CORRESPONDENCE

MEDICINE AND THE MEDIA – MISREPRESENTATION OF INTERVIEW

This letter was written by Dr. Dan Tunstall-Pedoe to the Editor of the British Medical Journal, relating to reports on the B.A.S.M.'s symposium, 'R Exercise, – a Prescription for Health?', and is reprinted with the Editor's kind permission. It was published on the 29th July, 1978.

To the Editor, British Medical Journal,

Sir, – In your new feature 'Medicine and the Media' (8th July, p. 121) you mention my contribution to what you considered a muddled feature on the hazards of jogging in *Tonight* (BBC 1, 28 June). Perhaps the inside story may be of help to some of your readers as an example of what happens to the naïve clinician when faced with the media. I am tending now very strongly to the view that the producer approaches the subject with a pre-set idea and then selects little bits of what the experts say that fit in with his own view. Certainly the treatment of the topic and the selective editing involved in my interview, in which only part of an answer to a question was incorporated without the question itself being posed, lead me to this view of television journalism.

My contact with the media started as a result of a paper I gave during the course of a meeting organised by the British Association of Sport and Medicine on 'Exercise – a Prescription for Health?' I had given a paper on sudden death associated with exercise and this paper was picked up in a headline in *The Times* as 'Exercise no guarantee of avoiding heart attack'. This short article, which dramatised my contribution to the symposium and gave far less space to the benefits of exercise, was probably what gave the TV producers my name.

I was first approached by *ITN News* and thoroughly enjoyed a four-minute interview with Peter Sissons, which was spontaneous, unscripted, and unedited. The questions on the benefits and dangers of jogging, the longevity of athletes, etc, gave me an ample opportunity to give what I felt was a balanced view of the subject and I stressed that jogging was only dangerous for those with heart disease. I was able to get some health education propaganda over on the dangers of smoking and sitting watching too much television.

I was subsequently approached by the *Tonight* team, who were producing a programme on what they claimed was 'The risks and rewards of jogging'. My eight-minute interview, which was squeezed in rather hurriedly at my home in the middle of the day, was cut to 40 seconds. Since I tape-recorded this interview I have been able to analyse what the editor preferred to leave out as not supporting his case that jogging was dangerous and what he put in, which was my rather badly worded answer to a question that was never posed on screen. The programme itself consisted of the apposition of Health Education Council advertisements for exercise and an interview with Mr Mackie of the HEC with, on the other side, a non-medically qualified exercise physiologist advocating commercial progressive exercise testing for virtually everybody considering any form of exercise because, in his view, unsupervised exercise was dangerous.

After discussing mass jog-ins the question was asked to the viewer, 'Could some of these people be killing themselves by taking part?' I was then shown saying, 'While you are actually exercising your chances of having a heart attack are increased five times'. At no time during the programme, which lasted about eight minutes, was it stated that people with normal hearts ran no risk of having a heart attack or suffering collapse as a result of jogging, despite the fact that I had made the point on five separate occasions during the course of my eight-minute interview. To quote my answers incorporating this point:

'If you have a large number of people jogging there is a risk of heart attacks being precipitated in those who already had coronary artery disease. Now this is a small risk . . .'

'For the vast majority of people who have a very low risk of coronary artery disease I am all for them taking as much exercise as they can . . .'

'It is dangerous in the small group who have coronary artery disease . . .'

'The evidence is that somebody who has a normal heart cannot damage themselves with exercise . . .'

'World wide there is a very small but definite incidence of sudden death among athletes who at post mortem are found to have fairly minor abnormalities of the heart, but I do not want to exaggerate this because the chances of them being struck by lightning are about the same . . .'

Having talked on the subject of danger to people with heart disease for most of the time, I talked on the subject of dangers to people with heart disease for most of the time while people are at the moment taking exercise? My answer was, 'There are some statistics, and these statistics are very difficult to get, that suggest that while you are actually exercising your chances of having a heart attack are increased by about five times over what would have happened if you spent the same amount of time sitting quietly.' I then mentioned the increased risk of taking hot showers immediately after exercise. Never for one moment did I think that this answer would be presented out of the blue as though it applied to everyone going for a run on their local common. The way the programme was presented suggests either extremely poor editing by an unintelligent layman or a desire to produce dramatic television with little respect for the truth or for the equanimity of the viewer.

As you mentioned, the *Sunday Times* (2nd July) enabled me to point out that my comments about the risks of a heart attack applied only to people with heart disease, and the journalist concerned, having spoken to me on the telephone, had the courtesy to telephone me and check his copy with me before it was printed.

If television continues to treat medical interviews in the way that I was treated I think our only defence is either to insist on appearing on a programme live or to insist, as you suggest, that programmes should have some sort of informed monitoring before they are shown.

Dan Tunstall-Pedoe

CORRESPONDENCE

NOISE INDUCED DEAFNESS

To the Editor

31st July, 1978

Dear Sir,

I was interested to read in the Book Review by D. E. Mackay the comments about noise induced deafness in motor sport. In 1976 prior to the notification of noise restrictions by the F.I.M. (Federation Internationale Motorcycliste) I conducted a small survey at Oulton Park during a motor cycle race meeting. I found that the levels varied with the solo 2 stroke motor cycles from 110 dBA to an extreme of 128 dBA. Needless to say with the latter there was considerable physical distress suffered by anyone in the vicinity. During the mass start, levels of almost 130 dBA were recorded. It was my opinion that at this time total noise exposure to people standing close to the track was sufficient to cause auditory damage but the sound levels dropped considerably when moving away from the track side.

Over the last two years the maximum permitted sound of solo motor cycles has been reduced to 115 dBA measured at a standard distance from the exhaust pipe. This has resulted in far more tolerable sound levels at race meetings and several people have dispensed with ear protection. These levels will be further reduced to 110 dBA next year.

I am still however concerned that mechanics working on racing machines without silencers may sustain appreciable damage to the hearing and I intend to survey these people in the near future, together with some riders and trackside marshals.

Yours sincerely,

S. BENTLEY

Chief Medical Officer Auto Cycle Union (Cheshire).