There are now enough facilities in India for postgraduate study in nearly every branch of medicine; moreover, Indian postgraduate qualifications are essential for higher appointments in our teaching hospitals. In the circumstance, the only legitimate study overseas would be for acquiring special skills and not degrees or diplomas. This would entail the availability of clinical appointments in specialist teaching hospitals, which is not the case in Britain from all available accounts, including Dr. Chakrabarty's.

The restrictions on obtaining foreign exchange for overseas study are designed to make the best use of this scarce resource by ensuring that only those fitted for such study are able to proceed. A beneficial "side-effect" is that since the end of last year the medical influx into Britain has come to an end.—I am, etc.,

Bombay,
India.

J. S. MIRANI.

Out-of-hours Calls

SIR,—In view of the interest in the B.M.A. Emergency Treatment Service at the present time, it may be worth publishing these figures of out-of-hours calls.

From August 1965 to January 1966 we recorded calls done from 6 p.m. on week-nights to 7 a.m. the following morning, and from 12 noon on Saturday to 7 a.m. on Monday, these being the hours when the Emergency Treatment Service functions. Six industrial practices are involved: 13 doctors caring for 35,500 patients. Midwifery calls are excluded, as they are done by the patient's own family doctor. Visits to the general-practitioner casualty department are counted.

The number of night calls was remarkably constant in spite of a 'flu epidemic in December.

August 4.6, September 3.9, October 4.5, November 3.7, December 4.5, January 4.15 calls per night for 13 doctors, averaging 4.3 calls for 13 doctors or one call for three doctors per night. Calls per 13 doctors for each of three week-end sessions (Saturday 12 noon–6 p.m., Sunday 7 a.m.–12 noon, and Sunday 12 noon–6 p.m.) are shown in Table I.

TABLE I.—Calls for Thirteen Doctors for Each of Three Week-end Sessions

Month	No. of calls/ week-end session
August ..	4.1
September ..	5.9
October ..	3.9
November ..	4.9
December ..	8.9
January ..	6.6

Table I shows that in contrast to night calls, week-end daytime calls vary considerably according to season, and the peak in December corresponds with the 'flu epidemic mentioned. This indicates the difference between "emergency" night calls and calls at week-ends, which include both emergencies and less urgent calls, especially upper respiratory infections.

Table II shows the times at which calls were received. The increase in calls between 9 p.m. and 10 p.m. appears to represent a

desire to call the doctor and resolve the problem before retiring for the night.

TABLE II.—Times at Which Calls are Received

Time	No. of Calls	Time	No. of Calls
7 p.m. ..	13.8	2 a.m. ..	6.0
8 " ..	22.8	3 " ..	2.6
9 " ..	15.0	4 " ..	1.0
10 " ..	20.0	5 " ..	1.8
11 " ..	15.2	6 " ..	2.6
12 midnight	13.2	7 " ..	1.2
1 a.m. ..	10.0		

The average call rate was 5.75 calls/1,000 patients/month.

A practitioner with 2,500 patients would expect about 14½ calls out of hours each month. These figures correspond with those in "Present State and Future Trends in General Practice" presented by College of General Practitioners.

These figures may be useful to doctors estimating their E.T.S. requirements.—I am, etc.,

112 Park Road,
Wallsend.

J. O. FITZGERALD.

Facilities for Patients or Doctors?

SIR,—I was astonished to read (*Supplement*, 26 March, p. 82) that the Private Practice Committee, in considering the withdrawal of health visitors' services from emancipated Birmingham general practitioners, had decided that "no useful purpose could be achieved by pursuing the matter further." I can only conclude that the Private Practice Committee serves no useful purpose either.

I agree that the discontinued service is unlikely to be restored in this particular case, but meek surrender in the face of open reprisals is to invite further disaster. May I remind the Committee that the health-visitor service is intended for the benefit of *patients*, not doctors as their report suggests. Patients pay for these services and are entitled to them whether they chose a N.H.S. general practitioner or a private one.

A militant attitude at this stage may prevent repetition, and the thicker the portion of the wedge, which includes pathology, x-rays, referral of private patients to N.H.S. specialists, and even National Insurance certificates of incapacity to work.

This type of unhelpful action by B.M.A. committees appears to be increasingly common, and is one of the reasons why I am rapidly coming to look upon my B.M.A. membership fee as little more than a convenient method of regularly receiving the B.M.J.—I am, etc.,

London S.W. 1.

JOHN IND.

Ophthalmic Clinics in Industry

SIR,—In your issue of 19 March (*Supplement*, p. 73) under the above heading Dr. R. L. Luffingham was quoted as saying: "It was unethical for an optician to give in the *Optical Register* an industrial firm as his registrable address unless he was a direct employee of that firm." If the *Opticians Register* of the General Optical Council was meant, Dr. Luffingham has been misinformed.

Neither the Opticians Act nor the General Optical Council's notice N.7 contains any ban on giving an industrial address. Indeed, the current *Register* lists several industrial clinics which opticians attend, and certainly not as employees; this would obviously not be so if it was "unethical."—I am, etc.,

Guild of British Dispensing
Opticians,
London W.1.

M. G. AIRD,
Secretary.

Sir Charles Hastings's Vocation

SIR,—I am grateful for the copy of your journal of 12 March with its supplement of excellent photographs of places connected with Sir Charles Hastings. While the centenary of his death is a matter of present concern to your readers, you might be interested in an anecdote of his boyhood, which has been transmitted through the family and which, as far as I am aware, has not appeared in print.

The Rev. James Hastings, his father, took possession of the then lucrative living of Martley, Worcestershire, in 1796. It had been purchased for him in 1791 through the good offices of his wife's family, the Pagets of Chipping Norton in Oxfordshire, a wealthy banking family, who had also bought the advowson of Bitterley in Shropshire, which cure the Rev. James Hastings was serving in 1794 when his son Charles was born in the near-by town of Ludlow.

The early years of James's incumbency at Martley were uneventful, but in 1806 he sustained a head injury while hunting, which incapacitated him for the next 50 years until he died in Worcester in 1856 at the age of 101. During this period he was designated in the ruthless language of the legal documents "a lunatic," and the parish of Martley enjoyed no incumbent for the whole of that period, being served by curates-in-charge.

After the accident in 1806, so the family tradition relates, the rector sat at the foot of the great oak staircase in the Elizabethan hall of the rectory and refused, in spite of family persuasions, to go to bed. Only one member seemed to have any influence with his father and succeeded in leading him upstairs. This was Charles, now 12 years of age. Was there inherent in this boy some specially sympathetic facility in dealing with the sick and did he discover his aptitude at this tragic point in the family fortunes? At any rate, soon afterwards, he began to learn the trade of a doctor with an apprenticeship at Stourport-on-Severn and entered upon that remarkable career which is sufficiently well known to your readers. I have often wondered whether that fortunate consummation for British medicine had its origin in the tragedy which befell the Hastings family, which hitherto had known only the calm rustic pleasure of an opulent squarson's children. We may be sure that the memory of the tragic father seated on the lowest step of the old staircase could never have been erased from the mind of the eminent doctor. The engraving of the well-known portrait painted in 1839 by Benjamin R. Faulkner still hangs on the staircase wall at Martley Rectory above the place where he persuaded his deranged father to go to bed.—I am, etc.,

Martley Rectory,
Worcester.

J. S. LEATHERBARROW.