

Selected Articles from *The Individual* August 1995

Society for Individual Freedom

Since 2002, each new issue of the SIF's journal, *The Individual*, has been uploaded onto the SIF's website at www.individualist.org.uk as a PDF file. Before that, online availability was very limited.

To remedy this, we have reconstructed back-issues of the journal using only the core articles. We hope that you will find them of interest. Any comments should be directed to the current editor of *The Individual* at editor@individualist.org.uk.

Please note that views expressed herein are not necessarily those of the SIF but are printed as a contribution to debate.

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TOWARDS TRUTH THROUGH FALSIFICATION

Professor Antony Flew

The first essential is to grasp the simple, fundamental truth about the subsistence of logically necessary connections between sincerity of purpose and the constant, alert monitoring of success or failure in the achievement of those purposes. For, in anyone with any pretensions to rationality, sincerity in the pursuit of any purpose whatsoever absolutely presupposes a strong and consistent concern to discuss whether and how far that purpose has been and is being achieved. Furthermore, if and in so far as the agent becomes aware that it has not been, or is not being, achieved, and unless there is a readiness to attempt alternative and, hopefully, more promising tactics, we cannot truly allow that that purpose still continues as the same commitment pursued with the same sincerity as before. Descartes used to say that he preferred to judge what people sincerely believed by what they did rather than by what they said. The same shrewd principle applies equally well to the determination of true intentions and the identification of actual purposes.

Once this has been clearly stated it is obviously and incontestably true. Yet, it has the most widespread, important and indeed often explosive implications; implications which seem rarely if ever to be recognised. The next step is to relate these logically necessary connections between sincerity, rationality, monitoring and tactical adaptation to certain recommendations famously made by the late Sir Karl Popper. These recommendations refer both to scientific or (as Aristotle would have said) theoretical enquiry and to practical politics – the word "politics" here being employed to embrace every kind of policy question. In both cases Popper's methodology can be seen as the necessary outcome of sincerity in the appropriate purposes. It is the more worthwhile to represent his recommendations in this way in as much as Popper seems never to have done so himself.

The aim of all scientific inquiry is to discover the truth; or, if for any reason that is unattainable, then the nearest possible approximation to it. If indeed truth is what we are sincerely and rationally seeking, then we have to adopt the critical approach. The crux is that every supposed finding must be subjected to the most radical and relentless criticism. Such criticism must be directed to showing: not that that finding is politically incorrect or otherwise unwelcome; but that, whatever its other attractions, it is nevertheless false. For it is only for so long as and in so far as any supposed finding has survived such strenuous attempts at falsification – at showing it to be false – that we can have sufficient reason to believe that, even if not the final truth, it is at least the nearest presently possible approximation thereto.

It is precisely because genuine scientific hypotheses are and must be directed at the discovery of truth that they are and must be exposed to the theoretical possibility of falsification. The richer and more widely comprehensive such a theory is, the greater the number and the variety of the implications it must carry about the things which must have happened and must be going to happen if it is indeed true; and hence the

greater the number and the variety of the theoretical possibilities of its falsification. Unlike the members of the Vienna Circle of Logical Positivists, Popper offered in principle falsifiability as a criterion: not of the Meaningfulness of putative assertions; but of the authentically scientific status of supposedly scientific theories and hypotheses. It was on this basis that Popper challenged the pretensions to scientific status of Marxism and the psychological theories of Freud, Adler and Jung; what, if these theories were true, would their truth guarantee would not happen? But Popper himself never went on to challenge religious believers with questions such as: "What would have to occur or to have occurred to constitute for you a disproof of the love of, or the existence of God?"¹

Whereas the single aim of theoretical science is truth, the purposes of practical policies, and of the institutions established for the implementation of those policies, and the fulfilment of those purposes, are as multifarious as human desires. Yet parallel considerations apply here too. Suppose that you want to claim that it was in order to secure some particular desired goods that a particular policy was introduced, and that these are still the objectives for which it continues to be sustained. Then you have to show that the people who first introduced that policy and those who continue to sustain it and its related institutions were, and are, both keen to monitor success or failure by that same stated standard and, if it turns out that the policy is not in fact producing the results which were, allegedly, intended, are now ready to change course.

This argument can help us to understand Popper's advocacy of what he distinguished as piecemeal, reformist social engineering as opposed to the wholesale, utopian revolutionary alternative. For it yields a compelling answer to what was once a frequently pressed question: "Just how wide-ranging and upsetting does a programme have to be before its implementation ceases to count as piecemeal, and begins to rate as wholesale, social engineering?" That answer is: "Just so soon as it becomes impossible effectively to monitor success or failure and to correct the mistakes thus discovered." Since the paradigms of wholesale, utopian social engineering were implemented in the name of what advertised itself as "scientific socialism" it is very much to the point to quote Popper's counterclaim that the critical approach would: *lead to the happy situation where politicians begin to look out for their own mistakes instead of trying ... to prove that they have always been right. This – and not Utopian planning or historical prophecy – would mean the introduction of scientific method into politics, since the whole secret of scientific method is to learn from mistakes.*²

The practical morals to be drawn from a grasping of the logically necessary connections between rationality, sincerity of purposes and the monitoring of success or failure in the achievement of those purposes can and ought to be applied in almost every sphere and not only to politics and professional politicians. For instance: in their over-optimistically entitled study *Can Social Work Survive?* (London: Temple Smith, 1980)

Colin Brewer and June Lait were distressed to discover that social workers generally appeared to be hostile to any attempt at independent assessment of the actual effects of their social working. Those authors at that time were too charitable to point out that this hostility, and the consequent failure to see and to seize the opportunities of learning from and correcting whatever failures and mistakes such investigations might reveal, constituted depressing evidence of the actual concerns and calibre of the people in question.

By far the most important and most scandalous U.K. case for the thorough and systematic application of these ideas is, however, provided by the (state) maintained school monopoly supplying primary and secondary education services. Of course, since between six and seven percent of children in the relevant cohorts attend still independent schools, it is not, very strictly speaking, a monopoly. But is there any anti-monopoly legislation anywhere in the world which would not be activated long before a single supplier had achieved a 90% market share; and that without taking account of the fact that this supplier operates a policy of predatory NOT-pricing?

Yet this nationalised industry, which is by any standards one of the largest and most important industries in the country, does not know, never has known and remains extremely reluctant to allow anyone to find out, what its annual output is. There never has been and still is not any comprehensive system of school leaving examinations; and the independent ex-

aminations which are taken are norm – rather than criteria – related, thus invalidating all direct year-on-year performance comparisons. The only comprehensive and systematic monitoring of the working of this industry is provided by the (preannounced) visits of inspectors; a monitoring of the process of teaching rather than of the hopefully intended product, achieved pupil learning. No-one, therefore, has any business to be surprised to learn that a large number of our children leave school functionally illiterate and functionally innumerate after eleven years of tax-funded education. But since all our evidence comes from surveys and other studies of those who have already left school, no-one knows exactly how large that number is.³

NOTES

1. For a raising and discussion of this question, see Antony Flew and Alasdair MacIntyre (Eds.) *New Essays in Philosophical Theology* (London: SCM Press, 1995), pp 96-130.
2. K. R. Popper *The Open Society and its Enemies* (London: Routledge and Kegan Paul, Fifth edition 1966), Vol. I, p 163: emphasis added.
3. For how neither alternative teaching methods, nor alternative resource allocations nor indeed anything else is ever judged by reference to its actual effects on pupil learning, see Antony Flew *Shepherd's Warning* (London: Adam Smith Institute, 1994).

FREEDOM IS THE RIGHT TO KNOW

Peter Jackson

The right to refuse medical treatment is a basic right and a basic freedom. It is lost to a patient when vital information is withheld about a treatment. The information should include the purpose of the treatment, its intended result (notwithstanding that this result might be of limited value only), the possible or probable outcome, and, of major importance, possible side-effects.

There is today wide agreement that the time has come for the principle of Freedom of Information for patients to be informed as stated in the Citizens Charter. Unfortunately the system, and the law, ensure that many facts which could be a matter of life or death only come to light through bitter experience. Any facts about malpractice, in particular, are often difficult to unravel.

Malpractice, whether by medical practitioners, or the result of bureaucratic mismanagement, has been reported with increasing frequency in the media recently. This has culminated in the report by the Health Ombudsman, Mr William Reid, condemning bosses as "uncaring", adding that "the way some patients are treated is deplorable". He gave examples such as that of the family of a man who had died after several weeks in hospital, not knowing he had cancer because his consultant had not told the patient, the staff, or his family.

Readers of *The Individual* will know of a number of cases which have been brought to the attention of the Society for Individual Freedom where people have spent many years in unsuccessful attempts to discover relevant facts about a medical mishap. In one case a mentally deficient girl had nine teeth removed contrary to the parents' instructions – and they spent five years in unsuccessful attempts to find out why.

On the BBC's radio programme, *File on 4*, the problems patients encountered when attempting to get satisfaction but eventually having to complain to the General Medical Council (GMC), were well documented. Although the main function of the GMC is purported to be the protection of the public, Meg Stacy¹ concluded that the pressures on the members of the GMC from the profession made them more inclined to favour the profession than the public.

Jean Robinson, another former lay member of the GMC, also made it clear that she believes the whole disciplinary procedure is weighted against the complainant, who, she said, "must jump a whole series of hurdles". She also said, "The real scandal of the GMC is the tiny, tiny percentage (of complaints) that get through at all. The Preliminary Screener has to decide whether the complaint amounts to serious professional misconduct and is capable of being proven. At this stage all the complainant has got is his story, and neither he,

nor the Preliminary Screener, has any means of carrying out investigations. So really many people are on a hiding to nothing".

The public should be made aware that the GMC is an association basically concerned with protecting its own professionals, as are all similar professional supervisory bodies. The GMC is concerned with "Serious Professional Misconduct" which it defines as occurring when accepted standards are deliberately flouted. But accepted practices change over time. A more fundamental drawback in the system was highlighted by the case of a psychiatrist, Dr Roderick Frazer, who has a series of convictions involving child pornography, the latest being in April of last year. He was not disciplined by the GMC but treated under Health procedures which enabled him to escape facing a charge of serious misconduct. Last summer Dr Frazer applied for the post of local consultant psychiatrist at Southampton Community Health Services Trust. Managers checked his registration with the GMC and employed him. Four weeks later the Chief Executive, Mike Legar, received a call revealing Dr Frazer's history. References from the GMC had not revealed anything about Dr Frazer's past. This is one of the convoluted ethical tangles that constantly confronts the GMC. Where a doctor has criminal convictions concerning men, women, or children he should be excluded from employment in these or similar areas.

There are two overriding elements contained in complaints taken to Health Ombudsmen, NHS Tribunals, the GMC, and the Society for Individual Freedom. These are:

1. Difficulties encountered in access to information.
2. Complaints concerning alleged malpractice.

Malpractice is rightly the concern of these bodies and of the media but in truth it is a minor problem compared with that of accepted **practice** in areas of scientific uncertainty. That is not to say that cases of malpractice are unimportant, only that they involve relatively few people. In any case, rather than accuse professionals of malpractice we would like to think that many of the mishaps are due to omissions, as opposed to acts of commission, negligence, stupidity, or ignorance.

The main danger to the public is the lack of information about the inherent side-effects of certain treatments. This is especially the case in those areas where a cure is not currently available. When people are unsure of their facts and not in full possession of all relevant scientific information they tend to

obfuscate even the few facts they do know. When confidently in possession of relevant information and convincing facts, they are only too eager to make this available to the public.

It also has to be remembered that pharmaceutical companies are commercial enterprises, not philanthropic institutions. For them the necessity of disclosure of information has to be weighed against commercial viability. This is not to criticise but merely to state a fact. It might well be the reason Giles Radice's Medicines Information Bill was talked out by MPs with drug companies in their constituencies.

Every year in England there are 75 million prescriptions for tranquillizers written²; drugs³ to which between one and two million people are addicted. There are 120,000 treatments of electro-convulsive therapy (ECT) given every year; and perhaps 1,000,000 people are given chemo-therapy and/or radiation therapy.

It is time we asked to know whether anyone taking tranquillizers has been warned that they are addictive and that these drugs sometimes bring about an increase in violence.⁴ The dangers of drugs would of course be minimised if they were given only in the proper doses, suited to the individual, and with continuous professional supervision. While a layman might not be able to observe side-effects at an early stage, perhaps a professional could and should.

Also, is patient or relative warned that this sort of treatment can prove fatal⁵ and that case studies have shown that



Studies

GP Experience Data Sheet

Patients Information leaflet

The British National Formulary

The Prescribers Journal

The Drug and Therapeutics Bulletin

Publications available through Public & Medical Libraries

The Pharmaceutical Company promotional material is the most common source of information but the least important

brain lesions^{6,7} are caused by ECT? These lesions almost certainly lead to an early death after an impaired life for thousands of people every year. Has any one of these patients been told that the only review⁸ of all the genuine versus sham ECT studies concluded that this data "as a body of evidence, does **not** in the opinion of the authors significantly indicate that real ECT is more effective than sham ECT in treating depressive illness". Without full public knowledge of the facts and results as known being freely available, how can anyone give "informed consent"?

A recent survey of people in Surrey showed that while 94% would like to be given all relevant information on the known side-effects if they were prescribed tranquillizers, only 24% of patients had been given any such information at the time they were actually given a prescription, and none had been given the full information about the inherent dangers.

Knowledge about a drug or treatment can be represented by a pyramid. The most important information would be at the top because it is needed to evaluate the rest. Missing from the top of this "pyramid" (see diagram on this page) is information on long-term aims, long-term success rates (%), long-term side effects (%), and a GP's aim for a treatment and what he expects it to achieve. Also missing are drug company tests which can not be published by anyone else since it is illegal for them to do so!

WHAT IS NEEDED

The right to know (or not to know if one wishes) should be enshrined in law. To achieve this:

1. The practitioner should be obliged by law: to make known to the patient or his representative all available information about his treatment that the practitioner, if he were the patient, would wish to know – to include in his notes his professional assessment of the mental state of the patient throughout, and also reasons why a treatment was chosen or withheld. Information withheld should still be recorded in the notes together with the reasons for withholding.
2. The practitioner must also be obliged to report the adverse effects of all new drugs and all controversial treatments or major surgical operations which might come to his own knowledge from his own experience.
3. A body of laymen, in place of the GMC, should be given investigatory powers and should ensure that the standards of practice set by the GMC are published and maintained.
4. That the same body of laymen should ensure that all available information concerning treatments and their side effects

are made available to the general public.

NOTES and BIBLIOGRAPHY

1. Meg Stacey, Emeritus Professor of Sociology at Warwick University, served as a lay member of the GMC in the 80s.
2. Lucy Johnstone, Senior Clinical Psychologist – *Users and Abusers of Psychiatry* – published by Routledge.
3. National audit of Drug misuse in Britain, 1992 – ISDD.
4. Workman, MD and D Cunningham, article in the Canadian Family Physician, Nov. '75 – *Effects of Psychotropic Drugs on Aggression* – this found an average increase of 360% in aggression.
5. The Hon. W. S. Maclay, OBE, MD, Presidential address, Proceedings of the Royal Society of Medicine, Vol. 46 – indicated a death rate of 0.06%. (As 120,000 ECT treatments are given each year one can assume that one person dies every 5 to 6 days under treatment.)
6. I. M. Allen, New Zealand Medical Journal, No. 325 – study on Cerebral lesion from Electric Shock Treatment.
7. Peter Sterling, Associate Professor of Neurology – Testimony on brain damage and memory loss from ECT; prepared for the Standing committee on Mental Health, Assembly of the States of New York, Oct. '78.
8. Dr Graham Sheppard, Consultant Psychiatrist, Ticehurst House Hospital, Dr Saad K Ahmed, Senior Registrar, Hayes Grove Priory Hospital – A critical review of the controlled "real versus sham" ECT studies.

DON'T BELIEVE WHAT YOU READ

Avedon Carol

According to this week's research news, coffee is good for you. Last week it was bad for you, and it had already gone back and forth a few times before that. Next week it will probably change again. But that's science.

This week, *Time* magazine published a sensationalistic story on "cyberporn" which will probably end up being taken as gospel because (a) it is not nearly as sensationalistic as most other "cyberporn" articles that have been appearing in the press, and (b) it refers to a study done at Carnegie-Mellon, a respected academic institution. In Washington, Senator Grassley told all who would listen that this study revealed that of 900,000 images surveyed from the Internet, 83.5% were pornographic. In fact the Rimm study examined 900,000 items, both written and visual, taken from *adult bulletin boards*, and none of this is representative of what is "on the Internet" generally. And this is "science".

The media these days like to report on lots of science, and an

astonishing number of people like to pretend they are scientifically knowledgeable because they have read inaccurate and misleading articles on the science pages of newspapers, or watched a sensationalistic special programme on the news or *Dispatches*. I'm forever being told this or that scientific "fact" by people who haven't got a clue what is going on in the related field and are unaware that without peer review and reproducibility, the results of these little studies are meaningless. But I know where they get the idea that these things are "true", because I, too, read the newspapers and watch television.

The "science" I most often deal with as an anti-censorship campaigner addresses violent and pornographic media and their alleged relationship to sexual deviance and crime – which of course means I also have to spend a lot of time examining criminological and clinical reports as well as the laboratory research some people like to cite.

The media *love* pornography stories, but they like them lurid and, again, sensationalistic, which means you always get the most bizarre, anti-sexual slant possible. Anyone with an axe to grind and no credentials whatsoever can stand up on *Kilroy* or *Esther* and claim that sex offenders all use pornography, and somehow this becomes the gospel. Even better, we actually have a man here in Britain who has run a treatment centre for child abusers and who claims that they tell him pornography made them do it; he seems unaware that his own prejudices are being telegraphed to his "patients" and that no legitimate researcher would take such "evidence" seriously. It is unlikely that there will be another expert in the audience who will get the chance to point out that 50 years of research on the subject contradicts his claim.

TV shows of this sort routinely try to pack their audience with people with opposing views, no matter how batty some of those views may be. This, someone who has done serious research in the field may be treated as having no more credibility than someone whose only knowledge of the subject is that she's not interested in it and can't understand why anyone else is interested in it either. Or someone who has spent 20 years over-viewing pornography will be treated as equal to someone whose knowledge is based on one anti-pornography slide show with wholly unrepresentative images.

I've also been rather intrigued to note another kind of "expert": the psychologist. The psychologist almost always turns out to be someone who has no more knowledge of the subject than the average newspaper reader, and very often he may have the same sources. If you're lucky, he'll be someone who has read the abstracts of a couple of studies, but anyone who has read *whole* studies knows that abstracts can be very misleading and hardly scratch the surface of what a study says; they are rarely any better than press releases.

I've written elsewhere (and at length) about the details of how false knowledge about "pornography science" has permeated the debate, but I also have a sort of leisure "science" subject, which is smoking. It fascinates me, because it seems to be almost as likely as sexual issues to generate some of the most impressive examples of scientific ignorance I have ever seen. Last year the newspapers informed me that smokers have a significantly higher death rate than non-smokers. This unqualified statement intrigued me; it did not say *early* death, but just death. So smokers actually die more times than non-smokers. Wow.

I have also been informed by the newspapers that two well-known anti-smoking researchers (who do not seem to get much praise from other scientists, it should be noted, although they are highly-regarded by politicians) had "proven" that 50% of all smokers die of "smoking-related diseases". That must sound pretty impressive to someone who doesn't know how "death by smoking-related disease" is determined. These researches have actually gone even farther, by suggesting that 50% of all smokers actually *are killed* by smoking, just as the article implied.

The trouble is that there is not and never has been a way to determine this. What we have is a simple prejudice; if two 80-year-old men die of heart attack, and one is a smoker, the smoker will be said to have died of "smoking-related disease",

and the non-smoker will not. (This will be true even if the two men are twins; in fact, it will be true even if the smoking twin dies years later than the non-smoking one.) The same is true of lung and other respiratory disease: any smoker who dies of any of these will be assumed to have been killed by smoking. The assumption is that 100% of heart disease or lung/respiratory disease in smokers is caused by smoking. The unspoken assumption is that smokers, unlike everyone else, would never get these diseases at all if they had never smoked. Smoking "science" now looks to me like a statistical Nevernever land. In the world of anti-smoking research, the human race contains a minority of people who would otherwise be virtually immortal except that, out of some inexplicable perversity, they all take up smoking and die.

But the prejudice against smoking has become so strong that when researchers announced that smoking seemed to reduce or delay the effects of Alzheimer's disease in patients, some science reporters didn't even bother to read the press releases or the abstracts: an item in the *International Herald Tribune* announced that scientists had found that smokers were *more likely* to get Alzheimer's!

And this is just entertainment compared to the even more arcane pseudo-science of "passive smoking", where we now have people extrapolating enormous numbers of annual passive-smoking deaths based on the tiny and statistically insignificant differences in *some* passive-smoking studies (a minority of such studies, in fact) between those who are alleged to be exposed to passive-smoking and those who are not. But you knew all this, right?

We all know – or say we know – that "scientists" believe all sorts of contradictory things and that it's all going to turn out to be different in tomorrow's newspaper anyway. In fact, most of us will claim that we don't believe what we read in the 'papers – we know it is all slanted, it's all rubbish, it's written by people who don't know and don't find out. That's what we say; but we still read it and, god help us, we believe it. And we repeat it. And that, alas, is "science".

Avedon Carol is the author of *Nudes, Prudes and Attitudes: Pornography and Censorship* (New Clarion Press, 1994), and a founding member of Feminists Against Censorship.

OXYGEN THERAPIES UNDER ATTACK

Alwyne Pilsworth

Hydrogen peroxide consists of one molecule of water plus a single oxygen atom. The single oxygen atom has been shown to be the beneficial factor in *oxygen therapy*. This has a long history.

The wide-ranging medicinal properties were first established in the USA from the 1870s to the early 1900s. A book published in 1904 by Charles Marchand lists over 300 medical papers on the medicinal uses of hydrogen peroxide [H₂O₂]. Twenty-seven of these refer to taking it by mouth and seven to the satisfactory treatment of infants this way. In 1920 two British doctors, Oliver and Murphy, published an account in *The Lancet* reporting the first successful intravenous use, and in the 1940s Dr Edward Carl Rosenow, Emeritus Professor of Pharmacology at the Mayo Clinic, found that he could successfully treat several conditions, rheumatoid arthritis in particular, with hydrogen peroxide. Dr Holman, a British research worker who communicated with Dr Rosenow, published a paper in *Nature* in 1957 reporting that he could gain "regression of inoperable cancer tumours" by treating patients with dilute solutions of hydrogen peroxide.

More recently Dr T.L. Dormandy, head of blood research at the Whittington Hospital, published a paper in *The Lancet* of November 1988, headed *Dogma Disputed – In Praise of Peroxidation*. Dr Dormandy proposed that "a role in the self destruct programme would give peroxidation immense survival value even in the normal organism. It might acquire special significance in protection against certain diseases. Pre-eminent amongst them is cancer."

Also Dr Charles H. Farr and his colleagues at the International Bio-Oxidative Medicine Foundation in Oklahoma, USA, have established clear evidence of the successful use of intravenous hydrogen peroxide for a wide range of illnesses spanning heart and blood vessel diseases, lung diseases, infectious diseases including candidiasis, herpes, AIDS, and other viral infections.

There are numerous anecdotal accounts of successful self-treatment with hydrogen peroxide, including recoveries from cancer, inoperable angina, candida, Raynaud's disease, gangrene infection of the leg, asthma and allergies, stomach ulcers, ME and MS, and not least rheumatoid arthritis from which the writer experienced total freedom from all pain and symptoms after 12 days' self-treatment with a teaspoon of 6% hydrogen peroxide three times daily. Self-treatment involves ingesting a dilute solution of Food and Drug Grade hydrogen peroxide. [Readers should be aware that the hydrogen peroxide sold by most chemists is formulated "for external use only" and should NOT be ingested.]

Hydrogen peroxide is a natural body chemical. We all have in our blood an enzyme called **catalase** which acts as a regulator of free peroxide in the blood. There have never been any re-

corded adverse effects from people treating themselves with the correct dose of safe hydrogen peroxide.

[Editorial Note. The above is a brief description of the possible therapeutic uses of hydrogen peroxide. The following is an account, also by Alwyne Pilsworth, of the current position with respect to treatments and, in particular, experience of the reactions of Government. Readers will draw their own conclusions about the "side-effects" of the control of treatments and information by government supposedly as protection.]

Echo (UK) was launched in December 1989 as a non-profit-making company limited by guarantee – which it still is – and it also now a registered public charity no. 1015248. Our primary aim, written into our articles and memorandum of association, is to disseminate information on the medicinal benefits of Oxygen therapies based on self-treatment with hydrogen peroxide, and treatment by qualified practitioners with intravenous infusion of hydrogen peroxide, ozone (O₃) or polyatomic aphoresis (O₃ + O₄).

Our second aim is to promote clinical research into the treatment of any and all ailments which are due to the malfunction of the immune system. The surprising fact is that hydrogen peroxide is *the chemical component* of our own immune system. To quote from Dr William Campbell Douglas who wrote *Hydrogen Peroxide – Medical Miracle*, "No other chemical compound comes even close to Hydrogen Peroxide in its importance to life; H₂O₂ is involved in all of life's vital processes!" Small wonder, then, that when we are short of the leucocytes and granulocytes – cells that produce hydrogen peroxide – we fall prey to viral, bacterial, and fungal attack.

Oxygen therapies can offer self-treatment for relief of a whole range of diseases; arthritis, AIDS, cancer, candida, colds, diabetes, 'flu, heart and circulatory problems, hepatitis, herpes, leukaemia, ME, multiple sclerosis, ulcers, and others.

But progress is much slower than it could be. The work of Dr Holman, mentioned above was stopped by establishment discouragement. However, Dr Holman is still alive and a consultant to this charity. He, of course, confirms in writing that hydrogen peroxide is perfectly safe to ingest, at the correct dose of Food Grade quality.

It is a sad fact that the practice of medicine has been hijacked by the close collaboration of a mendacious medical establishment and profit-seeking drug companies. The result is that, by default in the training of young doctors, the NHS, and the public, are denied access to any therapies other than those based on allopathic medicine (the presumption that treatment must consist of opposition to causes of disease in contrast to strengthening the natural resistance tendencies). Yet a very famous epidemiologist (medical statistician), A.L. Cochrane suggested that if all patients who felt ill stayed at home for a

few days instead of visiting their doctor, 90% would make a complete spontaneous recovery.

Evaluation of the present increasing spate of diseases of the nervous system such as Parkinson's disease, ME, multiple sclerosis, and Alzheimer's disease (which with AIDS and cancer form the bulk of the diseases which currently beset us) indicates that allopathic medicine has failed us all.

It is the leading method of treatment by our medical fraternity, in close collaboration with the drug companies, yet the incidence of all these diseases is increasing rapidly.

This is the time to ensure that effective and cheap alternative therapies which are now ignored by the medical establishment are brought into full play. We require doctors to have available scientifically sound evidence from properly designed clinical trials to show undeniable evidence that oxygen therapies must be introduced *nationally!* (They are already in use by a small band of dedicated qualified medical personnel.)

Our efforts to raise funds for research and inform the public regarding this "miracle molecule" have recently been under attack by the Ministry of Health. In June of last year we received a visit from a Department of Health investigator, Mr Morris, bearing a warrant signed by no less a person than Mrs Bottomley, giving him authority to enter our premises and inspect **all** our files and literature. Mr Morris also **insisted** that an inspector of the Royal Pharmaceutical Society, Mr Chatterley, be allowed to accompany him and listen to all that was said.

At first I demurred at this intrusion but Mr Morris was so insistent that I finally agreed in order to get the matter settled. Our secretary and I were questioned at length about the literature we sent out. Several hours later Mr Morris and his cohort departed after saying we would be hearing from the Medicines Control Agency as we were breaking the law by issuing some of our literature.

We then wrote to the Medicines Control Agency and requested clarification of the matter. In their letter of reply we were advised that we "could be said to be breaking the law" by procuring the sale or supply of a medicinal product contrary to Section 7(2)(b) of the Medicines Act which is a criminal offence under Section 45(1) of that Act.

Their letter went on to list three other examples of how we were flouting or breaking the law, and finished with advice to "omit all mention of any medicinal uses for Hydrogen Peroxide". We were also advised to recall all our leaflets to date.

We replied to the Medicines Control Agency on 9th August 1994 seeking clarification on the legality of sending out medical research papers published by doctors working for medical research institutions funded by taxpayers' money. These papers dealt specifically with the beneficial qualities of hydrogen peroxide in relation to the treatment of cancer. After waiting more than a fortnight, I telephoned a Mr Paul Brittain of the MCA and pressed for an urgent reply to our letter. He said I had caught him "on the hop" and he had to take legal advice. We then received a letter dated 23rd August informing us that we were free to send out any literature which is in the public

domain! That is all we had ever done!

I then 'phoned Paul Brittain again and sought explicit advice on what we were able to say or not to say on these matters. He replied that we can say anything we like over the 'phone, but that we must not advertise claims which are rendered illegal by legislation. This legislation was introduced "to protect the public" but in fact it denies to that same public access to information concerning self treatment therapies which may be successful where allopathic medicine is not.

The same legislation also protects the interests of the drug companies by now making it a requirement to obtain a licence from the MCA for any product for which claims of medicinal benefit are made. The licensing procedure then involves an agreed 3-year testing programme on animals.

Evidence from these tests is then reviewed by a joint committee comprising members from MCA and members of the Committee for Safety in Medicine before allowing the product to enter into a 3-year clinically appraised test programme on people.

All of this is very expensive and can only be funded by the MRC (Medical Research Council) or the huge profits of the drug companies. Most is now funded by drug companies and they are interested only in patentable chemicals which may yield huge profits (e.g. Zantac).

The value of animal testing is doubtful or there would not be the number of deaths from the side effects of drugs which we have learned about in recent years. Furthermore, the Committee for Safety in Medicine have approved drugs which were later shown to cause death, e.g. Centoxin, Opren, and Halcyon. I am informed that this committee is funded by Burroughs Welcome.

In addition to the pressure from the MCA we also received a letter, dated 23rd June 1994, from the Royal Pharmaceutical Society of Great Britain, also seeking to lean on us heavily and offering unwelcome advice concerning our promotion of medicinal products which have not been licensed. Hydrogen peroxide has been in use by doctors since the early 1870s. There have never been any recorded and proven clinical adverse side-effects whatsoever in all of the history of the medicinal use of hydrogen peroxide.

Why did the MCA try to lean on us so heavily, wasting public money and the valuable time of the Secretary of State for Health? Why does the MCA act in concert with the Royal Pharmaceutical Society?

I leave you to draw your own conclusions.

Editor's note. Alwyne Pilsworth is chairman of ECHO (UK) which he set up in 1989. He is a retired consultant agronomist and became interested in oxygen therapies when he was researching the use of peroxygens in agriculture. In 1988 when seeking references for a scientific paper he wished to publish he came across information from the U.S.A. which claimed that rheumatoid arthritis could be successfully treated by ingesting small amounts of hydrogen peroxide. Suffering from RA at the time he treated himself and 12 days later was free of

pain! That was six years ago and he is still free of the condition – and drinking hydrogen peroxide every day to stay young – just like Professor Christian Barnard who cured his arthritis similarly. Alwyne was so amazed at this result that he investigated the whole situation further by travelling to the USA at his own expense and meeting doctors and veterinary surgeons who use hydrogen peroxide with great success.

Most of the information and experience of the value of oxygen therapies emanates from the USA where oxygen therapies are also under severe attack by the FDA and the AMA. Here, doctors can treat people with hydrogen peroxide without fear of reprisals. In the USA doctors who treat people with H₂O₂ can in some states be sent to jail.

REVIEW OF LIONEL BELL'S *THE THROW THAT FAILED: BRITAIN'S 1961 APPLICATION TO JOIN THE COMMON MARKET*

Lord Monson

New European Publications Limited, 14-16 Carroun Road, London SW8 1JT. Hardback, 214pp.

This is a meticulous account of the events leading up to Britain's abortive attempt in 1961 to join the EEC at minimal cost to existing Commonwealth ties and preferences. Copious use is made of hitherto classified cabinet papers now released under the 30-year rule.

A scholarly saga of Establishment follies, evasions, self-delusion, and bungled diplomacy, the book is leavened by flashes of dry wit and some startling revelations. Despite the repeated reassurances made by the "Yes" camp during the 1975 referendum campaign, it transpires that as early as December 1960 Lord Kilmuir, the then Lord Chancellor, spelt out to Edward Heath in minute detail how ratification of the

Treaty of Rome would endanger our sovereignty; drawing attention, in particular, to the threat that the future system of qualified majority voting would pose.

Earlier still, in 1947, Thorneycroft had written: "The people must be led slowly and unconsciously into the abandonment of their traditional economic defences, not asked." (Who can now claim that the sceptics were paranoid?).

And Macmillan, in a craven attempt to curry favour with de Gaulle, once remarked to him that European civilisation was menaced by the North Americans, Australians, and New Zealanders! In the light of this mischievous suggestion, subsequent French behaviour over the *Rainbow Warrior* and Pacific nuclear testing is perhaps not so surprising.

REVIEW OF JOHN PATTEN'S *THINGS TO COME: THE TORIES IN THE 21st CENTURY*

Professor Antony Flew

London: Sinclair-Stevenson, 1995. 225pp.

John Patten's object in this book was to contribute to that thinking about "the long-term Tory agenda and how to carry it out" without which, he believes, the party is heading for "rapid political suicide" (p.1). But his achieved contribution to thought about either the long-term or the short-term future of the Conservative Party is rather limited. The reason is his reluctance to ask: either how the administrators of which he himself was, until his recent dismissal, a member, have continued to make themselves more unpopular than any others since opinion polling began; or what, even at this late hour, might still be done to ensure that a sufficient number of Conservatives are elected in the next General Election to constitute an effective opposition, and one with a real chance of winning the next but one election.

The main part of the answer to the first of these questions must be "the public spending binge of all time in the four years between 1989/1990 and 1992/1993" (p.173) followed by correspondingly massive tax increases. That "binge" and its consequences were of course made extreme by the insistence on keeping the overvalued pound in the ERM (Extended Recession Mechanism) until, at enormous cost to the UK, it was forced out by market forces.

The author does offer two or three suggestions relevant to our second question, although they are not presented as such. For instance: he wants, and very rightly, a restoration of the tax privileges of "the conventional family with children" (p.164). Yet he sees this as a matter not for the very next but for "some future budget speech"; adding, rather feebly, that this would put flesh on the rhetoric about being "the party of the family" (p.41). This wetness is at its worst in the

treatment of the drive to establish a European superstate. For he sees that what he calls "Such dated super-statism" would "devastate for ever our attempts to have smaller government in the United Kingdom" (p.96). Precisely this is the reason why Labour now supports, and Conservatives should oppose, the stated super-statist objective of the Maastricht Treaty. Patten's own response is a pathetic and impotent resolution to "persuade the European Union not to regulate itself into one

of the slow-lanes of a multi-speed global economy" (p.189). But what if, as so obviously is the case, EU is unpersuadable?

A robust and traditional Conservative cannot but respond to the Europe of Delors with a Thatcherite "NO, no, no!" (And you do not have to be any kind of Conservative to recognise that the position of Prime Minister at the heart of Europe is already occupied, very satisfactorily, by Vlakla Klaus.)

REVIEW OF ALAN DUNCAN MP AND DOMINIC HOBSON'S *SATURN'S CHILDREN*

Sean Gabb

London: Sinclair-Stevenson, 1995. 440pp

"REFLECTIONS ON A FAILED REVOLUTION"

I am told that even when a person is dead, the hair and fingernails for a while continue growing. This unpleasant image came strongly to mind as I read my way through *Saturn's Children* by Alan Duncan MP and Dominic Hobson. It is quite the most sensible book published this decade to which a Conservative MP has put his name.

Its subtitle – "How the State Devours Liberty, Prosperity and Virtue" – is a good summary of its contents. During this century, the twin evils of welfarism at home and adventurism abroad have made the State from an incompetent servant to an absolute and often arbitrary master. We used to be told how state control could turn nasty only in countries without a liberal tradition. But we know from experience now that a liberal tradition is less a block on the road to serfdom than at best a set of speed restrictors.

Already, the heavy weight of taxes has abolished any true right to the fruits of our labour – which are better seen as a commission paid on how much we add to a collectivised national income. The equally heavy weight of regulation has tended to abolish most other property rights, turning these into conditional loans to be varied or resumed almost at will. The consequent loss of independence has exposed us to the whims of a politically correct bureaucracy, no different in principle from the past tyrants who imprisoned Galileo and burned Servetus and shot anyone who thought Mendel a better scientist than Lysenko.

And what benefits have we had from this new serfdom? When Esau sold his birthright, he at least got his contracted mess of pottage. When this country went statist, it simply got the most rapid fall from greatness on record. The loss of Empire is nothing worth lamenting. But given a consistently liberal policy since 1900, we might still be the most prosperous nation on earth – replacing Japan as the island equal of the continental trading blocs. As it is, we are in danger of falling behind countries like Italy and Thailand.

We cannot even now say that any loss of freedom and prosperity has been compensated by gains in material equality. We

are fast learning what the Victorians took for granted – that poverty is as much a moral as an economic fact. Not only has a welfare budget of 90 billion failed to prevent the emergence of an underclass as degraded and dangerous as anything to be found in Dickens – it has actually encouraged the process. Headlice now coexist with satellite television, illiteracy with designer clothing.

After several hundred pages of describing how awful things have become, and are still becoming, the authors make their recommendations. Despite the radical analysis, I expected nothing unusual here. When a Tory MP on the "right" of the Party puts his name to a book, the rule is to let the real solutions emerge from the analysis but remain unspoken. All that can be spoken is the usual "Thatcherite" agenda of spending cuts and deregulation – the sort of thing Lady Thatcher never actually did while in office, but which it is quite respectable to claim as a Party orthodoxy. Interestingly, the authors break this rule. They call, among much else, for the legalising of drugs and the privatising of state education. Though not libertarians in the complete sense, they put forward a programme that, if implemented, would within 30 or 40 years repair all the harm done during the past hundred.

If implemented! Here I come back to the hair and fingernails. I began reading this book the day after John Major resigned as Party Leader. I am writing this article the Sunday after the Cabinet reconstruction. Michael Heseltine as Deputy Prime Minister! Malcolm Rifkind as Foreign Secretary! Michael Howard left at the Home Office to complete his abolition of the Common Law! All this in a party that has lost two thirds of its membership since 1990, and has fewer Councillors than the Liberal Democrats! I see no hope here of implementation. Mr Duncan has co-written an excellent book. But he is attached to the corpse of a Tory Party that stinks to high heaven.

Some of my friends are more optimistic. "Wait for the next election" they tell me. "Major and co. won't last forever. Once they are out of the way, our people will take over. The Party will be reborn." But will it? Never mind the body of ideas ready and waiting to slide onto the political agenda – look at the people whom we are expecting to give those ideas the necessary push. The present wet ascendancy within the Gov-

ernment may be a coalition of intellectual and spiritual dwarves; but it is difficult to find anyone of "our" people in the House of Commons who is not compromised in some way. The leading figures will always find it difficult to explain why they have sat in the Cabinet when policies they later disowned were adopted.

I could continue like this for page after page, weighing the leading figures on the Tory right. But it is enough to say that I

find them all wanting. We cannot look to them for deliverance. Bearing which in mind, the book that I am sort of reviewing is best regarded not as a programme for action, but as a beautiful dream – rather like the proposals for reform made in France at various times before 1789, that had every excellence, lacking only the smallest chance of being enacted.

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REVIEW OF CHRIS R. TAME'S *NON-SMOKERS UNITE!*

Walt Hare

FOREST, 2 Grosvenor Gardens. 11pp.

A short but closely argued paper devoted to the argument for anti-anti-smoking. In the Introduction Lord Harris points out that "the majority of anti-smokers are unwittingly lending support to ideological dinosaurs who are deliberately and systematically chipping away at the edifice of free, democratic society".

Chris Tame admits that in the heyday of smoking, smokers were often somewhat inconsiderate of non-smokers, but urges long-term non-smokers not to be motivated by delayed "revenge" on smokers. The situation is more serious because the anti-smoking campaign has all the hallmarks of the age-old techniques to undermine personal responsibility and impose totalitarian rules.

The author warns: "Today smoking. Tomorrow: alcohol, sticky buns, boxing, motor racing, rock climbing, loud music,

'unsafe sex', car ownership".

Now socialists and other collectivists have lost the economic battle they have changed to promoting junk science (p. 7). The prime example of this is the supposed effects of "passive smoking". This is obviously a desperate attempt to meet the libertarian argument of "I can do as I please with my own body and health" with "well it is not just you who might be seriously affected". Mr Tame refers to many FOREST papers that show that the so-called evidence for the adverse effects of passive smoking is bogus. A serious example of the misuse of science which needs to be widely exposed.

The author's basic and very important argument is that smoking is part of the large debate about freedom and individual responsibility. If the anti-smoking campaign is ultimately "successful" in achieving a ban on smoking in virtually all places of public access then it will surely become the model for even further intrusions on individual liberty.

REVIEW OF JOHN ALLEN PAULOS' *INNUMERACY: MATHEMATICAL ILLITERACY & ITS CONSEQUENCES*

Paul Anderton

Penguin Mathematics. 135pp

As is widely recognised, over a century of compulsory state education has not as yet resulted in universal enlightenment and civilisation. If anything standards of literacy have declined roughly in like with expenditure. The situation with respect to numeracy is even worse. Most people will regard any of their perceived literary limitations as something of an embarrassment, to be corrected if possible. But innumeracy is generally not regarded as such an impediment.

Unfortunately this casual attitude to numbers and their signifi-

cance can – and often does – extent to the supposedly highly educated and influential sectors of society. The author cites the airline executive who was quite unembarrassed when it was pointed out that his estimate of the numbers of passengers passing through the airline's security system was larger than the world's population! People who try to avoid split infinitives or hanging participles nevertheless confuse millions and billions.

These effects can be serious. Attention can be focused on minor events and effects and serious ones neglected. Completely impractical "solutions" to problems can be proposed and even

embarked upon when a simple "back of envelope" calculation by a numerate person could have saved a lot of trouble and expense.

This book is an interesting and illuminating corrective to these

serious shortcomings and can be read for much enlightenment, certainly by those of limited numeracy, and even by the numerically educated few who would like examples to use in educating their friends, children, or students.

REVIEW OF RICHARD HERRNSTEIN AND CHARLES MURRAY'S *THE BELL CURVE: INTELLIGENCE AND CLASS STRUCTURE IN AMERICAN LIFE*

Nicholas Albery

Free Press, a division of Shuster and Shuster, New York, 1994.

This 845-page blockbuster ends by concluding that a return to the neighbourhood is the single reform that offers the best hope of saving a society from the ravages of its underclass and of providing an opportunity for all to feel valued. The authors regret that in our increasingly meritocratic and efficiency-oriented societies, those with the least "cognitive ability" (which has to be distinguished from musical ability, kinaesthetic ability, personal skills, sensitivity, charm, persuasiveness, insight, sense of humour and other equally important factors that make up a rounded human being) are consigned to an underclass, living in the equivalent of urban ghettos and suffering disproportionately from unemployment, poverty and other handicaps.

Those with below-average cognitive ability suffer from multiple problems in our over-complicated and over-centralised mega-nations: they have 13 times more chance of falling below the poverty line than those with high IQ; as a group, their low IQ is three times more relevant than their home environment in determining their high-school drop-out rate; they are 13 times as likely as average-IQ people to be prevented from working due to health problems; their group's illegitimacy rate is 32 per cent as against an average for society as a whole of eight per cent (and their babies are more likely to have a lower birth weight); and those with low IQ are four times more likely to be sent to prison.

The authors argue for a society where people are treated as individuals rather than group members, but the chapters that have caused most clamour present the findings from the unvoiced academic consensus that IQ varies between ethnic groups. On average it would seem that Ashkenazi Jews of European origin tend to have higher IQ than Chinese people who tend to have higher IQ than Japanese people who tend to have higher IQ than whites who tend to have higher IQ than blacks. Thus the median IQ (from 11 studies) for blacks living in Africa was calculated as 75 (10 points below blacks in America).

The authors estimate that IQ is 40 to 80 per cent genetically inherited rather than environmentally determined, although they accept that around the world, IQ has been tending to go up by about one point a year.

In the concluding chapters of the book the authors turn to the social consequences of their findings: How should social policy deal with the twin realities that people differ in cognitive ability for reasons that are not their fault and that cognitive ability has such a powerful bearing on how well people do in modern life? They argue (and most convincingly) that the goal of politicians should be to help create a society in which all people, whatever their cognitive ability, feel that they have a valued place. You can tell how valued your place is by how many would miss you if you were gone, and how much. Their principal policy prescription is that a wide range of social functions should be restored to the neighbourhood when possible and otherwise to the municipality. For in a neighbourhood there are a myriad of ways to stitch people into the fabric of family and community. But governments have reduced neighbourhoods into mere localities and dormitories, not communities of people tending to their communal affairs. They have taken the social welfare system out of the hands of neighbours and voluntary organisations. They have stripped neighbourhoods of their traditional functions. For those with low cognitive ability, this is a disaster. For those with high IQ, although they can escape by moving or by forming intellectual friendships outside their neighbourhoods, or by finding friends even in cyberspace, it is also potentially a disaster, as the resulting alienation among the underclass will affect them too, leading as it will to an increasing crime problem or to increasingly illiberal methods of dealing with crime.

The complexity of modern societies can be reduced by returning power to the neighbourhood. It can also be reduced, the authors argue, by dismantling the complex rules and licences surrounding running businesses, which unfairly militate against those with low cognitive ability. The laws surrounding criminal behaviour should be simplified, so that no great sophistication is required to know right from wrong. Birth out of wedlock should be discouraged by giving the unmarried father no legal standing regarding the child, and by allowing the unmarried mother no legal basis for demanding that the father provide support for the child.

Those who work full time should not be too poor to have a decent standard of living, whatever their cognitive ability. The authors argue that the lowest earned incomes need augmenting. But they urge the ending of the extensive network of incentives and services for low-income (and often low-IQ) women to have babies. They also believe that "affirmative

action" in the workplace and in universities is leading only to an increasing underswell of racial tension and white resentment at losing jobs or college places to less qualified blacks. Affirmative action should be limited, they say, to its original declared goal of ensuring that those applicants who come with equal qualifications have an equal shot at being taken on, with a slight bias towards the candidate from an ethnic minority.

If their recommendations are not taken to heart by policy makers, the authors believe that there will be an increasing "secession of the successful", of the meritocracy, who will have their own schools, commercial court systems and secure estates guarded by their own security forces. Racism will re-emerge in a virulent form and a substantial proportion of the low-IQ population will be relegated to a high-tech version of Indian reservations.

This taboo-breaking book is deeply disturbing, and affronts many of my liberal assumptions. I would still instinctively prefer a society that accepted the theory of multiple intelligences, even at the cost of stretching the definition of intelligence to near-breaking point: for instance, Howard Gardner's theory is

that IQ is merely one type of intelligence. There are seven in all – linguistic, musical, logical-mathematical, spatial, bodily-kinesthetic, intrapersonal and interpersonal. Surely a sane society would value all seven. But this book has convinced me that IQ, whether we like it or not, happens to have a central role in determining everything from divorce rates (half as likely amongst high-IQ people) to children's behaviour problems. And that only a massive decentralisation of power to the neighbourhood can improve the quality of life for those with low IQ.

If I were prime minister, my most urgent priority task would be to reintroduce parish councils to urban areas, with real taxation and other powers and control over welfare payments and workfare-type schemes.

Note: The above review is reprinted from *Fourth World Review* (no. 67, 1995) – "For Small Nations, Small Communities & The Human Spirit" – 24 Abercorn Place, London NW8 9XP. We are grateful for the editors' permission to reprint, and to Nicholas Albery for his interesting review.

REVIEW OF MICHAEL DYNES & DAVID WALKER'S *THE TIMES GUIDE TO THE NEW BRITISH STATE*

Martin Ball

Now after 15 years of re-ordering of the British state the authors feel that it is necessary to pinpoint the altered shape of our governance. Inside are ample demonstrations of the state's extension into every area of our lives. There are chapters on: the core state; the inner ring state; the peripheral state; the new state; the European state; the regional state; and, for good measure, the miscellaneous state.

But like all encyclopaedias the book contains a large number of interesting gems of information, some funny and some plainly insulting to our intelligence, since we are the very people forced to forgo income to pay for the indulgence of political empire-builders. Take, for example, MI6's plan during WWII to degrade the fighting spirit of the Japanese by firing hollow shells behind their lines containing photographs of nude Home Office librarians. (Now there's some state papers we might want to research). Or the suspicion that "perhaps the [Heritage] Department was created in order to give a job to Prime Minister John Major's friend, David Mellor, for whom the arts brief alone would have been too small to justify a seat in the Cabinet".

Where the guide is particularly useful is in highlighting the important question of what now constitutes the state. Where are the lines of accountability? What is one to make of the hybrid creatures of government which dictate so much of our lives, being neither truly private-sector companies nor government agencies yet at arm's length from political control?

Reviews invariably conclude by claiming that the item under consideration is an essential read. In the case of *The Times*

Guide to THE NEW BRITISH STATE I only slightly exaggerate. What is important about this book is that it is a reference tool for political observers of all persuasion. Offering a "reminder of what government personnel do – who they are, where they are to be found, and telephoned".

Be warned, however, the expected expanded second edition will even further damage your wealth.

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