

Caution prevailed when the great white sharks were involved because they were capable of crushing the diver and swimming off with the remains. It would be little comfort to have a good report on the suit of mail in such circumstances. They therefore made a dummy and dressed it in the mail. A "Great White" made aggressive attacks which the suit survived though any diver would have been killed.

It would appear that most sharks dislike the steel suit, possibly because of electrical fields, but the Great White shark is actively annoyed by such suits. Once again a remedy has failed to repulse all sharks. But as the most likely attackers are discouraged, some light survival gear which produced an electric field might be affective. Unfortunately the use of an orange colour to increase the sighting of survivors in the water tends to attract sharks also. It is noteworthy that, when not stirred into a feeding frenzy, sharks choose to avoid people giving "I'm well and active" signals.

Some explanation of the sharks' behaviour comes from the work of Dr Adranus Kalmijn at Woods Hole Oceanographic Institute. She has shown that the electroreceptors on the head of a dogfish can detect an electric field of less than five thousandths of a microvolt per centimetre. This sense enables detection of prey hidden beneath the sand. To creatures as sensitive as this, Rod, Valerie and Jeremiah must have seemed like Hi-Fi enthusiasts with their woofers and tweeters at full volume. Only the Great White really showed his feelings openly about such unwelcome visitors.

LETTERS TO THE EDITOR

The Editor,

It has been pointed out to me that part of my letter to Mr Denny, printed on page 28 of the July to September 1981 issue of the Journal could imply that medical benefits are payable for diving medicals.

This is not so. The relevant section of the Medical Benefits Schedule Book, Amendment dated 1 September, 1981, is Section 1, Part B, paragraph 27, which is headed "Health Screening". This debars "multiphasic health screening; programs for testing fitness to undertake physical training courses, sport, vocational activities; examination and diagnostic tests for driving, flying, and other licences, entrance to schools and other educational facilities, for travel requirements and for the purpose of legal proceedings;" from benefits.

I used the item numbers in the example to link the services with Government recommended fees.

Yours sincerely,
John Knight

THE 5PM GAME

David Elliott

You are on holiday in a peaceful fishing village on the Atlantic coast of Cornwall when a local doctor tells you that he has a radio message that there has been a serious diving accident on a sparsely inhabited island some miles away. He does not know the full details, but apparently there is one unconscious diver and no recompression chamber. There is a fishing boat ready to take you both to that island, but there is only a few minutes left before the falling tide will prevent its departure. It is not fine weather, so you may not be able to get the patient back to the local emergency room for about twelve hours. The local doctor drives you down to the harbour via his well-equipped dispensary. It is a six hour journey out and a six hour journey back, at the very best, so the chance of getting any support out there is pretty negligible. There is no radio communication available.

I want each one of you to write down, in order of priority, the first fifteen items you would want to take with you, as there may not be time to grab everything.

Here is a list of some twenty or so items which were almost all in the final lists of four groups of people associated with commercial diving, who did the same game a month ago. There was one item which I considered quite important that no group put forward and I will be very interested to see if you do the same. The items are not in order of importance. They have been very carefully randomised. An intravenous giving set, sterile pack, complete; A Doppler Bubble Detector, complete; A battery operated ECG Machine; A patella hammer and tuning fork; A sterile pack complete of miscellaneous catheters; Heparin for injection; Trocar and cannula; Heimlich valve pack, sterile, complete; US Navy diving manual; Four litres of normal saline and one of Dextran; Various airways, an Ambu bag or its equivalent; a lumbar puncture set, sterile, complete; An auroscope cum ophthalmoscope; Low reading mercury thermometer; Cortico-steroid for injection; A space blanket with respiratory heat exchanger; An anaeroid sphygmomanometer with stethoscope; Note paper and pencil; Assorted needles and syringes, sterile pack; An oxygen cylinder and regulator, complete; A portable suction unit; A laryngoscope, with endotracheal tube or an oesophageal obturator airway; Urine testing kit. The only other item on the list is analgesics, unspecified.

Now, believe it or not, that covers all the options of the previous four groups of doctors, all of whom had some experience in diving medicine. The surprising thing is the lack of medication in that list. You are perfectly free to add additional items of your own to that list if what you have put down is not included. It does not mean that you are wrong, you may well be right.

Now, in groups of five, pare the list down to what you all agree are the first ten things to take. I hope you will find that the various groups have got some measure of agreement.