both obtained the Diploma in Medical Jurisprudence in July 1983.

PROPOSED CHANGES FOR THE D.M.J.

The D.M.J. examination has undergone a number of changes since it was first introduced 20 years ago. The examination is under constant review and further changes are being considered. These include:-

- * All candidates for the final oral examinations will be examined by both clinical and pathological examiners.
- * The physical examination of a patient by clinical candidates will be re-introduced.
- * The multiple choice question paper has been criticised since it was introduced. It is, therefore, proposed that for an experimental period of two years the multiple choice question should be replaced by a short answer paper of 20 questions. Half of these will be clinically orientated and half pathological orientated.
- * There is no uniformity in the presentation of Case Books or the contents. Some Case Books are well presented in bound form with a broad spectrum of

cases, index, discussed in detail, illustrated and with reference to the literature. Other Case Books are merely examination reports placed in folders with a few lines of commentary. It is proposed that future regulation should be set out in detail what is required by the examiner.

POLICE ENCOURAGEMENT FOR THE D.M.J.

Certain expenses incurred by Police Surgeons taking the Diploma in Medical Jurisprudence are reimbursed by the Avon and Somerset Constabulary.

The Force has for some years recognised the need to enhance the facilities to Police Surgeons and to encourage them to attain qualifications appropriate to their post. The reimbursement, which is with the approval of the Police Authority, is in furtherance of that policy.

The Force has organised seminars, to which all Force Police Surgeons were invited, in 1980, 1981 and 1982. Copies of "The New Police Surgeon" have been purchased for Police Surgeon use. Existing Medical Rooms have been provided with updated equipment and there is a programme, shortly to be completed, whereby every major police station in the Force Area will have a properly equipped surgery.

One Police Surgeon has agreed to act as Liaison Officer and spokesman and, in this way, the Force is able to circulate each of the Police Surgeons with information on new techniques and legislation.

We hope that other Forces throughout the United Kingdom will not be slow in following this excellent example set by Avon and Somerset Constabulary.

POLICE REVIEW

Studying for the D.M.J.? A useful source of information is the Police Review, a weekly magazine which contains articles on a wide variety of subjects including aspects of the law. Costing 33 pence per copy, it can be ordered from your newsagent or may be ordered direct from — Police Review, 14 St. Cross Street, London EC1N 8FE.

SEAFRETS AND SUNSHINE

In spite of fears that the 1983 Annual Conference held at the Royal Hotel, Scarborough, would be ill-attended, because of the successful Rotterdam Conference and the introduction of the breath analysis machines, the fears proved unfounded. The Conference was well attended with delegates both from home and abroad. The magnificent Royal Hotel, which boasts one of the finest staircases to be found in any hotel in the United Kingdom, proved an excellent setting for this successful meeting.

The proceedings were, as usual, dominated by the lectures given in the well equipped ballroom, which proved an ideal venue. Once more the Conference was supported by representatives from the pharmaceutical industry, who make a substantial contribution to the Conference running costs and to whom we extend our thanks. A major display was mounted by the North Yorkshire Police, by courtesy of the Chief Constable, and which received considerable attention throughout the Conference.



However, all was not work. Scarborough and the surrounding countryside had much to offer and a report on the Ladies Social Programme is made elsewhere. The sun shone for much of the Conference but we also had sea mists, known locally as sea frets, and in the early hours of the morning the warning fog horn sounded as though it was installed in the hotel foyer.

Tuesday

Tuesday has now become established as a major meeting day for the Association's Council. Whilst delegates and their wives were away enjoying themselves on the full day tour, Council members endeavoured to set the Police Surgeon scene to rights in a meeting room in the bowels of the hotel, the shaft of sunlight reminding them of the delights without the hotel.

Topics considered by Council included the feminists lobby attempt to have battered children examined only by women doctors. As children are equally at risk by women as well as men, this seemed to be illogical. The Havard Report on Metropolitan Police Surgeons was discussed in detail. The referral of patients to unqualified personnel manning Rape Crisis Centres may present medico-legal ethical problems. The increasing need for body searches also presents ethical problems with regard to consent. In a minority of police force areas the new breath analysis machines have been installed in the Police Surgeon's Medical Room. This was deplored by Council (*this matter has now been taken up with the Association of Chief Police Officers*).

The following morning there were two further sub-committee meetings. The first considered international matters relating to clinical forensic medicine and, apart from members of the Association's Council, the meeting was attended by Dr.

Hubert Cremers (Holland), Dr. William Treadwell (New Zealand), Dr. Peter Bush (Australia), and Mr. R. Walters (observer, United States). Consideration was given to Dr. William Eckert's proposals for an international organisation of clinical forensic medicine but it was decided to improve contacts with international organisations along existing lines. (See report elsewhere)

The second meeting was of the sub-committee on education. Matters discussed included the advancement of the Diploma in Medical Jurisprudence, the unwillingness of doctors to undertake police work in some areas, and the preparation of video and slide tape presentations on aspects of clinical forensic medicine. The role of the Journal and the Supplement were discussed.

Wednesday

The formal sessions of Conference were opened by Mr. Eric R. James, Q.P.M., Deputy Chief Constable of North Yorkshire Police. Thanking Police Surgeons for their work in the past, Mr. James said that, in spite of the advent of the new breath analysis machine, work-load in other areas was increasing, particularly with regard to sexual offences and crimes of violence. Mr. James said that the psychological effects of crime brought home to him when his daughter suffered a burglary. He referred to the Home Office Police Bill and asked when would people realise that law and order is the concern of the whole community.

Dr. Fraser Newman commented on the increasing use of non-barbiturate drugs among drivers and noted the difficulty in assessing drivers for impairment clinically. The degree of impairment of a driver on drugs does not appear to be related to the drug-blood level.

Dr. Michael Green said that the number of Forensic Pathologists had fallen since he had started work in this field and increasing use and increasing reliance is placed on Police Surgeons. Dr. Green warned delegates not to be too hasty in accepting the first story in relating to a sudden death. Estimating time of death was still a difficult business. In spite of three years research, costing £42,000, the principle conclusion was that current methods of estimating time of death were even less reliable than was previously thought.

Dr. Richard Marsh echoed Mr. James's comments on the psychological stress of crime in his paper dealing with the psychology of grief reaction and police work. An awareness that people suffer basic physiological and emotional reactions following loss of employment, privacy and security, possessions, independence, parts of the body and close friends and relatives, is a primary step in helping patients to recover. Essentials are common sense and compassion.

Dr. Marsh was followed by Mr. Richard Walker, who is a Prison Psychologist from Michigan, U.S.A., and he dealt in fascinating detail with the psychological interpretation with bite marks.

The Civic Reception in Scarborough

Dr. M. Green



Dr. C. Stewart



Mr. E. James



Dr. T. Manser



Town Hall, hosted by the Mayor, Mrs. Jean Greenan, and her husband, both of whom are medical practitioners. Hospitality was generous and, in welcoming us to Scarborough, the Mayor made it clear that she appreciated the problems facing delegates in their work.

Thursday

Superintendent Bennington of North Yorkshire Police presented a video film which described the aftermath of the tragic shooting of P.C. Haig in North Yorkshire. This led to the launching of the largest manhunt event in the United Kingdom, involving over 3,000 police officers. The murderer was Barry Peter Edwards, alias Prudom, and he in turn was shot at the conclusion of the hunt. Dr. Sivaloganathan from Leeds described the post mortem findings, which led to the conclusion that Prudom had shot himself. In the thinly populated area of the hunt there were no Police Surgeons and local doctors were called upon to assist as required.

Following a discussion on practical problems in determining fitness to be detained by Peter Shaeena, there was a further video film "Secret in the Family" presented by Dr. Hilton, the President, dealing with problems of incest.

Dr. Peter Bush described some of the problems he has met in court with the interpretation of blood/alcohol concentrates. He pointed out that in Victoria 50% of traffic accidents are associated with alcohol, rising to 75% in single vehicle accidents. The death toll of 74 in the Ash Wednesday fire is equivalent

only to two months of road deaths in this State.

The final paper before the Annual General Meeting was given by Mr. John Finch, Senior Lecturer in Law at the University of Leicester, familiar to all General Practitioners through his writings in "General Practitioner". He discussed, among other things, the narrow margins which can exist between error of clinical judgement and negligence.

The Annual General Meeting saw the election of Dr. Tim Manser as Conference Secretary (ably supported by his wife, Dee). New Council members appointed were Dr. Michael Knight, D.M.J. (Area 4), Dr. Stephen Hempling, D.M.J. (Area 5) and Dr. Ivor Doney, D.M.J. (re-elected Area 6). Mr. Andrew Bosey from the British Medical Association (Secretary to the Private Practices Committee) talked in the A.G.M. on the new Contract and was severely cross-examined by delegates.

Friday

Bill Threadwell, New Zealand Police's Senior Police Surgeon and President of the AAPAPMO, gave considerable insight into the world of the police undercover agent. This is dangerous and difficult work and it is quite clear that the support given to these brave agents by the medical services of the New Zealand Police is a major reason for the successful completion of their assignments and their subsequent return to normal life.

Dr. Roy Cummings from Tasmania, gave a brilliant dissertation on gunshot wounds illustrated by first class photography. The number of cases he demon-

Dr. & Mrs. W.M. Thomas



Dr. & Mrs. A. Mendoza





President Elect Ian Craig

strated suggested that Tasmania is a dangerous place in which to live.

Petite, elegant and articulate, Dr. Raine Roberts from Manchester attacked the lack of research at present being undertaken in clinical forensic medicine. She said that ideally sexual assault examinations should be carried out at a Sexual Assault Referral Centre and, whilst the medical examination should be preferably made by a woman, it was more important that the examiner should be a trained, experienced clinical forensic physician. Dr. Robert's views were well received and her debut at Association meetings was clearly long overdue.

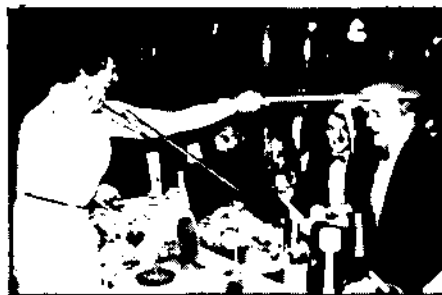
The concluding paper was by Professor Stuart Kind, former President of the Forensic Science Society and President of the International Association of Forensic Sciences. In a dissertation on forensic science, he urged delegates not to accept the obvious, not to accept pressure intentional or unintentional. Professor Kind said that Britain leads the world in forensic

medicine with magnificent equipment, buildings and personnel. He commented that evidence was only as good as the written word and an inability to put prose into comprehensive English can be a handicap.

A number of papers will appear in "The Police Surgeon" in due course. The standard of lectures throughout the Conference was exceptionally high and members of the Association who did not attend this Conference suffered misfortune in not being able to hear an exceptionally eloquent band of speakers.

Banquet

The Conference closed, as usual, with the Annual Banquet, during which the prizes for the Golf and Squash Competitions were awarded. First prize for the Squash was awarded yet again to Hubert Cremers, with the runner-up Dr. Joe Ciappara. The Ulster Cup was won by Bertie Irwin and the runner-up was Dr. Charlie Stewart, both from Northern Ireland. (*Is this because the Northern Ireland Police Surgeons have more time to practise golf than others in the United Kingdom?*). The Wooden Spoon was claimed by Stephen Hempling. Dr. Fraser Newman, who has a large collection of wooden spoons, was heard boasting that on this occasion at least he would not be the object of derision and unfeeling comment. For this and in recognition of his golfing prowess of other days, he was presented with a three-foot Wooden Spoon. The comments of his lady wife are unprintable.



SOCIAL REPORT - 1983 Conference

Tuesday morning 17th May started foggy, but undaunted, we all climbed aboard the waiting coach, and after a head count we left the Royal Hotel around 9.15 a.m. Leaving Scarborough we headed over the Yorkshire moors to Robin Hood Bay. Our driver informed us of the things we might have seen if the fog had lifted, and at times, like opening net curtains, we had clear views of the roving countryside, only to be shrouded in mist as we neared the coast. By the Victoria Hotel we disembarked from the coach and nearly everyone made the steep one-in-three descent to Robin Hood Bay. After a brief look around, all managed to stagger back in time for a well earned cup of coffee and biscuits at the Victoria Hotel. Off again to Whitby Abbey to see the remains of what would once have been a very large and imposing building, situated high on the hill overlooking Whitby. Many took the opportunity to take a look at the nearby church before returning to the coach. On the road again, this time for Goathland, on our way we enjoyed lovely panoramic views of the rugged landscape. On arrival at the Mallyan Spout Hotel we enjoyed a refreshing drink in the bar and "nibbles" of fried bacon rind before sitting down to a very enjoyable lunch.

A short journey in the coach to Goathland railway station, where we boarded the steam train which took us through the moorland valley to Pickering Station; true to his word the driver and coach were waiting to take us to Nunnington Hall, a large 16th century house on the banks of the river Rye. Afternoon tea and homemade cakes awaited us, duly refreshed we strolled round the house, gradually climbing the stark wooden stairs to the attic to see the Carlisle collection of miniature rooms, all furnished in meticulous detail and scale. A grand finale to what had been a splendid day's tour, and we were pleased to climb back aboard our coach, and head for home. But our journey was not without incident, a faulty wire on one of the emergency doors gave us a continuous loud buzzing

sound, drowning any hope of conversation. Pleasantly tired, slightly deafened, and somewhat late we arrived back at the Royal.

Wednesday 18th May, ready for the road again, all aboard the same coach now without the buzzing, and away to Burton Agnes Hall near Bridlington. All looked deserted when we arrived and virtually drove the coach up to the front door, and we soon convinced the chap who popped out from somewhere, that we had been instructed to drive in. We entered the main hall and met our guide for the tour of the house, a splendid chap who began to read from his closely typed sheet, the history of the house. We were soon captivated by his spiel, and by the time we reached the bedrooms we were eagerly awaiting the ghost stories which he had promised to relate. Eventually retracing our steps down the magnificent staircase, we escaped to the tearoom for our much needed eleveses, then a quick look in the shop before returning to the coach, and a very pleasant drive back to the Royal for lunch.

Thursday 19th May. It is usual for the President's wife to give a reception for the ladies, and this year was no exception. Mrs. Mary Hilton invited us to the Prince Regent Room in the hotel, greeted us informally, and presented each one with a very useful little cookery book. We settled down with a drink, to listen to an illustrated talk about Victorian Scarborough given by Mrs. Rosalind Palmer of the Rotunda Museum, who also spoke about Whitby Jet, showing examples of necklaces and brooches, and pointing out the differences between the real and the fake product.

DEE MANSER

Dutch Police Surgeon, Hubert Cremers, and his attractive wife received a rude awakening on their first morning at the Conference. They were disturbed by water dripping from the ceiling above as the outgoing Conference Secretary took a shower. The Hotel Porter sent to investigate the emergency reported that Hubert's comments were colourful but double dutch to him.

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AUTUMN AT DYFFRYN



Illustrations: Dyffryn House

The gales which swept England and Wales at the beginning of September heralded not only autumn but the Autumn Symposium, this year held at Dyffryn House, near Cardiff.

Dyffryn House and gardens are situated in the centre of an area of historic associations, which date back to the pre-Christian era. The present house stands on the foundations of an old Elizabethan house, demolished in the 1980's. This magnificent scene was the setting for a most successful week-end, both socially and academically. All credit for the week-end must go to Dr. Lawrence Addicott, who chose the venue and undertook all the arrangements. There were over 60 delegates many of whom were accompanied by wives.

Because of appalling weather, the ladies were unable to visit St. Fagins National Welsh Folk Museum but instead visited Cardiff Castle, which proved a very adequate substitute. Opportunities for shopping in Cardiff were not missed. On the last morning the weather eased sufficiently to allow a tour of the magnificent gardens.

Opening speaker in the Symposium was Dr. Raine Roberts from Manchester, whose debut earlier in the year at Scar-

borough was greatly welcomed. Discussing rape and other matters sexual, Dr. Roberts said that the forensic and caring aspects of sexual assaults should be improved. She gave many details of 37 recent cases that she had examined in Manchester. She noted that of the 37, 26 cases arose on Friday, Saturday and Sunday nights. There were 16 night calls. Dr. Roberts said that her most difficult recent case was that of a female student who alleged that she had been attacked. She was accompanied by a member of a Rape Crisis Centre. The difficulties arose because the alleged victim and her companion continually wept, embraced and consoled each other throughout the examination.

Dr. Roberts commented on a number



of cases where the alleged victim had been examined and the Police had spent time on the investigation, subsequently the complainant withdrawing her allegation. (Detective Chief Superintendent D. Carsley commented later that false complaints are now more frequently followed by prosecutions for wasting police time.)

Dr. Roberts concluded by saying that it is a sad reflection on our society that she frequently sees 13-16 year old girls at 4.00 a.m. who casually allege rape and who equally casually withdraw their complaint the following day.

Detective Chief Superintendent Carsley emphasised that it was essential for the police to establish whether the alleged victim was telling the truth. Until this was ascertained it was a waste of time and money proceeding with the investigation. A rape charge has to be proved in court and the sentence for rape is the same as the sentence for murder — life imprisonment. Mr. Carsley said that in his opinion there were many occasions when female sexual assault victims would prefer to talk to men rather than women. Prostitutes who have been raped would rather talk to hardened detective constables rather than to young police women just out of training. The prostitutes could talk down to earth to the male detectives. Mr. Carsley said that of 84 allegations of rape made the previous year, 39 were reported and 38 detected, 45 other allegations were later withdrawn or not proved.

Mr. Geoffrey Robinson from Chepstow Forensic Science Laboratory spoke on the

collection and interpretation of forensic evidence in rape cases. He emphasised the difficulties which may exist in interpreting the findings from vaginal swabs. He pointed out that the wearing of disposable panties during or after the medical examination would lead to the accumulation on the panties of secretions from vaginal drainage. This would give the Laboratory far more material to examine than is normally found on a vaginal swab.

The forensic scientist has some difficulty in estimating the time of intercourse before the time of collection of the samples. Acid phosphatase is very soluble and will disappear if the victim bathes. Acid phosphatase usually disappears within 24 hours; the sperm count decreases over a period of time and usually after three days sperm is not seen. Sperm is very rarely seen as long as seven days after assault. The protein P30 lasts longer than acid phosphatase and is specific to the male secretion. It is important for the identification of semen in cases of aspermia and vasectomy. Where oral sex has occurred sperm may persist in the mouth for six hours, but has been recovered from the lips up to nine hours after intercourse.

In discussion, the President, Dr. Hilton, thought that it was a retrograde step that the Police should take the clothing of the victim prior to examination by the Police Surgeon. In reply, Mr. Carsley said that evidence was continually dropping from the victim's clothing and that if there was going to be a delay before the medical examination or if the victim had to be

D.C.S. Carsley



Mr. G. Robinson



Dr. Tom Jones



Dr. J.S. Taylor



transported to another venue for examination, then it was essential that the clothing be properly bagged before further loss of evidence occurred.

Dr. George Mitchell, Pharmacologist, gave a brief but crystal clear dissertation on drug abuse and its pharmacology. He said that solvents existed in so many products that it was impossible to legislate against solvent inhalation abuse. Referring to cannabis, he said that eight days after smoking one joint 40% of the THC remained in the body. Cannabis produces cellular damage. It is carcinogenic and it produces chromosomal break-down.

Dr. Morfydd Keen described the management of young solvent abusers and drug addicts at her rehabilitation unit. She noted that alcoholism was formerly a problem of middle age but now she is seeing alcoholics from younger age groups. She noted in her travels about Cardiff that solvent abusers were sitting where winos used to sit, the winos having moved up market. Her patients came from all spectrums of society and patients often had above average intelligence.

Detective Chief Inspector Gordon Smith described the workings of the South Glamorgan Drug Squad, staffed by 23 officers and two dogs. The Squad had made about 700 arrests the previous year. They were concerned in catching not so much the users but the suppliers of the drugs.

During the first day of the Symposium an excellent display was provided by the Drug Squad, it included many items seized during a period of two weeks; the value of some of the items ran into several hundred pounds at street level. Also on display was a breakdown of the deaths from solvent abuse in England and Wales — 39 in 1980, 33 in 1981 and 36 in 1982.

Mr. Carsley concluded the first day with an illustrated presentation and discussion of murder cases in which he had been involved.

The next morning was an excellent time for Dr. Tom Jones and Dr. Paul Williams from Lion Laboratories to demonstrate the Lion Intoximeter 3000. It was said that several members, who had enjoyed a convivial evening, were sur-

prised at their breath/alcohol readings taken after breakfast. Dr. Jones reviewed the history of chemical testers for alcohol, which surprisingly goes back to a suggestion made in 1910 by Widmark. Sweden and Denmark first introduced blood and urine testing in 1920. The 1940's saw the introduction of breath analysis first in the States and then in Canada and Australia. Europe as a whole opted for blood or urine testing with a screening breath test but in the United States and Australia breath testing occurs without an initial screening test. Breath testing has been in use in Northern Ireland for about 10 years.

Following extensive field trials two machines have been accepted for use in the United Kingdom. Of all the countries using breath analysis, the most safeguards have been built into the machines in use in the United Kingdom.

Dr. Jones was followed by Dr. Paul Williams, who described in fascinating detail the functioning of the Lion Intoximeter 3000. Emphasis was made on the machine's accuracy, calibration and maintenance procedures.

Mr. Alan Jones, formerly a prosecuting solicitor but now chiefly appearing for the defence, reviewed drink-driving legislation up to the present day. The earlier Acts from 1967 onwards gave enjoyment and employment to many lawyers in trying to find defences for their clients. The 1981 Road Transport Act, which came into force on 6th May, 1983, had greatly simplified the role of the prosecution, who now only have to prove the person charged was the driver and that he was over the limit. Never before has such emphasis been placed on the blowing into machines. The latest legislation will be much more difficult for the defence to beat.

Dr. J.S. Taylor, Medical Advisor to the Department of Transport, said that each working day the Department received 600 notifications of medical unfitness to drive. This in turn led to 600 disqualifications per month from driving for medi-

cal reasons. Of the people who collapse at the wheel of a car, over half are probably epileptic. Diabetics accounted for about 18% and, of these, over 30% had missed meals, and 14% had recently expended unusual effort. 62% of diabetics collapse competely into hypoglycemia but 35% entered an altered state of consciousness due to hypoglycemia and these constituted a considerable risk. The greatest contributory to traffic accidents was the road user. Persons travelling by car are eight times more at risk than those travelling by train. Motorcycle riders are 162 times more at risk and 218 times more at risk if they are pillion passengers.

Dr. Taylor also referred to the high risk driver and said that his Department will withhold the licence of any person who has two convictions for driving with more than 200 mgms. of alcohol per 100 ml of blood, or equivalent in breath in ten years. The drivers will be referred

to medical centres for examination, which will include blood testing. It is anticipated that there will be about 3,000 referrals per year. Depending on experience, the level at which licences are withheld may be reduced to 150 mgm in due course.

There was capacity audiences for the lectures. The speakers provided a varied fare, combining basic information and up-to-date advances. It heartened the geriatric members of the Council to see so many younger Police Surgeons present, some new to the game, who showed such an avid interest in clinical forensic medicine. It bodes well for the future.

In Wallington Police Station (Metropolitan) there were recently to be found Inspector Crooks, Sergeant Watson and Sergeant Holmes.

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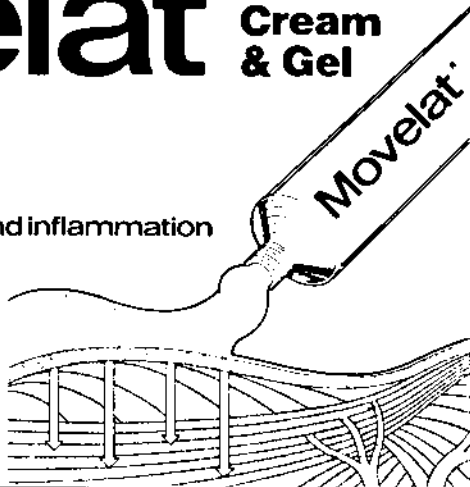
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MALE OR FEMALE ?

A major topic of discussion during the Association's Autumn Meeting in Cardiff was the sex of the examiner in the examination of sexual assault victims.

Dr. Hugh Davies, Association Secretary, said that Doctors should be judged on their professional skills and not by their sex. Many of the men felt they were just as sensitive as their female colleagues, and far more experienced in the evidence gathering aspect of the job.

Women Police Surgeons at the meeting made significant contributions to the discussion.

Dr. Raine Roberts, Manchester; "Forensic skills are most important than the sex of the examining doctor, because otherwise the case can collapse in court. I agree it should not make any difference if a male doctor is skilled and sensitive. But, when women who have been attacked are offered the choice, they

show a marked preference for a woman doctor."

Dr. Jean Barker, Maidenhead, said that in 15 years she had only twice been called into other police areas to examine victims who insisted on a female doctor. In her own area, women who had been raped had commented on Dr. Barker's kindness. She said, "They seem surprised, and said they had thought I would be less kind to them than a man."

Dr. Hannah H. Striesow, London; "Women should be given the choice and, if at all possible, children who have been sexually assaulted should be examined by a woman. Women doctors usually do many more gynae examinations than their male colleagues. It should be possible these days for a female practitioner to acquire the necessary forensic experience."

Dr. Mary Sutherland, Devon; "I think that rape victims need to be seen by an understanding person who is used to doing gynae examinations. I think a sympathetic male doctor is just as good. The police usually ask for me in these cases, and my husband doesn't mind. He doesn't really want to do this work anyway."

Dr. Lesley Lord, Halifax; "At first the police only wanted me to do the rape cases, but I am trying to persuade them to give me the whole range of police work. If you don't know how to recognise the signs of assault and have had little experience with, say, bruising, the defence can make mincemeat out of you in the witness box."

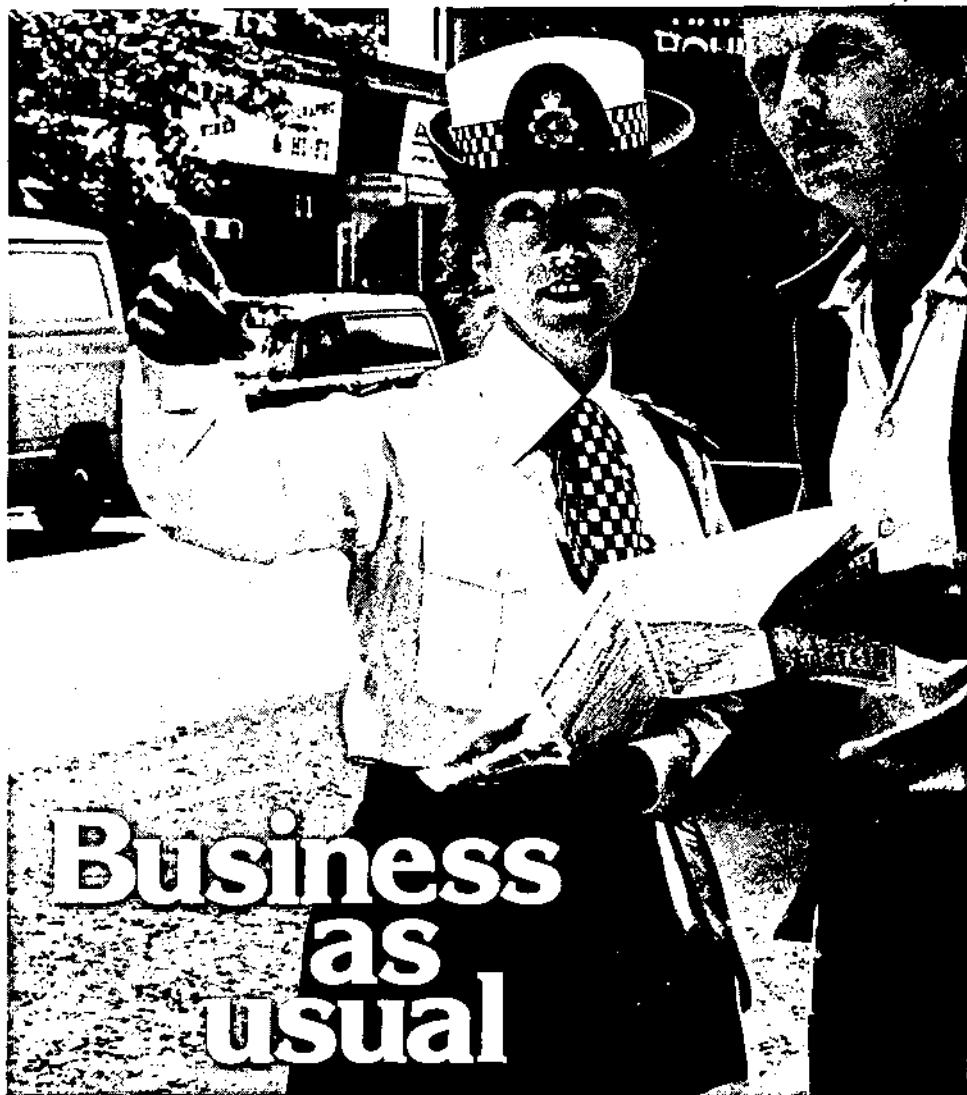
"I think most women would prefer to be examined by another woman if they had been raped. But I don't know whether there are enough women G.P.'s around who actually want to do this kind of work."

Current Practice

Two Police Surgeons were discussing the best things in life. "Wine, women and song", said one. "But which would you give up?" asked the other. "Song", replied the first. "And in really hard times?" "Oh, that would depend on the vintage".

Dr. Stresow





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WINTHROP

The New Police Surgeon

A Practical Guide to Clinical Forensic Medicine

Edited by S.H. Burges

Five years ago, as an act of faith, The W.G. Johnston Trust invested a large sum of money to sponsor and publish *The New Police Surgeon*. The book, a superb production of the highest quality was the culmination of three years of effort by the Editors and the many willing and gifted contributors. Two thousand copies were printed and appeared for sale in March 1978.

In that short account lie hidden the many trials and tribulations, the hopes raised only to be dashed to pieces, the pressures, arguments and final agonies that seem to go hand in hand with publishing a book. For example, when at last all was ready, the print set up and the paper in the machines, the Trustees were informed that the cost had doubled! Those who had ordered and paid for copies as a pre-publication offer certainly got a bargain.

Since publication sales have progressed steadily with books being sent all over the world. Reviews have been almost entirely favourable and thanks to the care taken in the editing process errors are few. It is with considerable satisfaction that I may now tell you that almost all the 2,000

copies have been sold, I say almost because there is still a small supply of nearly 200 copies in a warehouse somewhere in New York, U.S.A.

It happens like this. Two years ago our publisher sent 400 copies to a subsidiary in America with a view to extending sales. Not too long afterwards the subsidiary, by the name of Merrimac (!!) failed. We managed to retrieve 200 of these books shortly afterwards. However the two companies are now locked in combat over a financial settlement. Neither will budge and so our last remaining 200 copies stay in America — as hostages. At the time of writing an early settlement appears unlikely but we continue to hope that eventually the customers' interests will be given some regard and our property will be restored to us.

What of the future? The books now being held in America would, on the present rate of sales, last about two years. I have a waiting list of over thirty and this is slowly increasing. In the long term, of course, the only solution is to consider a reprint or a second edition. Both of these plans will be wildly expensive. Inflation has pushed up the cost of materials and other production expenses have increased to frightening proportions. With an uncertain market (how many of you book holders would buy a second edition?) and an even more expensive product such a venture would indeed be a hazardous one.

The *Atlas of Non-Accidental Injuries in Children* produced by the editor of the *Police Surgeon* was and still is an outstanding success. It is relatively cheap, is simple to keep up-dated and does not involve a large capital outlay. Could this be the answer to our problem? Moves are now afoot by the present editor, David McClay, to explore the possibilities of producing a series of monographs to cover the subjects now appearing in the book. I hear that late 1984 is being whispered as a possible date for publication. You will be kept informed. Meanwhile continue to let me have your names and addresses to add to my waiting list. I will be in immediate contact whenever copies are available. But PLEASE DO NOT SEND ANY MONEY.

J.H.

THE HOME OFFICE CIRCULAR

A Personal
View by
Dr. Tim Manser

We must all now be aware of the Home Office circular recommending that victims of sexual assault must be offered the choice of a female doctor to carry out the examination.

This has been met with considerable publicity and indeed has been discussed at some length at both this year's Annual Conference in Scarborough and the Autumn symposium in Cardiff. Much has been said and the press has continued to report it.

Are we as an Association aggravating this problem by discussing this at length and doing little positive in the way of action. Would it not be better if we could get the Home Office to change its views. I would suggest a new circular and that this circular would recommend that both the victim and accused are offered the choice of a properly trained Police Surgeon irrespective of sex.

The arguments surrounding the present circular are as sexist and discriminatory as the old arguments against women doctors, but in reverse. The press, especially the medical press, are perpetuating this. The majority of Police Surgeons are not members of the Association of Police Surgeons of Great Britain and have not attended postgraduate courses or read up-to-date material. How can they, when there is no postgraduate education in clinical forensic medicine other than that organised by the Association or in association with a London hospital annually. The only up-to-date published material is from the Association and the only generally available textbook is the New Police Surgeon. Textbooks of forensic pathology may be useful at the scene of death, but are of little practical value in dealing with the victim and accused of sexual assault. The printed sheet in some Sexual Offences kits can hardly add up to a postgraduate course in clinical forensic medicine.

A second weak area in the arguments bandied about is that a lady doctor if requested but untrained, may be assisted or supervised by a Police Surgeon. Apart from the difficulties this would create in presenting such evidence acceptably to a Court, I return to the question of whether the assisting Police Surgeon is properly trained. In many areas the answer to this must be 'no', and therefore the blind are leading the blind!

To have all Police Surgeons properly trained must therefore be not only our aim, but also the aim of the Police and society, in order that justice may be done. Would you have your gall bladder removed by a surgeon with no postgraduate training in surgery? Would the women in society accept that hysterectomies be done by G.P.'s with no postgraduate training in Gynaecology, so long as they are female? A case of rape may have equally far reaching consequences for victim and accused. The Home Office circular concentrates entirely on the victim. Should not the accused be equally entitled to the choice of a properly trained Police Surgeon? After all, he risks spending several years out of his life in prison.

The Police, themselves, do not discriminate and are not required by the Home Office to provide female investigating officers for cases of rape. The Home Office is not requiring female Judges and Counsel to deal with rape cases. The Home Office requires only that these people should be properly trained to do their job. We should be arguing for properly trained Police Surgeons to be encouraged by the Home Office in their circular to Chief Officers of Police. Surely the Home Office has got their priority wrong if they feel that the sex of the medical examiner is more important than his proper training and on-going education.

In conclusion, let us take positive action rather than talk. Should we as an Association suggest that the Home Office produce a different circular along the lines I have discussed? The Women's Groups should then be assured that the victims of sexual assault will be dealt with professionally, sympathetically, and properly.

OXFORD 1984



Dear Colleague,

The triennial meetings of the International Association of Forensic Sciences have long been established as the high points in the conference calendars of all those professions which together constitute the Association. Not only do these meetings allow the giving of high quality specialist papers but they also provide the major international occasion when interdisciplinary problems can be exhaustively discussed. Here the chemical toxicologist may not only discuss analytical advances but he can also discuss interpretive matters with pathologists and clinicians, legislation design with the lawyers and law enforcement problems with the police.

At these conferences lies the interface where the lawyer can focus his attention away from the subjective procedures of the trial process and discuss with the statistician, albeit hopefully, the application of statistical concepts in the administration of justice or the use of computers in the storage and retrieval of legislation. The blood group-serologist, specialising in clinical or paternity problems, may discuss with the bloodstain specialist their allied (but so very distinct) specialisms and the two may discuss, with the detective and pathologist, the application of their techniques in the crime investigation process. The clinical forensic medicine specialist may hold a discussion session with the forensic psychologist and the detective on the value of hypnosis techniques in witness interrogation and with his lab-

oratory colleagues on the effect and effectiveness of certain preservatives used in blood samples intended for grouping or drug, poison or alcohol detection.

None of these interdisciplinary problems can be discussed effectively at specialist meetings and this is why the IAFS conferences have been so very useful since the first one was held at Brussels and Ghent in Belgium in 1957. Whilst maintaining a large and necessary component of specialist sessions the practitioner, in whatever field, is able to mix and discuss, both professionally and socially, with specialist colleagues in related fields. It is doubtless this established 3 year cycle of such meetings which has allowed them to become so popular and useful with the component professional groups of the Forensic Sciences. Pathologists, Document Examiners, Firearms Experts, Criminalists, Detectives, Lawyers, Toxicologists, Police Surgeons and Fire and Explosion Investigators foregather with many colleagues of other specialisms for disciplinary and interdisciplinary dialogue.

From Tuesday 18 September to Tuesday 25 September 1984 the City of Oxford in England will provide the setting for the 10th Conference of the International Association. All the professional meetings, disciplinary and interdisciplinary will be held in the Oxford Examination Schools where the entire accommodation has been reserved for the congress. Here we have accommodation for

plenary sessions of up to 1500 participants and in addition we have a number of conference rooms each holding from 40 to 200 persons in which the concurrent specialist sessions will be held.

The general theme of the meeting will be "Forensic Science — The Changing Years" and within that general theme there will be three sub-themes "Quality Assurance", "Mass Investigation" and "Evidential Value".

Residential accommodation is available in various Oxford Colleges (where we have booked 1500 beds) or in several excellent Oxford Hotels. More detailed descriptions of the accommodation available will be circulated with the registration form and programme in December 1983. In the meantime intending participants should note that it will be possible to request accommodation in a particular college strictly on a first come — first served basis. This choice will naturally be of interest to those with professional, sentimental or family ties with particular Oxford Colleges. The preferred choice(s) of college should be made on the registration form (not before please) and for this reason we must emphasise that prompt registration is necessary. All colleges will be within easy walking distance of the Examination Schools.

Throughout the week of the conference there will be both plenary and specialist sessions and a full programme of social functions is envisaged including a reception to be given by the Lord Mayor and Council of the City of Oxford which has already been arranged. Amongst the plenary lecturers who have already agreed to give lectures are Mr. Lawrence Byford (Her Majesty's Chief Inspector of Constabulary), Miss Margaret Pereira (Controller of the Home Office Forensic Science Service), Professor Jaques Mathyer (Director of the Institute of Police Science, Lausanne, Switzerland), Dr. A.S. Curry (President-Elect of the International Association of Forensic Toxicologists) and Dr. W.J. Rodger (Director of the Strathclyde Police Forensic Science Laboratory). Eminent speakers in other forensic professions will also give plenary lectures. A full list will be given in the

preliminary programme to be circulated with the registration form in December 1983.

Many intending participants have already intimated their mention of coming to the meeting and we have accumulated an up-to-date address list of several hundred persons. We must emphasise the necessity of ensuring that your name appears on this list if you are interested in coming to the meeting.

The central organisation of the 1984 meeting is being carried out by a Management Committee comprising myself, Professor W.J. Tilstone (Vice President), Mr. R.E. Stockdale (Programme Chairman) and Dr. A. Clift (Treasurer and Business Manager). Bill Tilstone participates in the general management of the Association and stands ready to take over should disaster strike the President. He also will (in his capacity as Editor of the Journal of the Forensic Science Society) publish the abstracts of all the papers to be given at the meeting in time for a copy to be given to each participant before the meeting.

Russell Stockdale, as Programme Chairman, is charged with the task of ensuring a high standard of presentations at the meeting and with arranging that the individual sessions run well and dovetail effectively, one with another, in an optimum fashion. Russell will be working mainly in conjunction with the Section Secretaries but if you have any general programme queries they may be addressed directly to him. Alan Clift is responsible for finance, accommodation, trade exhibition and, together with Bill Tilstone, for advertising. Both Alan and Russell have deputies ready to take over should it become necessary. Currently we envisage the trade exhibition lasting from Tuesday 18th to Friday 21st September 1984. Should it be necessary (and we think it may well be so) we anticipate holding a further trade exhibition on the final two days of the conference.

We shall arrange a very full weekend social programme including tours of the Oxford Colleges, a visit to Stratford on Avon together with a visit to the theatre to see a Shakespeare play. Other possible

visits include Windsor Castle, Hampton Court, Kew Gardens and Blenheim Palace. Full details will be issued with the registration form. There will also be a Ladies Social Programme whilst the professional sessions are under way. There will be a full social programme each evening.

Although the language of the professional sessions is exclusively English we shall arrange interpreters in other languages on social occasions (e.g. tours) where the demand warrants it. For participants whose spoken English is inadequate we can arrange readers. However you should note that, except in very exceptional circumstances, no papers will be read *in absentia*. Neither will papers be accepted which are not exclusively offered to the I.A.F.S. Persons desirous of giving a paper should note that the unit time per presentation is 20 minutes in total. This includes changeover, introduction and questions. *It follows that the practical limit for a paper is only 15 minutes* and speakers should arrange, by suitable rehearsal, that it does not exceed this limit. Session chairmen are under a strict requirement to keep to time so that participants can change from session to session to hear the papers of their choice.

Should it prove impossible to give a scheduled paper that particular 20 minutes will be left blank or filled by the section secretary on an *ad hoc* basis. On a very limited scale Section Secretaries will be allowed to have theme or other special paper taking up a double time period. These periods will be fixed in consultation with the Programme Chairman, will be strictly by invitation and will be synchronised amongst sessions. Intending

contributors should not plague the Programme Chairman or Section Officers for a double period on the basis that their paper warrants it. Doubtless it does but so will all the others!

STUART S. KIND.

Professor Stuart Kind is President of the International Association of Forensic Sciences, and the above are extracts from a letter sent out earlier this year.

Details of the Clinical Forensic Medicine Section were given on pages 66-67 of the May 1983 issue of the Supplement. Further information may be obtained from:-

The International Association of
Forensic Sciences,
Clarke House,
P.O. Box 41,
Harrogate, HG1 1BX
England,
Telephone 0423 56068

Dr. M. Clarke,
Secretary,
Clinical Forensic Medicine Section,
Vine House, Huyton Church Road,
Huyton, Merseyside. L36 5SJ
England
Telephone 051-489 5256



SECTION 63

In September Postgraduate Deans received urgent DHSS instructions to cut their budgets for Section 63 G.P. refresher courses by 5% immediately. They were also told to cancel all payments to G.P.'s for zero rated courses — activities like trainers meetings where only travel and subsistence are normally paid.

Meetings and courses arranged by the Association of Police Surgeons are normally zero rated. We must, therefore, expect that in future meetings such as the Annual Conference may no longer qualify for Section 63 refunding of travel and subsistence.

IN BRIEF

According to Police Review 12th August, 1983, drinks-drug drive suspects tested with the breath analysis machines in Scotland are prosecuted if the reading is 36 /ug or over. South of the border, of course, prosecutions start at 40 /ug.

An Essex Policewoman suffered a head injury and a fractured wrist whilst minding her own business in the toilet at Chadwell Heath Police Station, when the toilet wall collapsed upon her.

A magistrate in Hong Kong suggested that police officers should be impotent or given pills to suppress their sex drive. According to the Grimsby Evening Telegraph, Hong Kong's vice squad raided a brothel. The policemen were supposed to act as customers but got carried away by the women's charms. The magistrate acquitted five men of running a vice den, saying the officers, and not the prostitutes, had made sexual advances.

According to the Daily Mail, Los Angeles detectives working on prostitution, drugs and extortion rackets have been given permission to have sex in the course of their duty, if it prevents their cover being blown.

41,375 victims were offered help in 1981, according to the third Annual Report of the National Association of Victims Support Schemes.

18 magistrates and lawyers from Venice, having paid a visit to Marlborough Street Magistrates Court, found the police had clamped their car wheels.

There were 49 deaths in custody in England and Wales in 1981 and 55 in 1982. The total number of arrests in 1982 was 1.6 million.

A thief who stole an undertaker's estate car in Warrington quickly abandoned it when he discovered a corpse in the back.

Bedford Police received a phone call from a tearful little girl saying that someone had killed two ducks by cutting off their heads. On investigation, they found that the ducks were fast asleep with their heads tucked under their wings.

There were 190 offences of rape in the Metropolitan Police district in 1980, 127 in 1981 and 148 in 1982.

Crime Watch slogan displayed outside the village of Stansty, North Wales, "The people in this area are aware of the dangers and are looking out for each other".

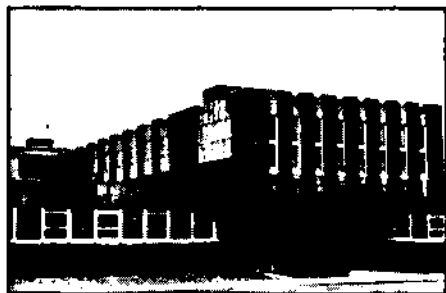
Bedfordshire Police recorded 31 burglaries from chemist shops in 1982.

To avoid attendance at Caernarfon Crown Court, a defendant sought a doctor's certificate. This was duly presented by the defending counsel, exusing his client on the grounds that he had 'plenty of pain'.

Learned counsel, however, was outflanked by His Lordship. The judge demanded to see the certificate, and deciphered 'plaster of paris' in place of 'plenty of pain'.

The defendant, whose complaint was a broken tibia, was ordered to attend on crutches.

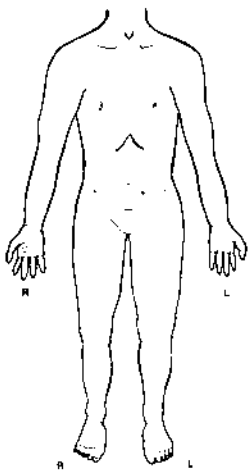
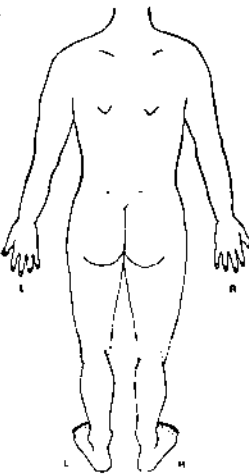
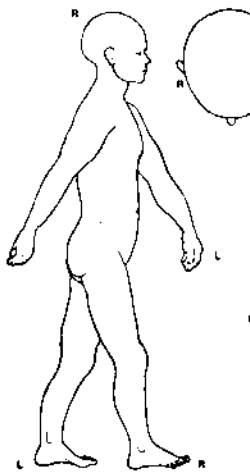
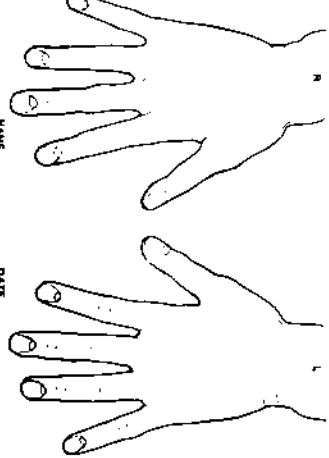
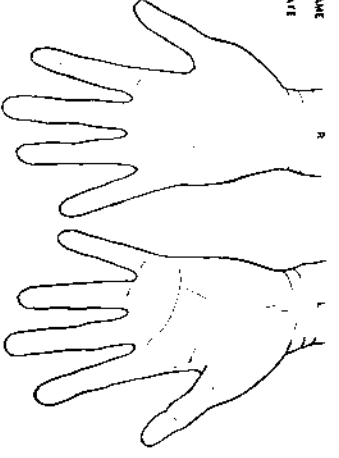
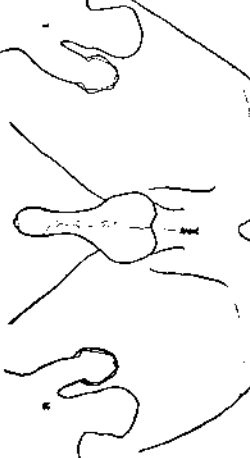
The new Home Office Forensic Science Laboratory at Hinchinbrooke Park, Huntingdon, Cambridgeshire, was officially opened on 13th May. Representing the Association were the President, Dr. James Hilton, and the Secretary, Dr. Hugh de la Haye Davies.



BODYSKETCHESBODYSKE

A series of body sketches for recording injuries, marks, etc. are now available. They are printed on A3 sheets, but may be easily divided into A4 sheets if required.

- Sheet 1. Body — anterior and posterior views.
- Sheet 2. Body — left and right sides and soles of feet.
- Sheet 3. Head and Neck — anterior, posterior and lateral views.
- Sheet 4. Hands, left and right — dorsal and palmar views.
- Sheet 5. Genitalia — male and female.
- Sheet 6. Child — anterior, posterior and lateral views.

<p>NAME _____ DATE _____</p> 	<p>NAME _____ DATE _____</p> 	<p>NAME _____ DATE _____</p> 
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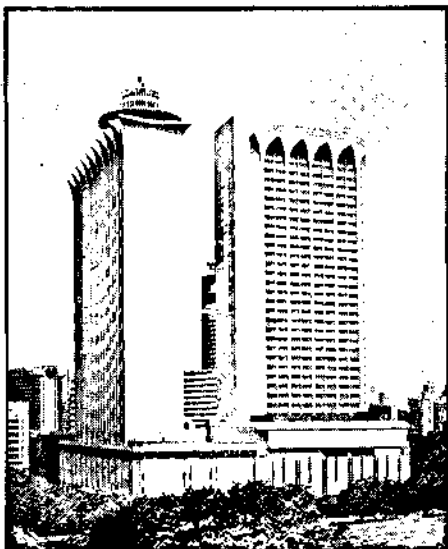
The organisational problems posed by several hundred delegates, many with their spouses, is enormous. Add to this the requirements for presenting four plenary sessions, 12 symposia (with four or five speakers to each symposia) and 19 free paper sessions (again with four or five speakers to each session) and cram all this into one hotel and you have the makings of an outsized headache for the organisers.

It must be said at once that the organisation of the 1st Asian Pacific Congress on Legal Medicine and Forensic Sciences, held at the Mandarin Hotel, Singapore, was impeccable. From the time of registration to the final departure, the Congress ran superbly. The varied fare offered, both in the lecture theatres, the social programme and in the sights and sounds of Singapore, ensured that the delegates had, in addition to an academic feast, a most enjoyable time.

The Association of Police Surgeons was represented by Drs. Filer, Patuck, Doney, Kean, Turville, Paul, Cramer, McClatchey and Clarke, many of whom were accompanied by their spouses. Also present were Professors Bowen, Johnson, Gee, Knight, Mason, Mant, Kind and Marshall, together with Dr. Ben Davies, Mr. Bernie Simms, Dr. & Mrs. Barend Cohen (Holland) and Dr. & Mrs. Peter Bush (Victoria, Australia).

Most of the proceedings took place in the Mandarin Ballroom, an enormous room well capable of holding over 1,000 people. The plenary sessions and symposia were open to all and commenced at 8 o'

clock in the morning. During the morning coffee break, the Ballroom was divided into three by sliding partitions and for the rest of the day there were three concurrent sessions. Speakers timings were possible to pick and choose the lectures which one attended. Young policemen from the Singapore Police Force operated the slide projectors and timed the speakers. As most of the speakers wished to present slides, this presented a considerably organisational problem, but by using a small mountain of Kodak Carousel magazines, apparently borrowed from institutions all over Singapore, the correct slides were ready for each speaker when required.





英国布里斯托
警医官隆尼医生

中性人应在婴儿时期 接受手术确定性别

——英国警医官隆尼医生

英国的法律并没有对男性与女性的不同下明确的定义，这就使得一些同时具有男女性器官特征的人在社会上遇到很多以性别所引起的不便及困难。

英国布里斯托警医官隆尼医生昨日在法医学大会上从法医的观点，对中性人的问题发表了一些意见。

他说，世界上有许多人的性别是介于标准的男性与标准的女性之间，他们可称为中性人（intersex），譬如具有男与女性性器官的特征的两性人、假两性畸形人、换性人等等，这些人在军事法律上，在体育项目上或甚至在保险条例上，多会遇到难于决定他们的性别的问题。这时候，法医和律师们就可提供他们的专家意见。

隆尼博士也以英国的

例子说明了这些中性人会遇到的一些问题。他说，这些生来带有两性性器官特征的人，假设在婴儿时期就动外科手术固定他们的性别，那么这些人还是可以像正常人一样的生活下去。假设这些人没在婴儿时期就肯定他们的性别，而是到了十六七岁才自觉要肯定自己的性别而寻求律师的协助，过程就不那么容易。再者，英国的养老金法律规定男性公民要到六十五岁才可领养老金，女性公民则要等到六十岁，所以，这些性别不明确的人在这方面就会遇到许多麻烦。

(146PVH)

Dr. Doney's paper was reported at length in the local press.

After an introduction by Professor Chao Tzee Cheng, the Congress was formally declared open by Mr. Chua Sian Chin, the Minister for Home Affairs. He was greeted by a northern Chinese lion dance and this was followed by a display of Chinese pugilistic skill by the Singapore Chinwoo (Athletic) Association, a performance which included a sword dance and a flag dance. The opening ceremony was concluded by an excellent buffet dinner attended by all the delegates and accompanying persons.

Any delegates who thought they were in for a relaxing conference received a rude awakening on finding that the lectures continued from 8.00 a.m. to 5.45 p.m. on three of the five conference days. The first day alone included 59 papers; the free paper sessions were limited to ten minutes with five minutes for questions.

Elsewhere in the hotel were held poster sessions, exhibitions of various scientific techniques which could be studied at leisure.

It is impossible, in this short report, to mention more than a few of the papers presented. Most of the delegates from the United Kingdom gave papers, including a number by Police Surgeons. Ivor Doney suggested that in mass disasters chiropodists could help in identifying victims, par-

Professor Chao Tzee Chang.



ticularly in cases where the head had been severely mutilated. During the discussion following this paper, an American Naval Surgeon stated that charting of the feet of naval crews was being undertaken, because in cases of death occurring due to fire very often the lower limbs, protected by thick boots, are the last part of the body to be destroyed and in these cases identification would only be possible with foot charts.

Betty McClatchey described a Northern Ireland case, in which the body of a man was found lying in a roadway dead from multiple stab wounds. It was at first thought to be a political or sectarian murder, but investigations later showed that the 19-year old daughter had killed her father, who had, for the four previous years, been having sexual intercourse with her, and three of the children had carried the body out into the street. The man had made the family's life hell. The daughter received seven years for manslaughter, but was subsequently pardoned when the Royal prerogative of mercy was exercised.

Betty McClatchey's paper was part of a Symposium on the Geographical Problems in Sex Crimes. Dr. Frederick Ong, from Hong Kong, reported that many illegal immigrants into Hong Kong fall victims to sexual assaults by sexual

opportunists and allegations of rape, both genuine and false, are made to the police. He commented that, whilst in Singapore, Chinese women are not keen to make allegations of rape, the Chinese illegal immigrants in Hong Kong make the allegation in order to gain time to contact their relatives in Hong Kong.

Peter Bush (Victoria, Australia), gave a paper describing a series of sexual offences involving 87 complainants and witnesses, 46 suspects and more than 220 offences which took place over a period of more than a year. They included sexual penetration of all body orifices, assaults, threats and the use of other intimidating objects, such as a beetle, a broomstick and an electric drill. Of the 46 suspects, 16 were charged with the 220 offences. The girls were aged between 12 and 16 and were too scared to go to the police. The case involved 40 detectives, court proceedings took three years and one victim had to make seven court appearances.

David Filer presented the findings of the Association's Death in Custody Survey. He concluded that deaths in custody were rare and were a good reflection on the common sense of police sergeants and the clinical acumen of Police Surgeons. A delegate from New Zealand commented that since the offence of drunkenness had been decriminalised,

Dr. David Filer



Professor David Gee



drunks being taken home or to detoxification centres, the numbers held in custody in a year dropped from 9,000 to 1,000.

Dr. Jose Ferrer, from the office of the Medical Examiner-Coroner, San Francisco, gave an extraordinary insight into the homosexual practises in that fair city. Homosexuals advertise their preferences by wearing an ear-ring in one or other ear, or sporting a bandanna in one or other pocket. All is not as it seems, as one man found out when he was warned "that little filly is a stallion in drag".

The Congress social programme ensured that accompanying persons were entertained during the Congress with tours of the City. The highlight of the social programme was a visit to the Victoria Theatre for a selection of Chinese, Indian and Malaysian dances and songs. This colourful entertainment was immensely enjoyed by all who attended.

The 40-storey Mandarin Hotel, with its comfortable accommodation, shops, restaurants and bars, was an excellent venue for the academic proceedings. However, a bottle of whisky at S\$180 (exchange rate S\$3.10 to the £), beer at S\$7 per small can and champagne at S\$295, acted as a deterrent to delegates meeting in bars after the lectures. After meetings, delegates disappeared to their rooms (for the

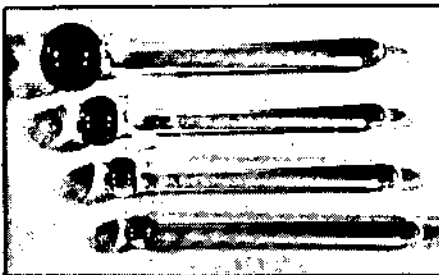
duty free), or out into the city for more reasonably priced entertainment. Consequently, the informal get-togethers, which are such a useful part of many conferences did not feature greatly in this Congress.

The 2nd Asian Pacific Congress on Legal Medicine and Forensic Sciences 1986, may be held in Sri Lanka. Whilst the academic proceedings of the Singapore conference could not be bettered, future congress organisers might consider the deterrent effect of exorbitant prices on informal contacts and exchanges of ideas.

Conference fatigue



Dr. Barend Cohen



GLAISTER'S GLOBES

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success to find some for years".*

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Merseyside, L36 5 SJ. England.



A few days after the Singapore Congress, the 8th Australian International Forensic Science Symposium was held in Perth, Western Australia. A number of delegates, including some from the United Kingdom, flew from Singapore to Perth, arriving at the Freeway Hotel at about four in the morning. The contrast between the Mandarin Hotel and the Freeway Hotel could not be more marked. The latter is a large motel currently in the process of modernisation, typically with the site of the swimming pool occupied by a busy bulldozer. With only one cheerful Australian on duty to greet overnight arrivals, delegates had to carry their cases and find their own rooms amidst the unlit hazards left by the builders.

This was an inauspicious beginning to what proved to be a most enjoyable and sociable conference.

Although primarily a forensic science meeting, there was much to interest the forensic physician and during specialist sessions short papers were given by Drs. Clarke, Doney, Bush, Kean, Cramer, Turvill and Patuck.

Following the official opening by Mr. J. Carr, the Honourable Minister for Police (Western Australia), the opening paper was given by Professor Stuart Kind. He emphasised the importance of communication in the forensic sciences, usually noted when it breaks down. Unless the scientist can communicate his findings clearly, both in writing and in

the witness box, with precision — that quality which generates the least amount of confusion — he runs the risk of being misinterpreted.

Professor Tom Marshall (Northern Ireland) described the establishment of the full time forensic pathology service in Northern Ireland, now with four full-time pathologists. Northern Ireland is the only part of the United Kingdom with a forensic pathology service provided by the government and Professor Marshall criticised the arrangements in the rest of Britain, where forensic work is done by Home Office pathologists on a part-time basis and by local pathologists on call to coroners — a system he described as a hotch-potch on a fee basis with variable standards and no career structure.

Dr. Thomas Naguchi's paper on the Standards of Medico-Legal Investigative Systems, as established by the National Association of Medical Examiners (U.S.A.) complemented Professor Marshall's lecture. A particular problem in the U.S.A. is the political influence in medico-legal appointments. NAME maintains a periodic inspection and accreditation programme for Medical Examiners Offices, with accreditation being awarded to the Office when it meets the high standard expected.

We do not expect attractive women to shoot pigs and sheep and observe their decomposition. This is what Beryl Morris of the South Australian Museum did in a

study of maggot development in cadavers as an aid to determining time elapsed since death. Egg laying by flies may take place within minutes of death and in different species infest the carcasses in different numbers at different times. Large numbers of maggots raise the carcass temperatures significantly.

On the closing day of the conference, Colonel Ari Van den Bos of the Dutch Disaster Victim Identification Team, had as his motto "Be Prepared". The equipment for the Dutch D.V.I. Team is comprehensive and packed ready to move at a moment's notice; the Dutch set standards which should be emulated throughout the world. Those leaving Perth by air later the same day, will undoubtedly have studied the pictures of air craft disasters with particular care.

The final paper of the Conference was given by Joy Kuhl of the Division of Forensic Medicine, Sydney. She was the forensic biologist who gave evidence in the Chamberlain (Dingo) case and her paper gave a fascinating insight into the problems of a forensic scientist giving evidence in a murder trial without a body.

During the Perth Conference, Police Surgeons had the opportunity to visit the Sexual Assault Referral Centre and this is reported elsewhere in this issue.

Away from the lectures, the keynote was informal hospitality. Throughout the conference in the evenings there was a hospitality room, where delegates could foregather and drink unlimited quantities of free beer. The programme for those accompanying delegates was varied, comprehensive and thoroughly enjoyable.



Informal Proceedings — Mrs. Helen Bowen, Mrs. Gillian Keen and Dr. Peter Bush.

Perth is a beautiful city with excellent shops and spring is the ideal time to visit Western Australia.

The highlight of the social activities was an afternoon tour for delegates and spouses followed by an evening barbecue. A visit through the bush to a bauxite mine, a land reclamation project after mining and a dam, ended with a visit to a long established bush hotel for the best meal of the conference — vast quantities of barbequed steak and other meats with salads and vegetables, and enormous delicious pavlovas, all washed down with liberal quantities of beer and fine Australian wines. It was a suitable

Dr. Phyllis Turville



Dr. Tom Naguchi



Australian Pub



occasion to celebrate the winning of the America's Cup by the team from Perth.

The Western Australian Branch Committee of the Australian Forensic Science Society (organising secretaries Derek Pocock and A.M. Stenhouse) may have had doubts as to the success of the conference, having been earlier informed that the Freeway Hotel's modernisation scheme would have been completed prior to the meeting, but they need not have worried. The Conference was a tremendous success both socially and academically. APSGB members considering going to the AAPAPMO Conference in Melbourne in February 1984, can be assured that, if the Perth Conference is a reasonable representative of Australian meetings, then the Melbourne Conference will be a bonza!

AAPAPMO CONFERENCE

The Fourth Meeting of the Australasian and Pacific Area Police Medical Officers

will be held at Trinity College, University of Melbourne, Parkville, Victoria, Australia, from 13th-18th February 1984.

Trinity College, a part of the University of Melbourne, provides comprehensive facilities, comfortable accommodation in single and twin-bedded rooms in an oasis near Melbourne, the capital city of the State of Victoria. The city centre is ten minutes away by tram.

The Conference Programme will include lectures on forensic medical topics, matters which relate to police health and stress in police work. There will be discussions on current or recent Australasian forensic, judicial or police medical matters of interest and there will be demonstrations of police activities of interest and value to Police Surgeons. There will be a full programme of social activities including opportunities to visit some of Victoria's scenic and historic gems.

Further details from Dr. J. Peter Bush, Hon. Secretary, A.A.P.A.P.M.O., Police Surgeon's Office, Police Offices, 376 Russell Street, Melbourne, Victoria 3000, Australia.

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PERTH SEXUAL ASSAULT REFERRAL CENTRE

In 1975 Dr. Derek Pocock, Forensic Pathologist, was asked by the Western Australian State Police if he would undertake the examination of a rape victim (still alive) in his morgue. Declining, Derek suggested that his wife, Carol Deller, was better suited to undertake the examination and this she did at a Family Planning Centre.

Within a few months the Perth Sexual Assault Referral Centre, (S.A.R.C.), was established and it is now established in the Queen Elizabeth II Medical Centre, Sir Charles Gairdner Hospital.

In the State of Western Australia there are no Police Surgeons. If the police require a medical examination of the living a succession of doctors is contacted until one is found willing to undertake the examination, usually in a hospital. It is a situation reminiscent of that pertaining in many parts of the United Kingdom some years ago.

At about the time of Carol Deller's first rape examination two cases caused an uproar in the State. A woman dancing teacher was sexually molested. When she reported the assault to the police she was badly treated and was told that she had imagined the assault. An aboriginal girl who had been raped ended up in police custody accused, falsely, of wasting police time. The State Government approached the Hospital Board of Management and within a few weeks of agreement being reached to set up the centre, the Sexual Assault Referral Centre opened on 5th January, 1976. Just over a year ago the Centre moved to a purpose-built unit in the Queen Elizabeth II Medical Centre, Sir Charles Gairdner Hospital. It is the only S.A.R.C. in the State.

A party of U.K. Police Surgeons, attending the Perth Conference, together with colleagues from Australia (other than Western Australia) and one from



Dr. Carol Dellar Pocock

Holland, were fortunate in being able to visit the S.A.R.C. where they met Carol Deller Pocock, the Clinical Co-ordinator and Sue Rowell, the Senior Social Worker, who plays an important part in assisting sexual assault victims. The centre itself is on the periphery of the hospital casualty department. The small unit is unsigned and comprises three rooms. At one end is a fully equipped examination room, with all necessary equipment ready to hand. At the other end of the unit is a small but comfortable lounge. A cupboard holds spare clothing, in case the sexual assault victim is unable to supply replacement clothing into which to change when her own clothing is sent off for forensic examination. Between the two rooms is the third, which contains a handwash basin, toilet and shower unit.

The unit is state-financed. Carol Deller is paid at the rate of one session per week (approximately paid A\$3,400 a year) to run the unit. She is assisted in rota by six

women doctors, who are all Family Planning Doctors. All seven doctors receive a flat rate fee of A\$75.50 for each case.

There are four social workers headed by Sue Rowell, who are specially trained in sexual assault problems. In addition there are four counsellors, who act as informed supportive friends for sexual assault victims should they present at the Unit out of normal working hours.

Sexual assault victims are either referred to the clinic by police or may appear at the clinic as self-referrals. The telephone number of the S.A.R.C. is listed with the emergency telephone numbers at the front of the Western Australia telephone directory. Self-referral victims are encouraged but not obliged to report to the police.

The suite of rooms is for the exclusive use of the S.A.R.C. Victims of 13 and over are seen at the Queen Elizabeth II Unit, whilst children under the age of 13 are seen at a similar unit at the Princess Margaret Hospital. About 200 sexual assault victims are seen each year.

The Forensic Pathology Laboratory is immediately adjacent to the Queen Elizabeth II Medical Centre, so that there is little delay in presenting biological specimens for examination.

Social Workers and Counsellors are trained in crisis intervention and supportive techniques. The Social Worker or Counsellor, who sees the patient at the initial interview, is also available at subsequent interviews and supports her during any subsequent court hearings. (In the State of Victoria, the Policewoman who takes the initial statement of complaint

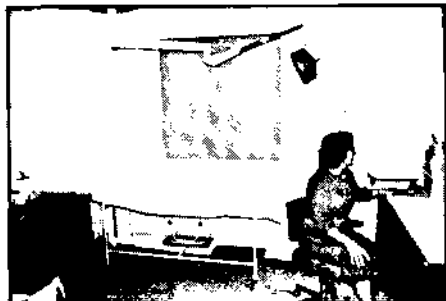
now accompanies the victim during subsequent court proceedings).

Every effort is made to preserve confidentiality. Social work notes are sealed and may only be opened by the head of the social workers department. The doctor's notes are taken out of the hospital to the doctor's home. The only details on record in the hospital, apart from the name of the patient, refer to any physical injuries which have been treated by the hospital doctors.

All initial and subsequent tests for sexual transmitted disease are done by the S.A.R.C. doctors. The morning-after pill and treatment with Amoxcil and Probenecid is offered at the time of initial examination. STD follow-ups are made after one week and three months and pregnancy checks are made after one month.

Sexual assault victims are entitled to compensation. At present a rape victim receives up to A\$15,000.

The Perth Sexual Assault Referral Centre appears to adequately deal with many criticisms levelled at the present system in the United Kingdom. Victims who do not wish to involve the police receive compassionate and confidential treatment, and are seen by competent and experienced physicians. Chance cross-examination of trace evidence does not occur, as alleged assailants are seen elsewhere. Forensic samples are immediately sent to the forensic laboratory, eliminating the problems associated with storage of samples in police stations prior to transportation to the laboratory. Most importantly, the after-care of the victim is not fragmented, as it is in the U.K., and the tactful and discreet follow-up enables victims to become more easily "rape survivors".



**BODY SKETCHES
NOW AVAILABLE
SEE PAGE 38**



CRIME CASE SAMPLES

Control Samples of Pubic Hair

In future hairs cut *next* to the skin will be accepted in place of pulled samples. Samples should contain 10–25 hairs.

Cervical Swabs

Comparative work in the persistence of seminal constituents in the human vagina and cervix (Wilson, E.M., *The Police Surgeon*, 1982, 22, 44), has shown that after 2 days there can be a greater chance of finding spermatozoa on cervical rather than vaginal swabs. Therefore if the time interval between an alleged rape/unlawful sexual intercourse and the medical examination is 2 days or more, a cervical swab should be taken in preference to a high vaginal swab.

Saliva Stains

Possible saliva stains on the skin should be removed by swabbing. If the stains are dry the tip of the swab should be moistened with distilled water. If distilled water is not available tap water can be used instead, *but this should be mentioned on the Sexual Offences Examination Form*. Saline should not be used.

Samples for drug analysis in alleged assault – value of urine specimens

The Laboratory's view point has always been that, where analyses are required to detect the presence of drugs, the best results are obtained from the combination of a blood and urine specimen, from living persons.

The constraints of the Road Traffic Act means that we have to choose in cases brought under the Act, and our recommendation then is that we prefer blood. These restraints do not apply in crime cases, however, when urine can be a valuable specimen, particularly when the incident took place some time before specimens were taken. In one or two recent cases, for example, in which drug use was alleged, blood specimens alone were supplied, although the incidents took place nearly a day before the examinations. Urine specimens would have been more likely to have given meaningful results in these instances.

ROAD TRAFFIC ACT

Medically unfit to hold a driving licence

A police surgeon recently raised the problem of the action to be taken, if he/she had examined a driver under The Road Traffic Act, 1972, and considered that the driver was medically unfit to hold a driving licence.

It is suggested that if you suspect that a person is medically unfit to hold a driving licence, that you bring the matter to the attention of the police at the time of the examination. The matter will then be reported direct to the medical branch of the Driver and Vehicle Licensing Centre for the Department of Transport to review the person's right to hold a licence.



Dr. Eddie Josse



Dr. Richard Foxton

Photo: Mike Ford Photography.

BIRTHDAY HONOURS

Two Police Surgeons received awards in this year's Queen's Birthday Honours.

Londoner Eddie Josse was awarded the O.B.E. His list of duties includes the post of Secretary to the Joint Committee for Postgraduate Training in General Practice and membership of the Council for Postgraduate Medical Education. He is also a B.M.A. Council Member, Chairman

of the General Practice Advisory Committee, and a member of the G.M.S.C.

Dr. Richard Foxton, of Scunthorpe, was awarded the M.B.E. A G.P. for 37 years and a Police Surgeon for the past 25 years. He says he is not sure why he had been picked out for the honour. He has served on his L.M.C. since 1962 and is a member of this D.H.A.

WINTER SYMPOSIUM

The 1984 Winter Symposium will be held on Saturday, 28th January, at St. Thomas's Hospital Postgraduate Centre, Sponsor Professor Hugh Johnson, Chairman Dr. Charles Clark.

The provisional list of speakers includes Professor Keith Mant, Professor James Cameron, Professor Hugh Johnson and Dr. Ray Williams, Director of the Metropolitan Police Forensic Science Laboratory.

Formal lectures will be between 9.15 a.m. and 1.15 p.m. and there will be an informal session after lunch.

Symposium Fee £10.00, which will include coffee, sherry and buffet lunch. There is doubt whether this meeting will receive Section 63 approval but expenses may be claimed against income tax.

Provided there is sufficient interest, there will be an evening meal possibly at the Cafe Royal.

The Symposium Booking Form will be circulated later.

Symposium Organiser —

Dr. David Jenkins,
51 Manor Way,
Blackheath,
London SE3 9AN.
Tel. 01-852 7448.



Photos: Pulse

Concentration at 32 m.p.h.

RAINE ROBERTS

Dr. Raine Roberts, who has spoken twice at Association meetings this year, has been involved in the examination of sexual assault victims since 1975. She is Veteran Ladies Slalom Water Skiing Champion for the United Kingdom and indeed has been Champion for the last three years. Her children Philippa and Simon are both international water skiers and both have been European Junior champions.

Philippa, who is now medically qualified, has twice been the United Kingdom Ladies Champion and she secretly entered her mother for the Veteran's Championship.

Simon is a medical student. Raine's husband is a General Practitioner, plays golf and gives support from dry land.

Smile of Success



Views expressed in "The Police Surgeon Supplement" are not necessarily those of the Association of Police Surgeons of Great Britain.

BOOK REVIEW

NOTES TAKEN AT THE TIME

True stories from the beat . . . £2.50

Police Review Publishing Co. Ltd.

40 Police Officers were asked to recall one incident in their career in this collection of stories and, very typical of Police Officers, all royalties will be for the benefit of a charity.

Police Surgeons especially will find these unpretentious recollections highly amusing for they will probably bring to their remembrance similar events which

may have occurred during their work with the Police. The reader will have the added satisfaction that he has contributed to the funds of The Police Pensioners Housing Association.

Panjandrum

The list of papers to be read on Alcohol and Related Diseases at a recent Advanced Medical Conference read as follows:

9.15	Alcohol in the blood
10.15	Alcohol in the liver
11.15	Alcohol in the pancreas
11.45	Alcohol in the heart
12.15	Alcoholism
12.45	Bar opens

The Guardian



Police Review.

DRUGS

"Body Packer Syndrome" is the term applied to the ingestion of packages of drugs as a means of smuggling. A study of 75 suspected cases carried out in Los Angeles prison hospital wards, a change suggested from the usual surgical intervention to treatment by purgation with concentrated psyllium hydrophilic mucilloid, together with sodium sulphate or magnesium citrate cathartics.

75 persons were arrested on disembarking from flights from Columbia — 63 males and 12 females. Cocaine packages were recovered from 48 (64%). The number of packages per individual ranged from 15 to 175 and were of three types — condoms, latex glove fingers or toy balloons. These are easily identifiable on an abdominal X-ray and 12 of the 48 patients had such packages. The other 36 had packages made of multilayer tubular latex, which is more resistant to breaking or leeching.

Each drug package contained 5-7 gm. cocaine and, as fatalities have been reported with 1-3 gm, the rupture of only one package is potentially fatal.

47 of the 48 patients were successfully treated, the remaining patient developing intestinal obstruction, which required surgical intervention.

JAMA 1983, September 18th.

A 22-year old labourer swallowed 375 capsules wrapped in rubber containing £48,000 worth of heroin. He collapsed and died two days after passing through customs. The Battersea Coroner, Dr. Paul Knapman, recording a verdict of misadventure in November, said:

"If you are a courier of a drug of death your intimate body search may be by a pathologist in a mortuary."

The blood level of heroin found in the man's bloodstream was 100 times the therapeutic dose.

Police Surgeon, Dr. Alan Wallace, of Salisbury was found not guilty at Winchester Crown Court in August on charges of unlawfully supplying Diconal tablets. The Crown Court heard that Alan was fooled by the patient, described as a vagrant alcoholic, with colourful but plausible stories. The patient sold the tablets for up to £5.00 each and used the money to buy drink.

Several other G.P's in the south of England had stopped treating the patient when they received a warning circular from Surrey Family Practitioner Committee. However, Dr. Wallace's F.P.C. — Hampshire — did not distribute the circular to G.P's and Alan Wallace received no warning.

Alan Wallace is an experienced General Practitioner and a Police Surgeon of repute. The case underlines the need for constant vigilance in dealing with drug addicts and drugs of addiction, whether it be in the Police Station or the G.P's Surgery.

A man who swallowed a plastic bag containing cocaine after police arrested him on suspicion of driving while unfit through drink or drugs died of cocaine poisoning when the bag split in his stomach, an inquest at Westminster was told in November.

A 29 year old Spaniard was jailed for five years at the Crown Court in Chichester, West Sussex, in November after he had admitted to smuggling cocaine valued at £76,500 into Gatwick Airport from South America.

The Court was told that he had swallowed 150 small capsules, the size of grapes, containing the drug. Arrested by Customs officials at Gatwick, he was examined by a doctor and kept under observation for 2½ days until all the capsules had been recovered.

The Times

A 44-year old Cheshire housewife charged with driving whilst unfit through drink or drugs, denied having taken drink and blamed a helping of sherry trifle.

The Magistrates Court was told that she gave a realistic performance of being a deaf mute when police interviewed her following a near miss with a patrol car.

Police Surgeon, Dr. Andrew Maxwell Dickson, told the court, "She smelt of alcohol and was pretending to be deaf and dumb, using her own sign language. I thought it was a rather original ploy to avoid taking the breath test. It was the most unusual excuse I had ever come across.

Signorina Giulia Borelli appeared with her boy-friend, Enrico Galmozzi, in court in Turin during a mass terrorist trial, which started in June.

It is believed that Borelli, who has served 16 months of a life sentence for double murder, was made pregnant by Galmozzi in a crowded courtroom during comittal proceedings earlier this year. She is thought to be expecting twins.

Daily Telegraph

Q. What do you get when you cross lawyers with homosexuals?

A. Legal AIDS.

POLICE SURGEON



A clear Case for the Association Accident Insurance Policy See opposite page.

Police Review

Stuart Kind has now retired from the Home Office and is no longer a civil servant. He is now a full time consultant to the Home Office Forensic Science Service and is to write a book, addressed to detectives and their specialist professional advisers, on "The Scientific Investigation of Crime".

The book will not concern itself with specialist techniques but will (1) identify the scientific aspects of the design of the investigation itself and (2) describe the place and potential value to the investigator of the various specialisms. Stuart will visit various medical, police and scientific colleagues for discussions. Any police surgeons who are interested in the project are welcome to contact him.

He is succeeded as Director at the Wetherby Laboratory by Dr. Keith Feenan, previously Assistant Director at Huntingdon.

DEATHS

We regret to record the following deaths:—

Dr. J.W. Brown, Winchester
Dr. J.A.G. Clarke, Dudley.
Dr. K. Jepson, Sheffield.
Dr. C. Sutherland, Lifton, Devon.
Mr. F.L. Cann, formerly Hon. Secretary of Forensic Science Society.

To mark his year as President of the B.M.A., Prince Charles was presented with a decanter and six goblets at Kensington Palace in June.

The glassware was hand-engraved by Police Surgeon Ralph Lawrence, a B.M.A. Council member, who took up glass engraving 11 years ago. The commission took six months to complete, each goblet alone taking 50 hours' work.

ACCIDENT INSURANCE

The significant risks run by Police Surgeons whilst performing their duties and the ever present risk of assaults on Police Surgeons by prisoners has prompted the Association to arrange insurance cover for members.

The insurance cover arranged would have the following benefits:—

1. The Group Personal Accident policy would be underwritten by the Norwich Union Fire Insurance Society Limited.
2. A once only payment of £20,000 would be made in the event of death, loss of an eye or eyes, or the loss of limb or partial total disablement.
3. After seven days of temporary disablement through accident, the sum of £100 per week would be payable for

a total of 104 weeks.

4. Benefits would be paid only whilst the Police Surgeon was on police business, but this would include travelling to and from incidents.
5. Benefits would be paid should the Police Surgeon suffer disablement as a result of an attack during the course of his duty.
6. The cost of the policy is £7.20 per person per annum.

If you are interested, further details may be obtained from the Association's Secretary, Dr. H. de la Haye Davies, Creaton House, Creaton, Nr. Northampton NN6 8ND. As the policy is a group policy premiums are payable in the first instance to the Association.

POLICE SURGEON EVIDENCE

A report in the Sunday Times alleging torture of a suspect using a plastic bag in the West Midlands Police Area, has led to the suggestion that there might be a conflict of interest for Police Surgeons examining prisoners alleging Police brutality.

Denying the existence of any conflict, Dr. Hugh de la Haye Davies, Association Secretary, said that there was no dilemma when a Police Surgeon found suspicious marks on a patient. Dr. Davies emphasised, "We are independent medical referees, servants of the Court and the public. The Police would not want it any other way because they are as keen as anyone to get rid of any bad apples."

West Midlands Police are investigating an allegation that a man was forced to sign a statement after Police had tortured him by placing a plastic bag over his head. The Sunday Times alleged that Dr. Jay Chitnis, who examined the prisoner, found petechial haemorrhages.

In September 1983, a man who was arrested during the 1981 riots at Cantril Farm, Liverpool, was awarded £3,500 damages by a County Court Jury. Evidence was given by Merseyside Police Surgeon Myles Clarke, who examined Mr. Derek Lyons, 23, at Huyton Police Station. He said that he found five lacerations to the head which required 22 stitches. A Police Officer admitted striking Mr. Lyons two blows on the head. Dr. Clarke also commented that he found marks on Lyon's body consistent with baton marks.

In November 1982, Mr. Lyons was found not guilty of riotous assembly by a Jury at Liverpool Crown Court.

Two jolly bacteria were swimming and frolicking in the renal vein of a horse. They decided to swim off and explore a tributary vein but a phagocyte was lurking there in the dark and he gobbled them up. The moral of the story is "never change your stream in mid-horse".

MEDICAL INSURANCE AND ADVISORY SERVICE

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- LIFE ASSURANCE
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BATMOBILE 1983 STYLE

The Batmobile, for years the property of Batman and Robin, is now working in the Police Department in Albuquerque, New Mexico, in the United States. It is a breath-alcohol testing mobile unit, which enables the Police to take an Intoximeter to any place required. It is additionally equipped so that four prisoners can be seated and secured. The only other Intoximeter in Albuquerque is in the Central Booking Office and to reach that the Police Officers might have to drive as far as 28 miles with a prisoner.

The Batmobile has increased the speed at which offenders may be booked to less than 30 minutes and arrests have increased by 75%. However, working in the Batmobile is very stressful so the Department limits a stint on the vehicle to 30 days.

Police Review

BODY SKETCH SALES

The initial printing of 30,000 sheets (5,000 copies of each of the six drawings) has now been sold out and a further reprint has been ordered. This is quite remarkable considering the sketches have only been on sale for seven months. 10,000 drawings were sold during the Scarborough Conference. A number of police forces have purchased sets of drawings for use by their police surgeons. Two complete sets have been sent to New Zealand. See page

Former Devon & Cornwall Chief Constable, Mr. John Alderson, has been appointed Visiting Professor to the Centre for Police Studies at Strathclyde University, Glasgow.

Mr. Alderson was Chief Constable of Devon & Cornwall from 1973 until 1982. Mr. Alderson addressed Association delegates at the 27th Annual Conference held in Torquay in 1978.

ASSOCIATION OF POLICE SURGEONS OF GREAT BRITAIN

**33rd ANNUAL CONFERENCE — PEEBLES
21st -26th MAY 1984**

Why not present a paper or item for inclusion in the Conference?

Are you daunted by being expected to talk for at least 30 minutes?

I am looking for:

1. *Short papers of not more than 15 minutes*
2. *Quick items — a single picture that illustrates a useful clinical picture, a single event reported that may make us all think, a question or conundrum resolved or not. Quickies or clinical curiosities should take no more than 5 minutes to present.*

Most members should have at least one oddity to share with us. The Conference should present members work and experience to others. We are the only organisation dealing exclusively with clinical forensic medicine, yet we rely on the Police, Forensic Pathologists and Lawyers to provide much of the material for our Conferences. Let us share the wide experience of our membership.

If you have an interesting case, a clinical curiosity or short paper which needs to be let out will you please let the Conference Secretary know by writing to me — Dr. T. I. Manser, Whitelears, Bridgetown Hill, Totnes, Devon TQ9 5BN.

INTERNATIONAL CO-OPERATION

An informal meeting was held at the Royal Hotel, Scarborough on Wednesday, 18th May, 1983, during the Annual Conference of the Association of Police Surgeons of Great Britain. Representatives of A.P.S.G.B., F.M.G. (Holland) and A.A.P.A.P.M.O. were present as follows:-

Chairman: Dr. J. Hilton, President

A.P.S.G.B.

Dr. Hugh de la Haye
Davies

Dr. Myles Clarke

Dr. Ivor Doney

Dr. James Dunbar

Dr. H. Cremers, F.M.G.

Dr. W.J. Treadwell,

President A.A.P.A.P.M.O.

Dr. J. P. Bush

Mr. Richard Walter (U.S.A.) was present as an invited observer.

The meeting received the record of the previous meeting held at the Palace Hotel, Torquay, on 21st May, 1982, and ratified the recommendations made at that meeting.

The report of increasing co-operation and communication between the Associations of Police Surgeons/Medical Officers was welcomed as evidence by —

1. Exchange of journals
2. Increasing international representation at meetings

The meeting considered proposals from Dr. William Eckert, presented by Dr. Doney.

It was agreed that —

1. No specific need for an additional organisation had been established at the present time.
2. The development of clinical forensic medicine be pursued vigorously within individual associations and by increasing communication and co-operation between Associations and with members of organisations in other disciplines of forensic science.
3. Further discussion be held at the meeting of the I.A.F.S. in Oxford in September 1984.

4. Professor S. Kind be so advised and requested to arrange for such meetings within the framework of that Conference.

ALCOHOL DIPSTICK

An alcohol dipstick has been developed to determine the level of alcohol in saliva, urine and blood serum. The reagent pad turns pink/red and can be matched against a six point colour coded scale. It is claimed that the dipstick, developed at the Addiction Research Foundation, Toronto, gives an accurate reading of the range of alcohol from 0% to 16% or more (160 mgms plus).

Lion Laboratories of South Glamorgan produce a variation of the Alcolmeter similar to the one used by the Police as a breath screening device, which has a L.E.D. display. It is claimed by the Laboratory that this instrument would be of considerable value, particularly in Hospital Casualty Departments, where an accurate breath-alcohol reading may be of considerable diagnostic importance.

DONEYISMS

"What can we get the Superintendent for his birthday?"

"How about a nice book".

"He's got a book".

"If you're forming a Police Band, Sergeant, you must get P.C. Jones. He can play a fiddle. He can even play it pizzicato. In fact he can play it in any condition".

Sergeant:

"What's this I hear Constable Jones? Your wife has had *another* baby? You'd better hurry down to that cut price clinic and get a cheap vasectomy before it goes up again."

*Perhaps you think his jokes are bad,
But you quickly change your views,
If you'd compare the ones we print,
With the ones we couldn't use.*

POLICE AND CRIMINAL EVIDENCE BILL

The earlier Police and Criminal Evidence Bill, sections of which were strongly opposed by the Association, and which, with other legislation, fell with the dissolution of parliament prior to the recent General Election, has been re-introduced in a substantially altered form.

Clauses permitting the obtaining of forensic samples and intimate body searches for evidence, without consent, have gone. Remaining is a clause permitting intimate body searches without consent for concealed weapons, with the search being carried out by a police officer.

The British Medical Association insists that these searches should be carried out only by a doctor. B.M.A. Secretary, Dr. John Havard, said "It is essential that intimate body searches be carried out by a medical practitioner, as recommended by the Royal Commission on Criminal Procedure."

It is argued that the alternative of a police officer was necessary in case a doctor refused to perform the search, although no examples of this happening in the past have been produced.

Dr. Havard gave an assurance that the B.M.A. would advise doctors to co-operate and APSGB Hon. Secretary, Dr. Hugh de la Haye Davies, concurs with this viewpoint.

Intimate body searches for weapons are rarely required but the risks to the prisoner, other prisoners and police officers from concealed weapons is substantial. Should concealed weapons be suspected, a police surgeon has a duty to assist in their recovery, if necessary.

BOOZE STORM AT RAPE CASE DOCTORS

Police Surgeons called out to see rape victims rush over from a pub for a quick examination then rush back to their drinking, says a top judge.

Lord Justice Lawton says in one case a doctor turned up fairly inebriated. He examined an obviously battered woman attacked in a gang rape and later reported that he did not notice any of her injuries.

The judge, who claims that victims are not usually properly examined, told a conference on rape: Doctors may be experienced but they do not always do their job very well."

Caring

His accusations at a seminar on rape, organised by the London Medical Group, have angered the Association of Police Surgeons.

Dr. Hugh de la Haye Davies, the secretary, said:

"They're just not true.

"Our 700 members are caring and compassionate and discharge their duties as best they can.

"Most of our calls to examine rape victims come between midnight and 8 a.m. — long after the pubs have closed."

A prominent police surgeon told me:

"There are some of us who prefer to give evidence to certain judges in the morning because they can't understand what we're saying in the afternoons.

"Anyone who has seen the crates of wine going into a judge's lodgings will know what I mean."

News of the World

May 22, 1983

50 years ago . . .

From Police Review, September 1, 1933

THE TEST

A Police Surgeon tells of an occasion when he decided that instead of making the suspected "drunk" walk the usual straight line he would try a new test. He began to draw a zig-zag line across the floor of the charge-room. The suspect, leaning against the wall, watched these preparations in silence for a few moments, then exclaimed: "Why, damn it, man you're drunk yourself!"

CONTEMPT PROCEEDINGS.

Divisional Police Surgeon, Dr. Amar Rayan, was fined £50.00 after he arrived an hour late for an Inquest. The City of London Coroner, Dr. David Paul, fining Dr. Rayan for contempt of Court said, "I have given this matter of your tardiness in attending this Court considerable attention. I have listened to your reasons for delay, which have caused considerable inconvenience and anguish to relatives waiting for later Inquests".

Dr. Rayan appealed against the conviction and Lord Justice Carr and Lord Justice Webster granted Dr. Rayan's appeal on three counts: Dr. Paul had not issued a formal summons to Dr. Rayan before finding him in contempt of court: Dr. Rayan was not given a proper opportunity to put his side of the case: and the fact that he had turned up late for the Inquest was "insufficient" grounds for finding him in contempt of Court.

Commenting on the case later, Dr. Hugh de la Haye Davies, Association Secretary, said that it highlighted the need for better communications between Police Surgeons, Police Officers and others involved in this type of work.

Both Dr. Rayan and Dr. Paul are members of the Association of Police Surgeons.

Jonathan Simon, formerly of Oxford, U.K., is now established in Tauranga, New Zealand. It will be remembered that Jonathan received a special award from the W.G. Johnston Trust in recognition of the standard he achieved when taking the Diploma in Medical Jurisprudence; Jonathan's Case Book set a standard of excellence never previously achieved.

Jonathan says that he is not a full time Police Surgeon in Tauranga but is used as a locum and hopes eventually to be appointed as a Police Surgeon. He says "We are currently trying to set up a Rape Counselling Centre modelled on Bill Daniel's in Auckland. Ours will be much smaller, hopefully it will be underway in the next six months".

INTOXIMETER DEFENCE

A driver was arrested having failed a screening breath test after driving on a motorway. He was taken to a Police Station and there gave two breath tests into a Lion Intoximeter 3000. Both tests were reported as 40 /ug per 100 ml breath. He declined to give a blood sample and was placed in a cell.

According to the driver, after about 1½ hours, he was given a further breath test on the Intoximeter, which on this occasion gave a reading of 12 /ug.

He later appeared in Birkenhead Magistrates' Court. The prosecution evidence was given by the arresting police officer. No evidence was offered by the prosecution as to the length of time he was held at the Police Station or as to the reading of the Intoximeter prior to his release. Evidence as to the length of time he was detained and the reading of the Intoximeter prior to his release was given by the driver himself, who, although he was not given a print-out of the pre-release reading, had seen the figure 12 appear on the unit's visual display.

He was represented by a Barrister whose grandfather had been a Liverpool Police Surgeon.

I gave evidence to the effect that if all three readings given by the Intoximeter 3000 were correct, the driver's breakdown rate of alcohol must have been three times the rate of what is regarded as normal. The Magistrates dismissed the charge and gave costs of £170.00 against the Police.

The driver told me that he had consumed three pints of beer between 9.30 p.m. and 11.30 p.m. The initial breath tests were given at 2.00 a.m. and he was released at about 3.30 a.m. Of the breath tests given, the pre-release breath test would appear to have been closer to the estimated blood level, if the driver's statement as to his consumption was correct. If he had been screened with the Alcolimeter rather than with the Intoximeter prior to release, he would have had no defence.

An Atlas of Non - Accidental Injuries in Children

A collection of 87 illustrations, mostly in colour, with descriptive legend from past issues of *"The Police Surgeon"*.

Editor: DR. WILLIAM THOMAS

Contributors:

DR. M.H. HALL

Consultant in Charge,
Emergency and Accident Department,
Royal Infirmary, Preston.

The late JOHN FURNESS Forensic Odontologist, Liverpool.

DR. JAMES HILTON

Force Surgeon, Norfolk Constabulary.

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Cost:

Association Members £3.50 inc. p. & p.
Non-Members £4.50 inc. p. & p.

From:

Association of Police Surgeons
of Great Britain,
Creton House, Creton,
Nr. Northampton, NN6 8ND.

MEDICO-LEGAL SOCIETIES

THE MEDICO-LEGAL SOCIETY

THURSDAY, 10TH NOVEMBER, 1983

"European Medico-Legal Problems"

Christopher Prout

THURSDAY, 12TH JANUARY, 1984

"Policing the Metropolis in the Eighties"

Sir Kenneth Newman

THURSDAY, 9TH FEBRUARY, 1984

"The Problems of the Office of Attorney General"

The Rt. Hon. Sir Michael Havers, Q.C., M.P.

THURSDAY, 8TH MARCH, 1984

"The Inner City Three Years Later"

The Rt. Hon. The Lord Scarman

THURSDAY, 12TH APRIL, 1984

"The Dingo Murder in Retrospect"

Professor J.M. Cameron

MAY/JUNE

Annual Dinner (date to be announced)

THURSDAY, 10TH MAY, 1984

"Forgery Detection - New Approaches"

Mr. Robin Keely, Metropolitan Police Forensic Science Laboratory

THURSDAY, 14TH JUNE, 1984

8 p.m. Annual General Meeting

8.15 p.m. "The Work of the Criminal Injuries Compensation Board"

Mr. Michael Ogden, Q.C.

All meetings are held at The Royal Society of Medicine, Wimpole Street, London W.1 at 8.15 p.m. unless otherwise stated.

Further information from:—

Mr. M.A.M.S. Leigh,

Hon. Legal Secretary,

33 Henrietta Street, Strand,

London. WC2E 8NH.

THE MANCHESTER & DISTRICT MEDICO-LEGAL SOCIETY

THURSDAY, 17TH NOVEMBER, 1983.

"Plea Bargaining"

Dr. Baldwin, Birmingham University.

THURSDAY, 15TH DECEMBER, 1983.

"A body from Jeddah"

Dr. M.A. Green, Leeds University.

WEDNESDAY, 25TH JANUARY, 1984.

To be arranged

THURSDAY, 16TH FEBRUARY, 1984.

"Medical Defence"

Dr. J. Wall, Medical Defence Union.

All meetings are now held in the Midland Hotel, Manchester, at 7.30 p.m.

For further information please write to:—

Dr. G. Garrett,

Hon. Secretary,

Manchester & District Medico-Legal Society,

Pathology Department,

Oldham & District General Hospital,

Rochdale Road,

OLDHAM, OL1 1JH.

NORTHERN IRELAND MEDICO-LEGAL SOCIETY

TUESDAY, 22ND NOVEMBER, 1983.

"Recent Advances in the Surgical Treatment of Arthritis"

Mr. James Nixon, MCh(Orth) FRCS.

FRIDAY, 27TH JANUARY, 1984.

ANNUAL DINNER

7.30 for 8.00 p.m. Belfast City Hospital.

TUESDAY, 7TH FEBRUARY, 1984.

"Some Aspects of the Dr. Arthur Case"

Professor Alan Usher, OBE, MB, BS, DMJ (Clin et Path), FRCPath.

TUESDAY, 6TH MARCH, 1984.

8.00 p.m. Annual General Meeting

8.30 p.m. "The Old Irish Bar and Bench"

J. Lloyd McQuitty Esq., QC.

All meetings are held at the Ulster Medical Rooms, Medical Biology Centre, Belfast City Hospital, at 8.00 p.m. unless otherwise stated. Attendance at meetings is limited to members of the Society and their guests. Enquiries about membership should be directed to:—

Dr. Elizabeth McClatchey,

Honorary Secretary,

40 Green Road,

Belfast. BT5 6JT.

MEDICO-LEGAL SOCIETIES

THE SOUTH YORKSHIRE MEDICO-LEGAL SOCIETY

THURSDAY, 10TH NOVEMBER, 1983.

"The Sutcliffe Case — Penological and Legal Aftermath"

Mr. Louis Blom-Cooper, Q.C.

WEDNESDAY, 14TH DECEMBER, 1983.

"Hard Line or Life Line: Treatment of the Head Injured"

Dr. Peter Eames, St. Andrews Hospital, Northampton.

WEDNESDAY, 18TH JANUARY, 1984.

The Medical Aspects of the Falklands Campaign"

Col. W. McGregor, OBE, FRCS, Consultant Surgeon, Duchess of Kent Military Hospital.

THURSDAY, 16TH FEBRUARY, 1984.

"The Dingo Baby Case"

Professor James Cameron, London Hospital Medical College.

WEDNESDAY, 28TH MARCH, 1984.

"Telephone Tapping, Tape Recording & Hypnosis — Does the End Justify The Means?"

Mr. John Alderson, CBE, QPM, Former Chief Constable Devon & Cornwall.

APRIL 1984.

Speaker from our own Membership. Title and speaker to be announced Annual General Meeting.

THURSDAY, 10TH MAY, 1984.

ANNUAL DINNER at the Cutler's Hall, Sheffield.

Meetings are held at 8.00 p.m. for 8.15 p.m. at the Medico-Legal Centre, Watery Street, Sheffield 3.

Applications for membership should be made to:—

The Legal Secretary, Mike Napier,
Irwin Mitchell & Co., Belgrave House,
Bank Street, Sheffield S1 1WE

OR to the:—

Medical Secretary, Arthur Kaufman,
Children's Hospital, Sheffield 10.

LEEDS AND WEST RIDING MEDICO-LEGAL SOCIETY

THURSDAY, 1ST DECEMBER, 1983.

"Recall of Witnesses under Hypnosis"

Dr. Graham Wagstaffe, Department of Psychology, The University of Liverpool.

THURSDAY, 2ND FEBRUARY, 1984.

"The Myth of Expertise"

Dr. J.B. Foster, F.R.C.P., Regional Neurological Centre, Newcastle.

THURSDAY, 1ST MARCH, 1984.

"Deaths of Kings of England"

Dr. J.H. Kamp, R.N. (Ret'd).

Meetings are held in the Leeds General Infirmary at 8.30 p.m. Membership enquiries should be sent to —

Mr. J. Fairhurst,
30 Park Square,
Leeds 1.

MERSEYSIDE MEDICO-LEGAL SOCIETY

THURSDAY, 17TH NOVEMBER, 1983.

"Multiple Attacks by Mentally Disordered People"

Dr. Malcolm J. MacCulloch.

THURSDAY, 15TH DECEMBER, 1983.

Annual Dinner
Greenbank House Club.

WEDNESDAY, 18TH JANUARY, 1984.

"One Picture is Worth a Thousand Words"
Dr. Maurice Kirwan.

WEDNESDAY, 14TH MARCH, 1984.

Chief Inspector P. Deary,
Merseyside Police Drugs Squad.

Meetings are held in the Liverpool Medical Institution, 114 Mount Pleasant, Liverpool 2, commencing at 8.00 p.m.

Further details from:—

Dr. M. Clarke,
Hon. Secretary, M.M.L.S.,
24 High Street,
Liverpool 15.

MEDICO-LEGAL SOCIETIES

BRISTOL MEDICO-LEGAL SOCIETY

Thursday, 17th November, 1983

"Dialect and Voice Identification".
Mr. Stanley Ellis.

Thursday, 19th January, 1984

"The Turin Shroud".
Professor J.M. Cameron.

Thursday, 15th March, 1984

"Drug Abuse in Childhood".
Dr. Martin Gay.

Thursday, 17th May, 1984

Members Papers.

The meetings will be held in the School of Nursing at the Bristol Royal at 8.00 p.m. and a buffet supper will be available from 6.30 p.m.

Further details from:—

Mr. P.H. Roberts,
Hon. Medical Secretary,
British Medico-Legal Society,
Martindale, Bridgewater Road,
Sidcot, Windiscombe,
Avon. BS25 1NN.

THE FORENSIC MEDICINE SOCIETY

The format of the Society has now changed. It is now an informal Dining Club meeting monthly, 6.30 p.m. for 7.30 p.m., the talk being preceded by a meal.

Further details from:—

Dr. Peter Vanezis,
Department of Forensic Medicine,
The London Hospital Medical College,
Turner Street,
London E1 2AD.

MEETINGS OF MEDICO-LEGAL SOCIETIES ARE USUALLY PRIVATE. NON MEMBERS SHOULD CONTACT THE SOCIETY SECRETARY BEFORE ATTENDING MEETINGS.

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CORRESPONDENCE

Sir,

You printed a lie, a damned lie, about me on page 13 of the Supplement, Vol.14, May 1983, and obviously it could only appear under the headline "The W.C. . ." The offending lines state that I received a GRANT in 1979 for arranging the Symposium in Lancaster University some 10 years earlier. Oh! No! No! No! I did not receive a grant. Indeed, the W.G. Trust did agree to sponsor the meeting with a LOAN of £200. By careful husbandry a profit of nearly £300 ensued and the whole lot was sent to the Treasurer of the A.P.S.G.B., which was included in his Balance Sheet at the next A.G.M. Imme-

diately after the Treasurer's Report had been accepted by the A.G.M. a crafty trustee of the W.G. Trust, like a ravenous cat that was about to swallow the canary, demanded and was given repayment of the £200 loan.

Let me assure you, Sir, that I do not propose to take advantage of the Law of Libel, even aided by Legal Aid, to bring an action against you or the writer of the defamatory article. Provided you print a retraction and an apology for this dastardly slur on the most sensitive and easily hurt Hon. member of our Association, no damages will be sought.

Yours in great sorrow,
W.M. THOMAS

Dr. Thomas in conciliatory mood.



P.S. Morfudd is very annoyed that you did not ask her permission to publish her photograph on page 54.

Sir,

In reply to Dr. Thomas's letter in your columns above . . .

A true statement of the fact YES — a damned lie NO — NO — NO!

Dr. Thomas was given by the W.G. Johnston Trust £200 for research and to assist him in arranging the 2nd Symposium at Lancaster in 1979. As a result of Bill Thomas's assiduous husbandry, a profit of some £300 ensued. The impecunious Trustees prevailed upon his generous and sensitive nature to return the funds which had been made available to him. He very kindly did so without a single "tweet tweet". Due to an oversight and the passage of time (4 years) these facts were omitted from the article, for which I apologise.

However, to refer to this oversight as a damned lie and a dastardly slur takes some swallowing — even for a ravenous cat. To paraphrase W.J.C. "some canary — some neck".

R. SUMMERS

DATES FOR YOUR DIARY

UNITED KINGDOM MEETINGS

28th January 1984.

A.S.P.G.B. Winter Symposium,
St. Thomas's Hospital Postgraduate
Medical Centre, London.
(see page 50).

4th April 1984.

British Academy of Forensic Sciences
Annual Scientific Meeting.
"Medicine, Science, Sport and the
Law"
Further details from Professor J.M.
Cameron,
Dept. of Forensic Medicine,
London Hospital Medical College,
Turrier Street, London E12AD.

6 - 7th April 1984.

Forensic Science Society Symposium
"The Investigation of Death other
than Murder".
Manchester Institute of Science and
Technology.
Further details from The Forensic
Science Society, Clarke House, 18A
Mount Parade, Harrogate.
0423 56068.

21st - 26th May 1984.

A.P.S.G.B. Annual Conference.
Peebles Hotel Hydro, Scotland.
(see page 57).

14th - 17th September, 1984.

International Association of Forensic
Toxicologists 7th Triennial and 21st
International Meeting.
Metropole Hotel, Brighton.
Further details from N. Dunnett,
Home Office Forensic Science
Laboratory, Aldermaston, Reading,
Berks. RG7 4PN.

18th - 25th September 1984.

Conference of International
Association of Forensic Sciences.
Oxford. (see page 34).
President: Professor Stuart Kind.

May 1985.

A.P.S.G.B. Annual Conference.
Cheltenham.

September 1985

A.P.S.G.B. Autumn Symposium.
Barnstaple, North Devon.

May 1986 (Provisional)

A.P.S.G.B. Annual Conference and
2nd Cross Channel Conference.
Ipswich area.

INTERNATIONAL MEETINGS

18th - 22nd December 1983.

2nd International Congress on Drugs
and Alcohol.
Tel Aviv, Israel.
Further details from:
Congress Secretariat,
28 Ahad Ha'am Street, P.O. Box 394,
Tel Aviv 61003, Israel.

21st - 23rd January 1984.

World Congress in Forensic Medicine
and Toxicology.
Bhopal, Madhya Pradesh, India.
Further details from:
Prof. Heeresh Chandra,
Director, Medicolegal Institute,
Bhopal, India.

13th - 18th February 1984.

4th meeting of the Australasian &
Pacific Areas Police Medical Officers,
Melbourne, Australia. (see page 46).

20th February 1984.

Interim meeting of NAME, Disneyland
Hotel, Anaheim, California, U.S.A.
Further details from:
Dr. G. Ganter,
Pathology Department,
St. Louis University Medical School,
1402 South Grand Boulevard,
St. Louis, MO 63104.

21st – 24th February 1984.

Annual Meeting of the American Academy of Forensic Sciences.
Disneyland Hotel, Anaheim, California, U.S.A.

Further details from:
American Academy of Forensic Sciences,
225 South Academy Drive,
Colorado Springs Co 80910, U.S.A.

23rd March 1984.

F.M.G. Full day meeting
Details from Dr. B. Cohen,
Oosthaven 68, 2801 P.G. Gouda Holland.

2nd – 5th April, 1984.

First World Congress on Technologies for Police Investigation and Identification (IDENTA).

Further details from:
The Stier Group Ltd.,
203 Dizengoff Street,
Tel Aviv 63 115,
Israel.

18th – 25th September 1984.

Conference of International Association of Forensic Sciences, Oxford. (See page 34).

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MEMBERSHIP LIST

Owing to the difficulty in keeping up with changes of address, it is suggested that if members are unable to contact other members at the address shown in the Medical Directory contact may be made through police channels.

The Hon. Secretary requests prompt notification of change of address and ex-directory phone numbers. The Hon. Secretary would also appreciate if any case of serious illness or death of a member would be brought to his notice by neighbouring members.

F = Founder Member

PP = Past President

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B.V.H. Bray	Guernsey	I. Nicholson	Australia
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A.J. Fraser	Blackpool	M.J.R. Ryan	Lancashire
H.E. Godfrey	Cheadle	N.K. Sharma	Southport
M.A. Gouda	Skelmersdale	E. Tierney	Gt. Manchester
H.D. Hall	Liverpool	A.P. Timney	Whitehaven
R.F.E. Harrington	Lytham	A. Whiteside	Cleleys
A.G. Hick	Stockport	D.L. Whitton	Lancaster

Area 1. (Northern Ireland)

Council Member: Dr. W.E. St. C. Crosbie, Bangor

S.G. Abu, D.M.J.	Belfast	C.W.D. Knipe	Armagh
J.D. Adams	Portadown	P.K. McAviney	Belfast
B. Bryans	Ballycrochan	W.A. McCartney	Ballymoney
C. Burns	Ballymoney	E.R. McClatchey	Belfast
J. Burton	Moneymore	P. McConnell	Craigavon
N.D. Chauhan	Londonderry	M. McVerry	Rostrevor
J. Crane, D.M.J.	Belfast	H. Montgomery	Coleraine
A.C. Darrah	Ballyclare	C.K. Munro	Londonderry
A.J.J. Darrah	Newtonabbey	D. Nutt	Casterlock
W.R. Dick	Ballymena	H.R. Ormonde	Lisburn
J.B. Dunn	Larne	I.S. Palin	Londonderry
E.M.H. Forster	Enniskillen	G.W. Rainey	Belfast
J.S. Garvin	Armagh	N.A. Rainey	Belfast
B.P. Glancy	Magherafelt	G. Rowan	Lisburn
H.N. Glancy	Bellaghy	S. Sayee	Magherafelt
C.H.G. Gould	Newtonabbey	E.N. Shannon	Londonderry
R.L. Guy	Belfast	B.A. Sheils	Londonderry
I.F. Hamilton	Belfast	J.E. Smyth	Cookstown
R.T.S. Harrison	Co. Down	C.H. Stewart	Randalstown
M.J. Hill	Ballyclare	J.H.H. Stewart	Randalstown
R.B. Irwin	Belfast	P.J. Ward	Newry
J.C. Jefferson	Belfast	J. Wilson	Carrickfergus
M.T.A. Kemp	Omagh	M. Wilson	Portadown

Area 2. (North East)

Council Member: A.J. Irvine, D.M.J., Cleveland

S.M. Amin	Barnsley	J.H. Loose	Hull
J.G. Ashton	Sheffield	J.D. Lucey	Bridlington
W.J. Beeby	Middlesborough	J.D. Lyon	Hartlepool
W.H. Bexon	Durham	J.H. Marr	Middlesborough
P.J.W. Bolt	Hartlepool	A.K. Marsden	Wakefield
D.H. Bottomley	Durham	N. Maskrey	Scarborough
J.G.E. Bruce	Selby	M.T. Marashi	Tyne-on-Wear
R. Carr	Blyth	M. McKendrick	Northumberland
G.A. Crouch	Harrogate	J. McKennell	Halifax
		A.E. Meek	Beverley
D.R. Deacon	Hull	J.H. Mitchell	Berwick-on-Tweed
P.J. Dennis	Skipton	T. Moore	Rotherham
G.S. Everson	Sheffield	R. Murphy	Whitley Bay
P. Gardner	Northumberland	J.F.M. Newman	Batley
W.J. Glass, D.M.J.	Newcastle-on-Tyne	A. Paes	Rotherham
R.J. Givans	Harrogate	P.H. Pawson	Bedford
P.K. Goel	Rotherham	I.M. Quest	Leeds
J.K. Gosnold	Hull	K. Ravi	Leeds
O.D.E. Herbert	Newcastle-on-Tyne	P.S. Sen	Halifax
J.P. Hurley	Felling	J.G. Shores	Hull
W. Jack	Durham	G.K. Taylor	Gateshead
B. Kapur	Maltby	Dr. S. Veeder, D.M.J.	Gosforth
H.A. Khan	Hartlepool	D.W. Verity	Tadcaster
J. Lees	York	A.J. Wightman	Northallerton
Lesley Lord	Halifax	K.W. Wood	Huddersfield

Area 3. (Midlands)

Council Member: R.J. Marsh, Shrewsbury

M. Allbeson	Penkridge	H. McCollum	Penkridge
R.D. Antani	Walsall	P.C. Miller	Kenilworth
L.E. Arundell	Birmingham	J.A. Patel	Stourbridge
C. Bate	Birmingham	J.P. Paw	Walsall
C.J. Bruton	Birmingham	J.A. Phillips	Bromsgrove
V.P. Budh-Raja	Sutton Coldfield	K.S. Rajah	Birmingham
J.C. Camac	Burton-on-Trent	L.S. Ratnam	Birmingham
Elaine Charles	Shrewsbury	G.A. Readett	Birmingham
D.J.G. Chitnis	Birmingham	S. Saikia	Castle Bromwich
R.N. Davies	Kenilworth	P.R. Shaeena, D.M.J.	Coventry
K.S. Dick	Newcastle, Staffs	Z.A. Shaikh	Tipton
R.K. Dutta	Coventry	S.V. Sharma	Bilston
K.H. Flynn	Nuneaton	R.D. Simper, B.D.S.	Birmingham
P.J. Franklin	Stoke-on-Trent	C.J. Smart D.M.J.	Birmingham
S.E. Grant	Warley	M.S. Smith	Stoke-on-Trent
S.J. Grenville	Derby	T.B. Stirling	Aldridge
S.K. Gupta	Newcastle under Lyme		Nr. Walsall
G.T. Haysey	Market Drayton	W.N. Stirling	Newcastle, Staffs.
K.K.A. Hofheinz	Smethwick		Kenilworth
F. Horsley	Wolverhampton	W.R. Sullivan	Birmingham
R. Horton	Burton-on-Trent	M.S. Swani	Birmingham
G. Hoyle	Tamworth	D.H. Target	Birmingham
J.A. Humphreys	Birmingham	E.I. Taylor	Birmingham
P.R.S. Johnson	Worcester	S.S. Venugopal	Birmingham
J. Keeling Roberts	Wem	D.J. Weddell	Birmingham
D.W. Kett	Birmingham	G.O. Williams	Warley
A.J. Laidlaw	Worcester	P.T. Wong	West Bromwich
D.R. Lawrence	Malvern	D. Wright, D.M.J.	Birmingham
I.W. Lawrence	Shropshire		

Area 4. (Eastern)

Council Member: M.A. Knight D.M.J., Ipswich

R.P. Anderson	Workshop	T.R. Lavelle	Nottingham
G.F. Birch, D.M.J.	Lincoln	R.A. Lawrence, O.B.E., D.M.J.	Alfreton
M.H. Bletcher, D.M.J.	Derby	J. Lines	Wisbech
S.H. Burges, D.M.J. (PP)	Ipswich	A.D. Lower	Stowmarket
T.K. Burley	Peterborough	W. Milburn, M.B.E.	Derby
J.F. Casky	Peterborough	D.B. Miller	Wellingborough
T.R. Chandran	Sutton-in-Ashfield	J.V. Mitchell	Stamford
J. Ciappara	Northampton	N.C. Modi	Wellingborough
B.P. Collins	Nottingham	I.K. Murphy	Peterborough
D. Connan, D.M.J.	Huntingdon	J. Nelson D.M.J.	Nottingham
D.D. Cracknell	Huntingdon	P.O'Neil	Chesterfield
G.W. Craddock	Northampton	D. Noble	Heanor
T.F.C. Dibble	Kettering	R.J. Paget	Nottingham
P.A. Eckstein	Cambridge	A.W. Parry	Nottingham
A.A. Fairclough	Norwich	C.K. Rao	Northampton
R.H. Foxton, M.B.E., D.M.J.	Flixborough	D.L. Scawn	Corby
J.R. Freeman	Derby	R.E. Scott	Bury St. Edmunds
W.G.H. Gamble	Sheffield	E.M. Skinner	West Hallam
J.J. Hamill	Leicester	J.L. Skinner, O.B.E., D.M.J.	Ilkeston
D.J. Henry	Nottingham	R.J. Smeeton	Leicester
J.L. Hine	Isle of Ely	T.H. Warrender	March
N.M. How	Daventry	M.J.H.B. Waas	Workshop
P.J. Keavney	Nottingham	R.J. Williams	Thetford

Area 5. (South East)

Council Member: Dr. S.M. Hempling D.M.J., Woking

D.F.W. Adey	Southampton	K.D. Forsyth	Oxford
N.D. Arnott	Sevenoaks	R. Foster	Oxford
J. Barker	Maidenhead	J.C. Garvey	Chelmsford
B. Bendkowski	Southend-on-Sea	E. Gancz	Bexley
J.J. Bourke	Woking	R.W. Glenn	Haywards Heath
J.L. Bowen	Dover	G. Gover	Horsham
J.H.M. Buckley	Westcliff-on-Sea	R. Gray	Brighton
R.T. Casson	Drayton	J.K. Guly, D.M.J.	Southampton
L. Carlyon	Colchester	C. Harris	Maldstone
D. Chastell	Broadstairs	D.P. Hart	Bedford
J.D. Clark	Dunstable	S.C. Hicks	Highworth
D. Constad, D.M.J.	Portsmouth	A.C.C. Hildrey	Braintree
N.M. Cole, D.M.J.	Hellingley	D.M. Hoare	Chichester
A.G. Cope	High Wycombe	C.A. Hood	Princes Risborough
B. Christopher	East Grinstead	H.C.M. Jarvis, M.B.E.	
J.C. Cummins	Havant	D.M.J.	Brighton
M.T. Darlison	Wokingham	A.V. Karia	Bletchley
A.D. Dean	Orsett	A.O.C. Knight	Southampton
R. Diggle	Newbury	D.A. Lamont	Colchester
S.R. Domoney	Brighton	J.W. Latham	St. Albans
M.H. Draisey	Seaford	D.A. Lawrence	Dartford
G.S. Duncan	Ryde	A.P. Lees	Bracknell
P.K. Durkin	Clacton-on-Sea	J.H. Lewis	Lancing
A.M. Easton	Gt. Bookham	J. Llewellyn	Essex
C.J. Eaton	Saffron Walden	Z. Ludwig	St. Leonards-on-Sea
D.C. Egerton	Liss		Welwyn
L.C. de R. Epps	Chichester	C.D. Lund, D.M.J.	Garden City
R.J. Farrow	Clacton-on-Sea		Swindon
Diana Ferguson	Oxford	S.A. Macoustra	Dunstable
G.S. Flack	Wye	M.P. Madigan	

Area 5 (South-East) — Continued

V. Mansueto	Chatham	J.E. Routh	Crowborough
J. Marriott	Andover	M. Saunders	Newbury
H. McLean	Goring on Sea	G. Saraf	Folkstone
A.B. Malik	Gillingham	R. Sarvesvaran, D.M.J.	Surrey
H.J. Missen	Chelmsford	P.K. Schutte D.M.J.	Ryde
E.M. Moulton	Horsham	S. Shackman	Northwood,
I.T. Nash	Kent		Middlesex
P.C.J. Nicol	Lewes	R. Shanks	Northfleet
A.V. Nirgude	Reading	J.H.S. Sichel	Oxford
J.H. Nodder	Hemel Hempstead	P.N. Singh	Sittingbourne
M.R. O'Connell	Wickham, Hants.	P.C. Smart	Farnborough
D.F. Parkin	Guildford	P. Snell	Colchester
D. Paton	Maidenhead	R.A. Stroud	Pangbourne
C. Pickstock	Portsmouth	G.C.M. Third	Fareham
M.D. Qureshi	Gillingham	P.G. Thomas	Swindon
S.P. Rajah	Northfleet	R.G. Tittley	Shoreham-on-Sea
T.Y. Rajbee	Hastings	P.J.H. Tooley, D.M.J.	Twyford
R.J. Rees	Sittingbourne	J. Walsh	Rustington
R.J. Rew, D.M.J.	Eastbourne	J. Weston	Essex
R.H. Reynolds	Crawley	D.G. Yetman	Southampton
L.A. Rigg-Milner	Corrington	T.G. Zutshi	London W1
T.E. Roberts, D.M.J.	Basingstoke		

Area 6. (South West)

Council Member: I.E. Doney, D.M.J., Bristol

W.R.I. Barrie	Taunton	G.C. Mathers	Gloucester
Gillian Belsey	Bideford	J.C. Merry	Exeter
D.D. Bodley-Scott	Lymington	W.H. McBay	Honiton
R. Bunting, D.M.J.	Bristol	P.J. Money	Trowbridge
K.A. Clark	Salisbury	J. Wickam New	Devizes
P. Densham	Torquay	P.A.G. Payne	Bristol
N. Fisher	Torquay	W.R. Phillips	Bristol
J.E. Flood	Devizes	H.I. Rein	Poole
D.M. Garratt	Warminster	T.R. Savage	Plympton
P.A. Henderson	Corsham	D.C. Shields	Okehampton
R.N. Hodges	Cheltenham	G.H. Smerdon	Liskeard
P. Holland	Salisbury	A.K. Smeeton	Bristol
R.F. Hunt	Bideford	R.E. Steel	Worcester
J.P.H. Jago	Bridgewater	M. Sutherland	Devon
D.C. Jeffery	Bristol	T. Timberlake	Ferndown
A.J. Jordan	Minehead	A.S. Wallace, D.M.J.	Salisbury
P.J. King	Chippenham	M.S. Warwick	Ilfracombe
N. Kippax	Glastonbury	D.C. Watts	Yeovil
R.G. Lambert	Bristol	M.R. Watts	Bristol
G.A. Langsdale	Bournemouth	M. Watson	Weymouth
P.A. Leech	Minehead	H.P. Williams	Trowbridge
R.D. Martin	Newquay		

Area 7. (Wales)

Council Member: L.S. Addicott, D.M.J., Glamorgan

D.J. Bowen	Holyhead	G.W. Griffiths	Holyhead
D.H. Clason-Thomas	Newport, Gwent	R.J. Hilton	Cwmbran, Gwent
V.S. Chandran	Merthyr Tydfil	M. Hopkin-Thomas	Cardiff
E.J.J. Davies	Corwen	F.W. Humphreys, D.M.J.	Colwyn Bay
J.V. Davies	Pembroke	Z. Hussain	Pontypridd

Area 7 (Wales) — Continued

E.W. James	Llandudno	S.J. Parker, D.M.J.	Earry
M.G. Jeffries	Betws-y-Coed	O.C. Parry-Jones	Anglesey
H.O. Jones	Hengoed	B.M. Penford	Holyhead
P.A. Knoyle	Cardiff	F.I. Powell, D.M.J.	Cardiff
A.M. Lindsay	Cardiff	P. Sahl	Gwent
N.J. Lupini	Cardiff	W.G. Strawbridge	Pontypridd
J.B. Lloyd	Llanelli	W.C. Thomas	Llanelli
A. Mason	Aberystwyth	H.T. Thompson	Risca
A.G.K. Menon	Wrexham	I.S. Toor	Pontypridd
S.D. Morgan	Merthyr Tydfil	M.W. Watson, D.M.J.	Cardiff
K. Nookaraju	Barry	W.J.B. White, D.M.J.	Cardiff
D. Osborne, D.M.J.	Ebbw Vale	R.J. Yorke	Ebbw Vale
	Neath		

Area 8. (Metropolitan & City)

Council Member: R.J.R. Moffat, South Croydon

R. Andrew	Southall, Middx.	A.J. Lyons, D.M.J.	Surbiton
D.J. Avery	London E.16	J. Mangion, D.M.J.	London W.3
A.H.W. Bain	Beckenham	T.G.K. Mant	London S.E. 21
A.J. Barratt	New Maldon	C.D. May	London S.E.9
J.M. Barnett	London N.3	H.U.S. McMichen	London
J.F. Bray	South Croydon	A. Mendoza, D.M.J.	London
C.W. Brownsdon	London S.E.21	M.V. Meyer	London E.9
S.J. Carne, O.B.E.	London S.12	C.H.F. Morrish	Sittingbourne
S. Chatterji	London N.W.9	I. Muir	London N.
J.W. Comper	Orpington	M.A. Muhairez	Hillingdon
D.G. Craig, D.M.J.	Blackheath	L.A. Nathan	Banstead
J. Curley	London	Marion Newman	London N.W. 6
N. Davis	London N.11	G.D.S. Pallawala	Kenton
P.C. Drennan	Ashford	F. Patuck	Barnet
P.S. Durston	London S.E.5	L.K. Phillimore	London
N.B. Farrier	Staines	G.M. Preston	London S.E.5
G.M. Ferraris	Woolwich	A.E. Pruss	Ilford
D.S. Filer	London W.6	A.S. Rayan	Wanstead
N.L. Frazer	London W.2	C. Roden	London
B.J. Golden	London N.W.11	D.I. Rubenstein	Woodford Green
D. Goldman	Bromley	B.G. Sims, B.D.S.	London E.1
G.J. Grainger	Streatham	B.K. Sinha	London E.11
P.G. Green	London S.W.17	J. Smallshaw	Banstead
K. Gupta	London E.8	I.A.P. Smytha-Wood	London S.W.11
A. Haidar	London N.11	T.H. Staunton	London E.18
M.J. Heath	Surrey	H.H. Striesow (F)	London E.7
J.D. Hendley	Middlesex	C. Sudhaker	South Croydon
J. Henry	London E.8	H.J.W. Thomas	Barnet
D.A.T. Jackson, D.M.J.	London W.2	P. Turvill, D.M.J.	London N.W.3
P.G. Jerreat	London E.3	P. Vanezis, D.M.J.	London E.1
S.E. Josse, O.B.E., D.M.J.	London	B.A. Wadsworth	London N.20
D. Keys	Bow	C.D. Walker	London S.E.9
J.I. Koppel	London W.12	I.E. West, D.M.J.	London
B.D. Lascelles	Hadley Wood	D.M. Wilks	Chiswick
S. Lazarus	Ilford	M. Woodliff	Ealing
S. Lewis	London S.W. 8	L.J.F. Youten	London S.E.

Area 9. (Scotland)

Council Member: Dr. J.A. Dunbar, D.M.J., Dundee

D.P. Anderson	Kinross	R. Lynch	Kilwinning
J.P. Black	Kilmarnock	J.C. McBride	Glasgow
G. Boyd	Glasgow	N.J. Macdonald	Aviemore
R.H. Brown	Bothwell	G.K. Macdonald-Hall	Kircaldy
J.G. Buchanan	Balloch	C.S.S. MacKetyie	Glasgow
J.G. Carruthers	Kilmarnock	N.M. Maclean, D.M.J.	Glasgow
J.P. Deans	Thurso	D.C. Marshall, D.M.J.	Dundee
J.W. Donnelly	Glasgow	J.G. Mather	Glasgow
R.C. Dowell	Alloway, Ayr	J.G. Murty	Glasgow
P.R.S. Duffus, D.M.J.	Aberdeen	R. Nagle	Edinburgh
D.S. Dummer	Midlothian	D. Paul	Wick
G.S. Dyker	East Kilbride	S.S. Parker	Larkhall
J.S. Finnie	Aberdeen	J.L. Penny	Crieff
D.E. Fraser	Dyce	N.M. Piercy	Montrose
G. Frazer	Glasgow	A.E. Pitchforth	Aberfeldy
H.B. Gate	Strathpeffer	M.A. Pratt	Aberdeen
J.C. Gourley	Glasgow	H.A. Rankin	Larkhall
R.L. Grant	Falkirk	G.B. Rhind	Aberdeen
M. Hamilton	Paisley	J. Rodger	Glasgow
R.R. Hamilton	Hawick	M.W. Smillie	Falkirk
T. Hannah	Edinburgh	K. Soroosian	Glasgow
A.S. Harper	Alexandria	A.M. Tait	Hamilton
G.B. Hutchinson	Dumfries	J.P. Weir	Glasgow
B.D. Keighley	Balfron	M. Zaki	Glasgow
Yew-Nee Lan	Ayr		

Associate Members

Lt. A.A.E. Abbas	Bahrain	P.R.S. Johnson	Worcester
P.R. Acland, D.M.J.	Birmingham	A.M.P. Kellam	Cardiff
B.L. Alexander, O.B.E.	Manchester	F.E.B. Kelly	Leicestershire
P. Brantingham	Newcastle	A. Khallaf	Rhondda
R. Latham Brown (F)	Derby	Prof. B. Knight	Cardiff
C. Clark	London	J. Mackessack-Leitch	Banbury
D.H. Clark, B.D.S.	Bishops Stortford	J.H. Morgan	Brixham
R.G. Congdon, D.M.J.	Worthing	P.J. O'Mahoney	Cheshire
J.C. Corbett	Wellingborough	T.M. Ostrowski	Barnsley
S.M. Cordner	London	S.P.S. Oswald, D.M.J.	Solihull
F. Cramer, D.M.J.	Bromley	W. Phillips	Whitley Bay
A.F. Crick	Northfleet	J. Prentice	Keighley
A.B. Cross, O.B.E.	Solihull	I. Rose	Leeds
P.G. Dalgleish	Northampton	W.H. Spencer	Ashton-in-Makerfield
B.T. Davis	Birmingham		London W.6
J.W.A. Devlin	Leeds	J. Stein	St. Leonards on Sea
H.R. Dickman	Lincoln	J.G. Stewart	Birmingham
H.J.H. Dunn	Blackwell	J.M. Stuart	London N.2
J.A. Gavin	London	J. Tarlow	Cardiff
M. Glanvill, D.M.J.	Chard	Glenna Thomas	Wigan
C.W. Glassey, D.M.J.	Beverley	J.M. Torry, D.M.J.	Dundee
M. Green	Leeds	P.E. Turnbull	Methven, Perth
K. Hardinge	Manchester	P. Wardlaw	London E.11
M.F. Hendron	Preston	J.S. Lilburn Watson	
Derek Jackson, B.D.S.	Newcastle-upon-Tyne		

Life Associate Members

J.K. Adamson	Northumberland	H.W. Lees	Lancs.
D.L. Bennett	Ilford	A.B. Lishman	Burnley
J.G. Benstead (F)	Southport	F.E. Lodge	Wisbech
T.S. Blaiklock (F)	Morpeth	S.J. Lundie	Nottingham
M.G. Bridger	Southampton	D.R. Martin	Doncaster
A.G. Blair, O.B.E.	Glasgow	D. McBain, D.M.J.	Aberdeen
M.L. Blair	Heywood	J.D. McFadyen	Stirling
D.P. Brown, D.M.J.	Ecclesham	A.S. Mitchell	St. Austell
J.D. Busfield	Hull	A.A. Morgan	Ilford
A. Chalmers	Sittingbourne	R.P. Parkinson	Waltham Abbey
M.B. Clynne	Southall	T.D. Parsons	Aylesbury
M. St. J.U. Cosgrave,		J.R. Partridge	Dorking
D.M.J. (PP)		D. Paul, D.M.J.	London
L.M. Craig	Gateshead	K.F.M. Pole	Gillingham
A.P. Curtin	Argyll	A.N. Redfern, D.M.J.	Louth
W.A. Eakins	Cheltenham	D.E. Robertson	Cheshire
J.O. Fitzgerald	Belfast	C. Rotman	Watford
G.W. Fowler	Wallsend	J.E. Ryner	Lancashire
K. George	Otley	D. Sandilands, D.M.J.	Birmingham
H.J. Gilbert	Maldon	F.S. Shepherd	Weybridge
H.R. Gray	Gosforth	W.B.G. Simmonds, D.M.J.	London
J.F.A. Harbison, D.M.J.	Gravesend	J.F.C. Crombie-Smith	Lauder
C.W. Hall	Dublin	S.E. Johnston-Smith	Blackburn
P. Hopkins (F)	Ambleside	G.R. Staley (F)	Hull
D.A. Ireland (F) (PP)	London N.W.3	L. Stone	Hove
J.E. Keen, D.M.J.	Shrewsbury	S.W. Taylor	Bristol
T.G. Kennedy	Birmingham	W.J. Turney	Penzance
T.C.T. Killen	Larne	H. Watkin-James	Gresford
G.A. Lawrenson, O.B.E.	Larne	R.M. Whittington, D.M.J.	Sutton Coldfield
W.E. Leatham	Lytham St. Annes	O.G. Young (F)	Peterborough
	Congleton		

MORE DONEYISMS

Letter from the undertaker — If you don't pay for the mother-in-law's funeral by next Monday — Up she comes.

TWO BAR SONGS:

Don't point father at me, mother. I think he's loaded again".

"Get off the kitchen stove Grandma. You're too old to go riding the range".

PC. "Sarge, that poor ugly chap down in cell 3 hasn't got a proper nose at all".

Sgt. "How does he smell?"

PC. "Bloody awful Sarge! Phew!"

Bacteria — the back door to the cafeteria.

Prosecuting Solicitor in antiques fraud case — "The defendant has always been a collector, your honour, and she has several men friends who are also collectors. I suppose you might say she is a collector's piece."

Chateau du Plonque
Cru Welsh Claret
(for those who dare) **A\$1.95**
Vintage 19??
1st Cru Welsh Claret
Clive's Private Bin
Grown on the slopes around
the Midland Abattoirs.
Sold in Germany as "Three
Men Wine" (It takes two
men to hold the other up
whilst he drinks it).
Beware of French imitations.

Label on Australian bottle of wine.



**ARE YOU GIVING A PAPER
IN OXFORD?**