

# THE LANCET

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## EDITORIAL

### Medicine's lottery losers: it could be you

Bookmakers and medical charities make unlikely bedfellows. But events in the UK of late have led these two groups to voice the same complaint. Both are dismayed at their loss of income in the face of stiff competition from the nine-month-old national lottery. Whilst betting shops stood no chance of recouping their losses through grants from the lottery coffers, medical charities might reasonably have expected to be high on the list of "good causes" that benefit. Instead a double blow has been dealt to these charities; for the moment, at least, health care and research are not eligible for lottery funds.

By this omission, the UK enterprise is out of step with other established national lotteries such as those of Ireland, Italy, Spain, and the United States. For example, in Ireland, health and welfare projects receive a quarter of lottery funds. Of the IR£36 million allocated last year, more than half was granted to organisations in the health area; nearly one-third targeted hospital building programmes; and the remainder was divided between social welfare bodies, the Irish Red Cross, and social housing programmes.

In the UK, half the lottery spoils go to ticket holders and a quarter to the government and the organising company. The remaining quarter is divided between the National Charities Board, the Millennium Board, the Sports Council, the Arts Council, and the National Heritage Memorial Fund. The first round of applications to the Charities Board, which is responsible for dispensing over UK£150 million annually, ended last week. Grants will be made to projects that target "disadvantaged groups" and "poverty", which are both deserving recipients. Nevertheless, if the shift of resources away from charities that fund about one-third of all medical research in the UK is maintained, the consequences will be disastrous. Competition from the lottery has already brought to a close one cancer charity's fund-raising scheme. Overall donations to all charities are expected to fall by about £200 million a year, with medical research suffering between £10 million and

£14 million of the shortfall. We find it perplexing that a government would be prepared to oversee the destabilisation of a valuable source of medical science funding that predates both the National Health Service and the Medical Research Council. Some might suggest that long-term deprivation of charitable support would force more researchers to acquiesce to the demands of commercial sponsors—a sad result but one not at odds with current government thinking.

If elected governments must resort to spinning a wheel of chance to finance areas of need, then medical research should be made a priority. If this cannot be achieved through discussion, the British Medical Association is prepared to challenge in court the procedures that dictate the Charities Board's selection of suitable causes for support. Such a move would only add to the negative publicity surrounding the distribution of lottery funds. The new minister in charge of the lottery, Virginia Bottomley, who has recently suffered three bruising years as Health Secretary, knows that provoking the ire of medical institutions is a big gamble in the public relations stakes.

Perhaps there will be a change of heart. A sign that all is not lost was given by Viscount Astor, parliamentary Under Secretary for the Department of National Heritage, when he stated that the Charities Board would "certainly address applications from medical charities for the second and third rounds". Furthermore, the Charities Board has stated: "We hope to invite further applications in Autumn, 1995, and the details will be publicised widely nearer the time. The Board will regularly review its priorities. We expect the full results of the consultation exercise, and other feedback from charitable and voluntary sectors, to influence future priorities". The door seems to be unlocked; perhaps only a little pressure is required.

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