grant, has produced a series of seminal documents on the health impact of various policies pursued by the World Bank, the International Monetary Fund, and the World Trade Organisation. Medact continues to lobby these organisations, as well as key figures in the European Commission and the UK government on a range of economic, trade and, health policy issues.

Our track record over the past 50 years shows that we have consistently identified new threats to global health before they have become widely apparent, and been in the forefront of alerting colleagues, decision makers, and the general public to such threats. This we have done through the very considerable efforts of a dedicated office staff, and many activists who give both their time and money to the organisation

With my optimism of the spirit, I dream of a day when our work will no longer be necessary, but with my pessimism of the intellect recognise that I and many of our present members will be dead long before this happens. Medact's work is unfortunately still vital. Even now there are new global health threats emerging, such as those posed by persistent organic pollutants.

We must continue with our policy making, educating ourselves as well as other health professionals and the general population, and step up the pressure on decision makers to resolve the problems we have identified. Numbers matter, and we need as many colleagues as possible to help in our work, and invite all health professional to join us.

When I feel daunted I remember Anita Roddick's aphorism, "If you think you are too small to make an impact try going to bed with a mosquito."

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THE JECH GALLERY.....

Traditional healers, still part of the community health systems in the Andes

raditional medicine in the Andes moves us automatically to the figure of traditional healers, and, in some cases, automatically to censure their work. Albeit they have been present in the community health system for many years, they do not seem to fit into the modern model of medicine and health care. Nevertheless, they retain years of knowledge about the use of local medicinal plants. The knowledge differs between traditional healers from different places; accordingly, for example, to the proliferation of flora at certain altitudes. Most of them act as "hidden agents" and only become "visible" when peasants with specific "problems for the traditional healer" need them. We intended—through a respectful approach that recognises the value of their experience—to demonstrate their resources commonly used for certain conditions, to share between them their knowledge, and to teach young people. The picture shows a traditional healer (man, standing on the left) from Ccatupata community during a community exhibition and exchange of medicinal plants.

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