Wheat and chaff in alternative medicine

Sir—Kahn (March 15, p 812) regards the fact that I wrote the foreword for a book on the scientific basis of homoeopathy to be evidence of bias. If the director of research of the largest public-sector hospital in Europe devoted to any other specialty wrote the foreword to a book on research in that specialty, would he construe it as a bias? I think not. Kahn goes on to make an unrefereed attack on a clinical trial in which I was principal investigator and charactersises homoeopathy as quackery and himself as a fearless crusader against it.

The evidence does not support Kahn. Two overviews, including one by an expert group supported by the European Commission, found that the clinical evidence is positive. The expert group identified 184 clinical trials of homoeopathy, and concluded that the results of its meta-analysis were unlikely to be due to publication bias. Meanwhile, the public is voting with its feet: sales of homoeopathic medicine are growing at 15% every year in the UK, and even more rapidly in the USA. If Kahn expects to be taken seriously, as a commentator in this area of rapidly growing scientific and public interest, he will need to show more respect for science and less for conspiracy theories.

Peter Fisher
Senior London Homoeopathic Hospital Trust
London WC1R 4HT


Elderly pilots

Sir—A person who applies for an aeronautical pilot's licence, or its renewal, must undergo a medical examination by a physician to assess his or her physical and mental aptitude. In France, the medical-aptitude norms are defined by the decree of Oct 2, 1992, which was an amendment to the decree of Dec 2, 1988. But these norms will soon be replaced by stricter European norms. The Joint Aviation Authorities, developed by the Joint Aviation Authorities, in view of these changes, the aptitude of pilots older than 65 years should be reassessed.

In the Nord region of France, 19 voluntary non-professional pilots (aged 66-75 years) gave their consent to undergo a medical examination in accordance with the present decree. The examination was systematically completed by a psychiatric examination that will be made compulsory from July 1, 1998, if the European standardisation projects are adopted. These examinations are: an electrocardiogram, an audiogram, and basic haematological tests. Such rigorous examination ensures that medical conditions previously undetected in men who have not been treated by a doctor are brought to the fore.

Of the 19 French pilots, only one met the criteria for physical and mental aptitude. Among the other 18 pilots, some showed one or more grounds for total or temporary inaptitude. Three pilots were declared totally invalid because of ophthalmological (one case), cardiovascular (one case), and cardiological and neurological (one case) problems. 15 pilots proved temporarily unfit—in part to the problem was stabilised by surgical or medical treatment and their aptitude was confirmed by the specialist. The 15 patients had cardiovascular, digestive, endocrinological, ophthalmological, orthomolarystological, or genito-urinary disorders.

These findings underline the importance of a thorough medical examination of pilots by authorised doctors. If the European standardisation reviews the statutory decree on the physical and mental aptitude of non-professional pilots, it is adopted and implemented, the safety of pilots who wish to continue flying over the age of 65 and their passengers will be improved. At present, we can only advise special vigilance during the medical examination of pilots aged over 65.

Luc Deviaene* Bernard Frigard
Hôpital de Genval, Rue Soleillevante 109, 59290
Wavre, Belgium


*Correspondence to: Luc Deviaene

Vol 346 • May 31, 1997
1629