ASSOCIATION NOTES

ACADEMY OF MEDICINE, SINGAPORE

The Second Malaysian Congress of Medicine is to be held some time in August 1965. Those wishing to attend and or participate are advised to communicate with Mr. R. C. K. Loh, Secretary of the 2nd Malaysian Congress of Medicine, General Hospital, Singapore.

R. C. K. LOH,
Secretary.

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ROYAL AUSTRALASIAN COLLEGE OF SURGEONS

The Victorian State Committee is arranging a Course of Instruction in Post-graduate Surgery to be held in Melbourne from the 27th July to 2nd October, 1964.

The course will be full-time. During the mornings, entrants will, with some restrictions, be able to attend and observe the work in the various clinical schools. Tuition will begin each week day at 2.00 p.m. and at 4.00 p.m. on each day there will be a session on Clinical Surgery. The Course has been so arranged to enable anyone who wishes to do so, to take off 12 weeks prior to the Final Examination for the F.R.A.C.S. in October, to prepare for this examination. In addition, the Clinical instruction is being conducted in the late afternoons, in order that Senior Resident Medical Officers may be able to attend this part of the Course.

The fees for the Course are —

(A)	Full time	20 gns.
(B)	Clinical only	10 gns.

Entries for the Course close on 13th July, 1964. Candidates when entering must forward a remittance for the fee, viz. 20 gns. or 10 gns. as the case may be. Candidates resident in New Zealand, or elsewhere, should remit by bank draft drawn on Melbourne in favour of The Royal Australasian College of Surgeons, and payable in Australian currency.

RORY WILLIS,
Honorary Secretary,
Victorian State Committee.

Spring St.,
MELBOURNE: C.1.

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THE NUTRITION SOCIETY

Forthcoming Meetings

Saturday, October 3, 1964

The Society is holding in London a symposium on "Availability of minerals in foods of plant origin".

Saturday, December 5, 1964

A meeting for the presentation of original communications will be held in London.

Titles of papers or demonstration, each with an abstract for circulation to members before the meeting not exceeding 400 words or the equivalent space in print, including tables, figures and references, should be sent to Dr. I. Macdonald, Department of Physiology, Guy's Hospital Medical School, London, S.E.I. by October 24, 1964.

An abstract must be prepared according to the directions to contributors published in the *Proceedings of the Nutrition Society.*

If a title only is received by the closing date, or if the abstract sent exceeds the space allowed, the communication or demonstration may be given, but only the title will be published in the Society's *Proceedings.*

OTHER MEETINGS

Oils and Fats Group, Society of Chemical Industry

Professor W. O. Lunberg, Director of the Hormel Institute, Minnesota and President of the American Oil Chemists' Society will deliver the first "Oils and Fats Group International Lecture" in London on Tuesday, September 29, 1964. The subject will be concerned with some nutritional aspects of fats. Further information may be obtained from the Hon. Secretary of the Oils and Fats Group, Dr. H. Jasperson, c/o J. Bibby & Sons Ltd., Research Department, King Edward Street, Liverpool, 3.

Symposium on the use of radioisotopes in animal nutrition and physiology

The symposium which is sponsored by the International Atomic Energy Agency (IAEA) and the Food and Agriculture Organization of the United Nations (FAO) will be held in Prague, Czechoslovak Socialist Republic, from November 23 to 27, 1964.

The topics to be covered are:

1. Physiology and biochemistry of milk secretion.
2. Metabolism and requirement of trace elements including magnesium.
3. The influence of environmental factors upon animal production and reproduction.

Scientists who wish to participate must be nominated by the competent official authority (National Atomic Energy Commission, Ministry of Foreign Affairs, National FAO Committee or Ministry of Agriculture). Participation forms can be obtained from the competent official authority (see above) or directly from the joint IAEA/FAO Symposium Secretariat, Kärntnerring 11, Vienna 1, Austria.

DATIN LADY THOMSON, M.R.C.S., L.R.C.P.
Hon. Overseas Correspondent in Malaya,
Institute for Medical Research,
Kuala Lumpur.

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THE WORLD MEDICAL ASSOCIATION DECLARATION OF HELSINKI

The following code of ethics in clinical research, to be known as the Declaration of Helsinki, was accepted at the meeting of the World Medical Association at Helsinki in June, 1964. This is the official English version, the original being in French.

It is the mission of the doctor to safeguard the health of the people. His knowledge and conscience are dedicated to the fulfilment of this mission.

The Declaration of Geneva of the World Medical Association binds the doctor with the words, "The health of my patient will be my first consideration;" and the International Code of Medical Ethics which declares that "Any act or advice which could weaken physical or mental resistance of a human being may be used only in his interest."

Because it is essential that the results of laboratory experiments be applied to human beings to further scientific knowledge and to help suffering humanity, the World Medical Association has prepared the following recommendations as a guide to each doctor in clinical research. It must be stressed that the standards as drafted are only a guide to physicians all over the world. Doctors are not relieved from criminal, civil, and ethical responsibilities under the laws of their own countries.

In the field of clinical research a fundamental distinction must be recognized between clinical research in which the aim is essentially therapeutic for a patient, and clinical research the essential object of which is purely scientific and without therapeutic value to the person subjected to the research.

I. BASIC PRINCIPLES

1. Clinical research must conform to the moral and scientific principles that justify medical research, and should be based on

laboratory and animal experiments or other scientifically established facts.

2. Clinical research should be conducted only by scientifically qualified persons and under the supervision of a qualified medical man.

3. Clinical research cannot legitimately be carried out unless the importance of the objective is in proportion to the inherent risk to the subject.

4. Every clinical research project should be preceded by careful assessment of inherent risks in comparison to foreseeable benefits to the subject or to others.

5. Special caution should be exercised by the doctor in performing clinical research in which the personality of the subject is liable to be altered by drugs or experimental procedure.

II. CLINICAL RESEARCH COMBINED WITH PROFESSIONAL CARE

1. In the treatment of the sick person the doctor must be free to use a new therapeutic measure if in his judgment it offers hope of saving life, re-establishing health, or alleviating suffering.

If at all possible, consistent with patient psychology, the doctor should obtain the patient's freely given consent after the patient has been given a full explanation. In case of legal incapacity consent should also be procured from the legal guardian; in case of physical incapacity the permission of the legal guardian replaces that of the patient.

2. The doctor can combine clinical research with professional care, the objective being the acquisition of new medical knowledge, only to the extent that clinical research is justified by its therapeutic value for the patient.

III. NON-THERAPEUTIC CLINICAL RESEARCH

1. In the purely scientific application of clinical research carried out on a human being it is the duty of the doctor to remain the protector of the life and health of that person on whom clinical research is being carried out.

2. The nature, the purpose, and the risk of clinical research must be explained to the subject by the doctor.

3(a). Clinical research on a human being cannot be undertaken without his free consent, after he has been fully informed; if he is legally incompetent the consent of the legal guardian should be procured.

3(b). The subject of clinical research should be in such a mental, physical, and legal state as to be able to exercise fully his power of choice.

3(c). Consent should as a rule be obtained in writing. However, the responsibility for clinical research always remains with the research worker; it never falls on the subject, even after consent is obtained.

4(a). The investigator must respect the right of each individual to safeguard his personal integrity, especially if the subject is in a dependent relationship to the investigator.

(4)b. At any time during the course of clinical research the subject or his guardian should be free to withdraw permission for research to be continued. The investigator or the investigating team should discontinue the research if in his or their judgment it may, if continued, be harmful to the individual.