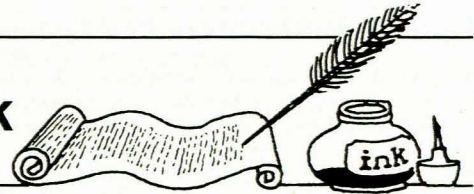


Correspondence/Briewerubriek



Appeal on Crossroads

To the Editor: We, as members of a profession dedicated to the maintenance and preservation of health and the well-being of the community, are appalled at the current situation at Crossroads. We are particularly distressed by the fact that this tragedy has involved so many people — including women and children left homeless and destitute in the middle of the Cape winter. The anguish and suffering experienced by this community is an indictment on our society, and cannot be allowed to continue. The short- and long-term effects of this hardship and suffering are immeasurable. We cannot help asking ourselves whether a similar tragedy would have been allowed to continue if this had been a white community. (Sentence deleted.)

We urge the government to declare the area a disaster zone immediately and ensure that adequate relief measures are provided. Furthermore, we call on all those involved to stop this senseless killing and destruction and for the government to appoint an independent judicial inquiry to investigate all aspects of this tragedy.

As doctors it is our fundamental ethic to save, heal and nurture life, to improve the condition under which man strives, and in so far as it lies within our power, to enable him to live in peace and harmony. We should never be silent when any of these objectives are threatened. We call on all in the health care professions to add their voice of protest to ours in this matter.

S. R. Benatar, R. Kirsch, R. Benatar, R. van Zyl Smit, P. Commerford, G. R. Keeton, F. Bonnici, N. S. Levitt, H. Kaplan, D. Philcox, D. Burns, I. Huskisson, B. Sarembock, I. Grayce, D. Woolf, H. H. Brown, D. Gottlieb, A. Swanepoel, S. Morrison, G. Kantor, N. Maharaj, P. Joubert, K. Landers, M. D. Voigt, H. Muller, F. Lorgat, S. Laing, J. Turner, I. Pirie, J. Stevens, G. Braatvedt, J. Grobbelaar, L. Kahn, A. Horak, N. White, R. Eastman, J. Goldblatt, S. Louw, A. N. Murray, J. Stern, M. Lipshitz, J. Kruskal, S. Jennison, E. Bateman, A. Angus, R. McCully, P. J. Chapman, R. Behari, R. I. Raine, S. Robson, B. Evans, R. Bonafede, J. Pugh, B. Kies, H. Jakob, A. R. Daniels, H. van der Post, M. Pascoe, M. Cassidy, C. Swanepoel, R. Wood, R. Tobias, S. Kessler, H. Ball, W. Spearman, T. Windsor, M. du Toit, R. Hift, J. McLachlan, B. Castle, K. Newton, P. Dorasamy, C. Levitt, O. Johnson, H. Martins, J. Carr, G. Dubow, P. A. van der Merwe, K. Sullivan, D. Whitelaw, A. Kalla, W. Friedlander, A. Tooke, P. Musikant, M. van Staden, A. Bryer, H. Landman, A. Unger, L. Vogelpoel, S. Lenhoff, I. Sarembock, B. Rayner, R. Fraser, C. Mowsowitz, J. Dewar, P. Pillay, K. Lewis, P. Pillans, S. Barker, R. Friedman, V. Peteni, A. Firsiray, S. J. Saunders, N. Saxe, C. Cavvadas

Department of Medicine
University of Cape Town

To the Editor: The Medical Students' Council of the University of Cape Town takes cognizance of events at Crossroads, and the resulting human suffering, and fully supports the recent statement from doctors from the Department of Medicine at the University of Cape Town. This statement is felt to be a responsible, ethical and reasonable expression of medical concern, and we urge the government to recognize the situation at Crossroads for what it is,

and to provide adequate relief measures to end this human disaster.

This statement of support has been co-signed by the Executive of the Board of the Faculty of Medicine, UCT, the SHAWCO Board of Management, the SHAWCO Health Management Committee, and the Medical Students' Council Executive of the University of the Witwatersrand.

Medical Students' Council
University of Cape Town

Papanicolaou smears in general practice

To the Editor: A 67-year-old grand multipara was recently admitted to our firm from an outlying town. She had presented to her general practitioner with a month's history of postmenopausal bleeding, and an advanced carcinoma of the cervix had been diagnosed. The tragic aspect of this case was that the patient had been under regular observation and treatment for hypertension for a number of years. She had, however, never had a vaginal examination, let alone a Papanicolaou smear.

Although many general practitioners take regular Papanicolaou smears, this vital procedure is often omitted. We would urge that regular vaginal examinations (including of course a speculum examination) be performed and that Papanicolaou smears be taken as part of the routine check-up of any woman, and especially one at high risk of genital cancer. We would particularly caution against the all too prevalent practice of treating a patient with a vaginal discharge without performing a full vaginal examination, unless such examinations are already performed regularly.

H. A. van Coeverden de Groot
L. J. Abramowitz

Department of Obstetrics and Gynaecology
University of Cape Town and
Groote Schuur Hospital
Cape Town

Please be brief. Letters longer than 400 words may be returned for shortening. Letters should be typewritten in triple spacing and should be sent in duplicate. References, which must be complete, should be in the Vancouver style and should not exceed 10 in number. We may send letters critical of other authors to them so that their comments may appear in the same issue.

The views expressed in the Correspondence published in the SAMJ are not necessarily those of the Medical Association of South Africa.

Wees asb. saaklik. Briewe wat langer as 400 woorde is, kan vir verkorting teruggestuur word. Briewe moet in drievubbele spasiëring getik en in duplikaat wees. Verwysings moet volgens die Vancouver-styl gedoen word en mag nie meer as 10 beloop nie. Ons mag briewe waarin kritiek teen ander outeurs uitgespreek word aan lg. stuur vir kommentaar, wat dan in dieselfde uitgawe sal verskyn.

Die menings gelug in die Briewerubriek van die SAMT is nie noodwendig dié van die Mediese Vereniging van Suid-Afrika nie.