

needles around the practice than to resheath them. Dental anaesthetic needles should be resheathed and compliance with the directive is maintained.

R. Joesbury
By email

1. Council Directive 2010/32/EU. Implementing the Framework Agreement on prevention from sharp injuries in the hospital and healthcare sector concluded by HOSPEEM and EPSU. 10 May 2010. Accessed at: <http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2010:134:0066:0072:EN:PDF>

Editor-in-Chief's note: The BDA has been in discussion with the Department of Health on this issue. The Department have said that they have secured an exemption to this for UK dentists (to allow use of the single handed scoop technique). The agreed form of words is awaited.

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PROTO-MEDICINE

Sir, in his letter *Personal diatribe* (*BDJ* 2011; 210: 291-292) S. Farrer chastises the *BDJ* for allowing an article with a claimed lack of scientific content, but then goes on to state that 'Homeopathic medicines are a valuable tool in the practitioner tool kit', a statement quite devoid of any objective scientific merit.

In citing Linde in the *Journal of Alternative and Complementary Medicine*, Farrer shows familiarity with Linde's work. He also expresses awareness of the importance of impact factor. Why, then, did he not cite the much more significant work by the same author, in a much higher impact factor journal: the *Journal of Clinical Epidemiology*.¹ This concludes that the better a study is conducted, the less likely it is to support the efficacy of homeopathy. This is one of four meta-analyses in high impact factor journals to reach the same conclusion, the others being published in *The Lancet*, *British Medical Journal*, and *European Journal of Clinical Pharmacology*.²⁻⁴

The House of Commons Science and Technology Committee's Evidence Check 2: Homeopathy, you may recall, recommended that the NHS stop funding homeopathy absent of credible evidence of efficacy.⁵

Scientifically the consensus is that homeopathy is fundamentally implausible, based on axioms which are not empirically valid for the assumed general case and founded on a 200-year-old

reaction to the system of 'heroic medicine' which thankfully died out in the nineteenth and twentieth centuries. Homeopathy is just one of many fields of what might be termed proto-medicine. In the Western mainstream these have been replaced by the painful birth and steady flowering of evidence-based medicine: medicine based on experiments which are both robustly verifiable and consistent with other branches of knowledge.

Any homeopath who can objectively prove the merit of the field stands to become very rich thanks to rewards totalling over a million dollars offered by Simon Singh and James Randi among others.^{6,7} In the meantime the *BDJ* can probably safely leave questionable assertions such as 'a valuable tool in the practitioner tool kit' to the very much lower impact factor journals which specialise in alternatives-to-medicine.

G. Chapman
By email

1. Kleijnen J, Knipschild P, Ter Riet G. Clinical trials of homeopathy. *BMJ* 1991; **302**: 316-323.
2. Linde K, Clausius N, Ramirez G *et al*. Are the clinical effects of homeopathy placebo effects? A meta-analysis of placebo-controlled trials. *Lancet* 1997; **350**: 834-843.
3. Linde K, Scholz M, Ramirez G, Clausius N, Melchart D, Jonas W B. Impact of study quality on outcome in placebo-controlled trials of homeopathy. *J Clin Epidemiol* 1999; **52**: 631-636.
4. Cucherat M, Haugh M C, Gooch M, Boissel J P. Evidence of clinical efficacy of homeopathy. A meta-analysis of clinical trials. HMRAG. Homeopathic Medicines Research Advisory Group. *Eur J Clin Pharmacol* 2000; **56**: 27-33.
5. House of Commons Science and Technology Committee, Evidence Check 2: Homeopathy, HC 45, Fourth Report of Session 2009-10.
6. Ernst E, Singh S. *Trick or treatment: the undeniable facts about alternative medicine*. W. W. Norton & Company, 2008.
7. James Randi's Challenge to Homeopathy Manufacturers and Retailers Pharmacies. 5 February 2011. Available at: <http://www.randi.org/site/index.php/jref-news/1208-feb5video.html>

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WATERSHED CASE

Sir, I refer to the article on forensic odontology (*BDJ* 2011; 210: 363-368) and in particular the observations in the case of H. M. Advocate *versus* Gordon Hay. The authors state that this was the first person in the UK to be convicted of murder by forensic dentistry, but whilst the bite mark upon which the evidence was based was undoubtedly pivotal in ensuring a conviction, there are two points which may merit some comment.

Firstly it must be questioned whether the bite mark evidence on its own would

have been sufficient to convict. In this respect the bite on Linda Peacock's breast proved only that Gordon Hay was responsible, not that he actually murdered her. In itself therefore the bite mark was circumstantial and for conviction to occur it had to be accompanied by other supporting and linked facts which were duly presented by the prosecution. It was this link, rather like the strands of a rope, which was so carefully explained to the jury by Lord Grant the Presiding Judge, prior to their retiring to consider their verdict and allowed them to convict. It would appear this would likely be the case in many cases where bite marks are presented in evidence.

Secondly as far as the admissibility of the bite mark in evidence was concerned, the reason for the Defence challenging this was not related to the scientific nature of the bite mark evidence (the positive features of which they may have been well aware) which their experts opposed (albeit unsuccessfully) in court, but rather the procedural aspect in meeting the required legal standards in the methods used by the police in obtaining evidence. This was related as to whether the police had exceeded their remit in obtaining impressions of the accused before he was formally arrested or charged, which was held not to be normal procedure. However, after appropriate legal submissions Lord Grant, the Presiding Judge, ruled in favour of the prosecution. His ruling was vindicated later on appeal by the unanimous decision of Lord Clyde and his colleagues who dismissed the appeal and ruled that the warrant for recording impressions prior to arrest was quite legal.

Nevertheless subject to these caveats this case was undoubtedly a watershed in detection, in that it established forensic odontology as a recognised and respectable scientific procedure in the fight against crime and provided a platform for future developments.

W. R. E. Laird, Knowle

Further reading

1. Harvey W, Butler O, Furness J, Laird R. The Biggar murder. Dental, medical, police and legal aspects of a case in some ways unique, difficult and puzzling. *J Forensic Sci Soc* 1968; **8**: 157-219.
2. Laird R. The Biggar murder. Some personal recollections. *Dental History Magazine* 2010; **8**: 15.

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