

reason why present theories should be frozen indefinitely—it is imperative that these changes should also be argued in public. It may be anomalous that the head of a disarmament agency should be involved in the public justification of a new defence policy but that will have to be Dr Ikle's function. And, of course, it would be unreasonable to expect that any changes there may be could become apparent in the near future.

AID on the Increase

THE report of the panel on the use and practice of Artificial Insemination by Donor* which was set up by the British Medical Association's Board of Science in 1969 is to be welcomed. It is now thirteen years since Lord Feversham and his committee brought in their report on AID and a great deal has happened in both the legal and medical fields since then. It is also clear that the atmosphere in which the Feversham inquiry was undertaken has now changed and Sir John Peel and his colleagues in contrast to Lord Feversham were under no pressure to recommend that AID be banned. As it turned out Lord Feversham and colleagues recommended that AID should be discouraged but they did not take the further step of recommending that it be declared criminal or prohibited by law.

The wheel has now turned full circle and the basis of Sir John Peel's recommendations is that AID should be allowed and that it should be provided free under the National Health Service. Perhaps this is bowing to the inevitable, for although Lord Feversham was able to say categorically in 1960 that AID was not carried out in National Health hospitals, the same cannot be said today. Seven members of Lord Feversham's committee recommended that there should be no change in the laws of legitimacy to accommodate the birth of a child conceived by artificial insemination thus making the child illegitimate. But now, quite properly, Sir John Peel's panel comes out strongly in favour of changing the laws relating to legitimacy so that such a child would be legitimate. In so doing the panel gives support to the two dissenting members of Lord Feversham's committee, who although not wishing to encourage AID felt that the child should not have to bear the stigma of illegitimacy. But what is the demand for AID? Some 1,400 marriages a year are childless because of the husband's infertility, according to Sir John Peel's panel, but other estimates put this number as high as 4,000 marriages a year. Very few of these couples now have children by AID but as fewer children are now available for adoption, the case for AID becomes stronger. There is also a smaller, but even more necessary, demand for AID in cases where it would be inadvisable for a husband to father a child when for example the husband suffers from a particularly debilitating disease which might be passed on to his offspring.

The state has now been reached where careful consideration must be given to the conditions in which sperm is obtained from donors for insemination. Little attention has been given in the past to test the donor for the presence of genetic or other diseases and personal acquaintance with the donor has been taken as enough evidence of the donor's suitability to donate sperm.

*British Medical Journal Supplement, April 7, 1973.

But with the practice of AID on the increase it must be asked whether this affords enough protection for the mother. It is accepted practice in the United States to pay sperm donors and the practice has recently been reported in Britain. But does the payment of donors throw a new light on the practice of AID? It is well known in the United States that the quality of blood obtained for transfusion depends on whether or not the donor was paid. Could the same happen to the quality of sperm if the practice of AID becomes much more widespread? The practitioners of AID are the first to stress the advantages of the technique over adoption. They point out that in contrast to adoption the mother does carry the child for nine months and a normal mother-foetus relationship develops. But whether AID is provided under the National Health Service or not there is a patent need to clarify the legal situation surrounding children born as a result of artificial insemination by donor. The child so born is illegitimate and the husband who hides the fact by appending his own name as the father in the registry of births is in strict law committing perjury. Surprisingly though it may seem the legal situation of the donor is far from clear—does he have the same responsibility in law as the father of an illegitimate child and also can the child lay claim to the estate of the donor? Whether or not AID is provided under the National Health Service in Britain it must be accepted that the technique is proven and will continue to increase in popularity. But the legal anomalies surrounding AID must be removed as soon as possible.

100 Years Ago



AN Icelandic gentleman sends to the *Scotsman* an account of the eruption of the Skaptar Jokull in Iceland, which took place in January last. On January 9, about three o'clock A.M., there was observed from Reykjavik a great fire in the E.N.E. The fire shot up like lightning, displaying beautiful evolutions in combination with the electricity above. So bright was it, that during the dark morning hours it was thought it must be very close to Reykjavik. But when daylight dawned, and the mountains could be discerned, a thick and heavy column of vapour or steam was observed far in the background, beyond all the mountains, so that it was clear that it was far off, and, according to the direction, it seemed most likely to be in Skaptar Jokull, the west part of Vatna Jokull—the great waste of glaciers in the east and south of the island. Morning and night this grand display was visible during the 9th, 10th, 11th, and 12th, and during the day the column of steam and smoke stood high in the sky. All agreed that the eruption must be in Skaptar Jokull, and from various observations it was concluded that the position of the crater ought to be between $67^{\circ} 7'$ and $67^{\circ} 18'$ deg. north lat., and $30^{\circ} 45'$ and $30^{\circ} 55'$ west long. from the meridian of Copenhagen. In the east, near Berufjord, some shocks were felt, and fire was seen from many farms. Ashes, too, had fallen over the north-east coast so abundantly that pasture fields were covered, and the farmers had to take their sheep into the huts and feed them.

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