

PhDs and the ESRC

SIR—Good graduate students publish—and the earlier they do so the better for science and themselves. Yet one public body in Britain, the Economic and Social Research Council (ESRC) has a policy which in effect prevents this.

The ESRC will not fund postgraduate studentships for academic departments where 60 per cent of PhDs are not completed within three years. (A year's grace is allowed for examiners to read the thesis and to arrange to meet.) The threat of blacklisting puts departments under strong pressure to discourage graduate students from publishing lest this delay them in finishing their theses.

In its evaluation, ESRC take account of all PhDs done in a department, so that its policy affects students who are self-financed or supported by other research councils. The policy is justified on grounds of increasing "productivity" of postgraduate education, but there is no evidence that its policy will increase the production of better scientists. Indeed, in its search for an administratively recognizable measure of the efficient use of resources, ESRC's policy may have the opposite effect. Creative scientists will be penalized in two ways. First, activities unrelated to PhD work, however important to later work, will tend now to be seen negatively.

Second, individuals showing traits of individuality and nonconformity at their interviews may be judged unlikely to complete in three years and so be denied admission.

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Peer review

SIR—Heartened by the recent comments on the role of journals in science (*Nature* 339, 657; 1989) and on anonymous peer review (*Nature* 340, 424; 1989) I would like to add the following points. They are not intended to be generalizations without exception; rather their validity depends on individual manuscripts.

The editor should check that the comments of the reviewers are based on a thorough examination of the manuscript. This is reasonable because the decision to publish rests solely with the editor and presumably is based largely on the reviewers' comments. Furthermore, the authors of the submitted manuscript should be informed of the reasoning behind the editor's decision, including which of the reviewers' comments were agreed or disagreed with and the relative importance given to these assessments. This will enable the authors of the manuscript to judge whether the editor's decision to

accept or reject has been based on an acceptable level of knowledge of the results and understanding of the interpretations.

Should there be any statements in a manuscript supported by 'data not shown'? Would it not be better for the excess data to be placed in an appendix which is subject to review and, after publication, available on request?

Although reviewers have a selfless, charitable and onerous task, they receive in return knowledge of results, techniques and concepts well in advance of others. To a reviewer who is a competitor of the manuscript's authors, this can be a very big advantage over the other, less privileged, competitors. This is particularly true for reviewers who are in charge or part of large groups.

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SIR—One step towards a solution of the problem of peer reviews is for referees to volunteer their identities to authors. Surely any referees who feel they are being fair-minded and objective have nothing to fear from such a disclosure?

Another step might be for manuscripts to be sent to a first referee for comment, then for the first referee's remarks as well as the manuscript to be sent to a second referee. In this way, the second referee would make a judgement not only of the manuscript but also of the first referee's comments.

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AIDS in Bulgaria

SIR—A recent article in *Nature* discussed the necessity of Bulgaria's mandatory programme for identifying people seropositive for the human immunodeficiency virus (HIV)¹. So far, more than two million people have been tested in Bulgaria, including so-called 'high-risk' groups (homosexuals, prostitutes, citizens who have spent time abroad and foreigners, including students who are long-term residents), as well as members of the general population aged 16–65 years.

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To determine previous exposure to HIV, individuals are screened with an enzyme immunoassay (EIA), and reactive samples are confirmed by the Western blot (immunoblot) procedure. Confirmed positive results usually indicate the presence of virus in the body. On the other hand, negative results by EIA do not necessarily indicate the absence of HIV-1 infection, as virus can be isolated and proviral sequences detected in infected individuals who remain seronegative for prolonged periods^{2,3}. By 7 July 1989, 77 Bulgarian citizens and 72 foreigners, 59 of whom were students, chiefly from Africa, were reported to be seropositive for anti-HIV by EIA (data supplied by Ministry of Health, Sofia). The seropositive students were sent home. Of the 77 EIA-positive samples from Bulgarian nationals, 53 were classified as indeterminate by Western blot⁴. Current experience indicates that virus will not be recovered from these people. So far in Bulgaria, only three people have been reported to the World Health Organization as definite AIDS cases⁵.

Mandatory serological testing is not unique to Bulgaria. For example, in Illinois, where mandatory premarital testing of 70,846 applicants for marriage licences was enforced, eight seropositives were obtained at a cost of \$312,000 per identified individual⁶. The screening data from Bulgaria, revealing 1.2 confirmed seropositives per 100,000 Bulgarian nationals, indicate that HIV is confined chiefly to certain high-risk groups. It is noteworthy that the three specimens positive for virus were from members of such groups. The overall results are most encouraging from a public health point of view and suggest that there should be a reevaluation of the mandatory programme. In arriving at a decision, financial considerations must be weighed against possible benefits.

It would be desirable, particularly for countries such as Bulgaria where the HIV epidemic is at a very early stage, to have international reference laboratories to turn to in order to verify the presence of HIV-1 by isolation or by determination of proviral sequences.

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