

# THE GUARDIAN

Sir,—One might gather from press reactions to the majority Law Lords decision against Mrs Victoria Gillick, that the entire medical profession was overjoyed at the outcome. There are those of us, however, who view the implications with sadness and a feeling of foreboding.

The British Medical Association is pleased to see doctors' clinical freedom maintained, and has sold their position to the public on the basis that the only under-age girls who will be given contraception without informing their parents are those whose parents are too irresponsible to give their children proper care anyway.

From my experience of the consulting-room situation, I do not believe that many doctors will have the moral courage to limit prescribing to this exceptional group. Imagine the situation from a girl's point of view. She is under pressure from her boy friend, her friends, teen-agazines, TV programmes, the latest Madonna single and her own biology to have intercourse. Only her parents, with whom at the age of 14 she doesn't seem to have a lot in common, are prudish enough to say she should wait. She knows her "right" to clinical secrecy and has prepared a good story to spin the doctor in case he should be as reactionary as her parents.

Now see it from the doctor's point of view. He has no right in law to refuse contraception, and anyway is afraid that he'll be blamed when she comes for an abortion if she doesn't get it. Besides, the first rule of medicine is to try to send the patient away happy — why make a moral stand when she'll go to the family planning clinic anyway? Isn't it better to keep her trust in case she gets into real trouble later? Anyway, it isn't his



daughter, and he's half an hour late. So what will happen is that an increasing number of youngsters will have an increasing number of sexual encounters at an increasingly low age.

Apart from the effects of contraceptive failure — illegitimate births are 80,000 per year and rising, abortions 140,000 per year and rising — and the moral implications (we are assisting children to commit fornication, and to lie to their parents) — I am terrified by the vastly increasing pool for sexually transmitted diseases.

It is not the promiscuous only who are at risk — if an average person has only three sexual partners before marriage, not an overestimate for someone who starts at 15, there are nine chances that one of those contacts will have slept with a disease-carrier, 27 chances that one of these partners will and so on.

No wonder gonorrhoea is now more common than measles (and penicillin resistant as well); that NSU has doubled in 10 years and is the commonest cause of infertility; that genital herpes ruins the lives of thousands for years; that cervical cancer, spread by the humble wart-virus, is appearing in younger people and developing more rapidly (whilst smear facilities are stretched to

capacity); and that Aids, already appearing in the heterosexual population, threatens an epidemic which even scares the profession.

It's a free world, but I have yet to meet a girl coming for contraception who was even vaguely aware of these risks. I have, however, had to explain to some of them later why they are unlikely to be able to have children.

The issues are too important to be decided by a three to two verdict of legal experts. At risk is the future fertility, health and morality of our country. I for one have no wish to be part of the apparatus that brings such things about—Yours, **Jon Garvey, MA MB, Essex.**