

Depression, Anxiety and Neurosis Group has 11 500 controlled trials in its registry, and the Drugs and Alcohol Group has 3314. Anaf would agree with us here (on the basis of his assertions about the quality of the particular evidence he alludes to).

On the narrower issue of the evidence base for long-term intensive psychiatric treatment, Anaf implies that this was ignored or distorted by the then Health Minister in deciding to amend the Medicare Benefits Schedule. We agree that EBM (and sound research) can be politically misused (as can any product of science), but that is no basis for rejecting EBM. Political misuse is a political mischief, not a failing in the particular instrument being misused. EBM itself is frequently blamed for all sorts of problems in health service, whereas, to use Anaf's example, the relative quality of the evidence for short or long term psychiatric treatment is a contingent matter for development and deliberation within and outside the psychiatric research community.

1. Leeder SR, Rychetnik L. Ethics and evidence-based medicine. *Med J Aust* 2001; 175: 161-164. □

Aboriginal language interpreting service

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TO THE EDITOR: I wish to commend the Journal for publishing the article by Cunningham¹ and the analysis of her findings in the accompanying editorial.² Both articles stress the need for improved communication between Indigenous patients and hospital staff.

The Kimberley Interpreting Service provides accredited Aboriginal language interpreters for six Kimberley languages, and is involved in training other interpreter candidates. We have been operating since November 2000 and are currently looking for funding to continue offering our service into the future.

To date, we have been working primarily in the legal sector and are quite perplexed as to why we do not receive bookings from the health services.

In 2002, the Kimberley Interpreting Service is targeting the health sector through a number of strategies, including the production of a promotional poster for use in hospitals and clinics, articles in medical publications, and face-to-face meetings with health professionals.

I encourage your readers to find out more about our service and to pass the message on to colleagues. We can be contacted at kis@wn.com.au, or please visit our website at www.wn.com.au/mirima

Acknowledgement: Kimberley Interpreting Service is an initiative of Mirima Dawang Woorlab-gerring, Language and Culture Centre and Kimberley Language Resource Centre.

1. Cunningham J. Diagnostic and therapeutic procedures among Australian hospital patients identified as Indigenous. *Med J Aust* 2002; 176: 58-62.
2. Fisher DA, Weeramanthri TS. Hospital care for Aboriginals and Torres Strait Islanders: appropriateness and decision making [editorial]. *Med J Aust* 2002; 176: 49-50. □



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