

was preventable. Had I looked to the right (or seen a red light), I would have stopped and allowed the car to pass. Much more importantly, a *serious* injury was prevented because the car was moving very slowly. The driver told me he began braking the moment he saw me turn my head in the wrong direction. As a result, his speed was probably less than 10 miles per hour.

Why was he going so slowly? Having been knocked senseless, I didn't have the wit to ask but I do recall it was raining, it was dusk, and he had a child in the front seat who was well secured in an excellent baby seat! (I even congratulated him for doing so.) It occurred to me that perhaps drivers wise enough to use car seats for their infants are also those who drive slowly when it is dusk and raining, as they are advised. But I wish I had asked him whether he was aware of, and responding to, Oxfordshire's

excellent campaign. Its message is 'Speed kills. Kill your speed' and its posters include the bold statement, 'If you can't stop in time, you're going too fast'. I could not agree more! It also reminds Britishers that the number of children who die after being hit by a car is directly related to its speed: at 20 mph — 20%; at 30 mph — 50%; and at 40 mph — 80%.

Hence, my final questions: How assiduously do police in Britain and elsewhere enforce speed limits? How severe are the penalties for speeding and other such infractions? And what pressure, if any, is exerted on police by health departments to enforce and punish offenders based on the logic that injuries are a preventable health problem like any other?

Logos are one thing; logic another. We need both.



Giving birth . . . and thanks

Launching a new journal is, I imagine, like having a baby. It involves a similar period of gestation, during which there is continuously mounting anxiety over the health of the offspring. This conception began with Mike Hayes of CAPT and Alex Williamson, responsible for the BMJ Specialist Journals. At the risk of mixing or stretching the metaphor, Mike deserves credit for planting the seed with Alex; she then sought and received Richard Smith's enthusiastic support and encouragement and that of the board. (I can't decide how to fit these actions into the metaphor.)

Then, even after what appears to be a healthy child is born, most good parents continue to worry about the future. Perhaps it is because we have so many worried parents — our entire, large, and diverse editorial board — this baby's future looks bright. Virtually each member of the board has performed at least one specific act to help

ensure that the contents of this issue are of acceptable, if not superior, calibre.

Apart from parents, however, others are involved in a successful childbirth, akin to the midwife or obstetrician. I want to acknowledge the efforts of the many others who assisted in delivering this somewhat postmature child: Sue Heels, who ensured that everyone appeared to be writing the Queen's English flawlessly; Julie Halfacre who enlisted subscribers beyond ourselves and our immediate families; Jane Rowlands at the BMA library who helped produce the citation list; and Ann Arnold, who kept our manuscript turnaround time at what I suspect may be a record low. Some of the credit is shared with the geniuses who invented modems and fax machines but most credit must go to the list of contributors willing to 'have a go' with a spanking new, promising, but untested journal. My warmest thanks to all.

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Editor