

LETTER TO THE EDITOR

LUNG CANCER, CHRONIC BRONCHITIS AND CIGARETTE SMOKING

From: Colonel John Mackay-Dick, O.B.E., F.R.C.P.E., late R.A.M.C.

SIR—A leading article in the *British Medical Journal* (18th January, 1964, Page 133) this year stated: "It is symptomatic of the grip the tobacco habit has on its victims that yet another elaborate report, this time from the American Government, should be found necessary to convince the public of the dangers of smoking.¹ The main facts have been known for some years: the difficulty is to get them accepted and acted upon."

According to a *Lancet* editorial (1962, 1, 85) "cancer of the lung now causes a third of all cancer deaths in males in this country. Taking both sexes together it is now the commonest fatal cancer and its lead is increasing. We know how to stop the epidemic as surely as SNOW knew how to stop CHOLERA in London. If we did not smoke cigarettes the incidence of bronchial cancer would be only ABOUT ONE-FIFTH OF ITS PRESENT LEVEL. Yet we continue to smoke cigarettes. Why? SIMPLE INERTIA AND MILD ADDICTION ARE PROBABLY THE MAIN REASONS."

Previous to this an annotation in the *British Medical Journal* of December, 1961 included these words: "This year at least 19,000 men will die from cancer of the lung and 17,000 from chronic bronchitis. There is no doubt about the association between these conditions and tobacco smoking.^{1, 2, 3, 4} It has been argued that in the absence of smoking FOUR out of every FIVE cases of cancer of the lung and ONE out of TWO cases of chronic bronchitis would NOT occur."

It is considered to be the duty of every doctor not to smoke in the presence of his patients or in the presence of children or in hospital except in rooms specially set aside for that purpose. In the R.A.M.C. great stress is laid on the importance of Army health and we all know that in all Army health matters personal example of all members of the Army Medical Service is of paramount importance.

The MRC stated plainly, "Evidence from many investigations in different countries indicates that a major part of the increase (in lung cancer) is associated with tobacco smoking, particularly in the form of cigarettes." And it concluded unequivocally: "The most reasonable interpretation of this evidence is that the relationship is one of direct cause and effect." I submit that no individual is competent to challenge this evidence and for any one to do so in the absence of further authoritative evidence is to act from ignorance or prejudice or both.

I make a plea therefore that in the Army Medical Service we should practise what we preach and for cigarette smoking to be restricted to rooms particularly set aside for that purpose, not only in hospitals but in Officers' Messes. To follow such a policy would redound to the credit of the Army Medical Service. To do otherwise would reduce our professional status to that of a back street saloon bar.

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30th September, 1964.

I am, etc.,

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 - 3—DOLL, R. AND HILL, A. B. (1964). *Brit. Med. Journ.* **1**, 1399, 1460.
 - 4—DOLL, R. AND HILL, A. B. (1956). *Brit. Med. Journ.* **11**, 1071.
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