

Editorial

I write this editorial as the world contemplates the 70th anniversary of the dropping of the Hiroshima atom bomb. The last year has featured a number of emotional events to commemorate events related to military action. The one I personally attended was the event in January at Kendal Town Hall to commemorate the 70th anniversary of the liberation of Auschwitz. Perhaps the one that most captured the public imagination was the poppy exhibition at the Tower of London in which the Tower was surrounded by 888,246 ceramic poppies – each one representing a British military fatality during World War I.

I am very grateful to all the authors who have contributed to this edition. After Thomas Scotland's incredible lecture last October, I make no apology for the focus on World War One but the articles from Robin Jackson and Darren Myatt show how military medicine continues to evolve and how advances pioneered in military units continue to influence civilian hospital practice.

Historically, the battlefield has often been a place where surgical advances have been made. The classic example was

by Ambroise Paré in 1537. At this time battlefield amputation wounds were cauterised with boiling oil, but after running out of oil Paré had to choose an alternative. He chose to use a dressing soaked with a mixture of egg yolks, rose oil, and turpentine. The next morning, he was amazed to find the recipients of his new dressing were recovering well while those who suffered the cauterizing oil were "feverish" and afflicted with "great pain and swelling about the edges of their wounds". Seeing the dramatic difference between the traditional and his improvised treatment, Paré resolved to favour procedures that he had personally observed to be useful. Careful observation of wound healing continues to be relevant in modern surgical practice.

A translation of The Complete Works of Ambroise Paré is the oldest book in the Lancaster Medical Book Club collection and is currently displayed next to the entrance of the Education centre at RLI.

Bryan Rhodes
Guest Editor

News from the office

Ed Fearnley has qualified as a doctor and moved away. Alan Hale retired after 11 years at the helm. Shaun Drummond, who worked behind the scenes to produce the paper version recognisable as the MBMJ has moved on to other things. As editor I would like to thank these loyal colleagues for their support and insight over the last decade. It's been a lot of fun and it's been gratifying to receive good comments from all levels of the Trust, and from colleagues in the wider health community. The decade ends with a commitment from the Trust to continue the work.

The day to day management of the journal has now been taken over by the library service at UHMB. Alan's replacement is Janet Reed who is experienced proof reader and indexer as well as being a qualified librarian. She has joined the library staff UHMB as User Services Librarian. She has spent 10 years running her own proofreading and indexing business.

I am in the process of organising a replacement for my role as editor and in organising the editorial board. We need a student editor, so welcome enquiries!

At a time of change, of course, continuity is important too. Writers, contributors, people with ideas for a publication make journals happen. Keep sending your ideas and manuscripts please. Janet.reed@mbht.nhs.uk is the contact email for them.

Andrew Severn
Editor