

*Conclusions.*

1. Analbuminuric oedema of the type described is most common in debilitated females.
2. It is generally associated with, and is probably due to, an underlying acidosis, with consequent increase in the water content of the body as a whole.
3. In many cases the symptom can be abolished by the giving of alkalis by the mouth in amounts sufficient to overcome the acidosis and promote diuresis.
4. The results of treatment confirm the thesis presented as to the pathogenesis of the disorder.

In conclusion, I should like to thank the many colleagues and friends who have helped me with the investigation of these cases, especially Dr. H. G. Close. I am indebted also to the physicians at Queen Mary's and Guy's Hospitals for sending me cases for investigation and treatment, especially to Dr. A. F. Hurst and Dr. H. French for access to Cases vi and vii respectively, and to Dr. J. A. Ryle for Case ii. My thanks are also due to Professor R. Donaldson and Dr. Arthur Davies, directors of the pathological laboratories of Guy's Hospital and Queen Mary's Hospital respectively; and, finally, to the Medical Research Council, for a grant enabling this work, which forms part of a larger investigation, to be carried out.

## REFERENCES.

- <sup>1</sup> Weber, F. Parkes: *Proc. Roy. Soc. Med.*, 1929, xxii, 1228.
- <sup>2</sup> Osman, A. A., and Close, H. G. (in the press).
- <sup>3</sup> Osman, A. A.: *Guy's Hosp. Reports*, lxxvii, 386, 1927.
- <sup>4</sup> Van Slyke, D. D., Stillman, E., and Cullen, G. E.: *Journ. Biol. Chem.*, xxxviii, 167, 1919.

**Memoranda:****MEDICAL, SURGICAL, OBSTETRICAL.****AFTER-HISTORY OF CASE OF GALL-STONES IN A YOUNG SUBJECT.**

I. C., aged 24, was operated on at the age of 15 years for gall-stones, in May, 1920, by cholecystotomy (vide *British Medical Journal*, 1925, vol. i, p. 1126).

Following the operation she remained well till a year or two ago, when she began to experience spasmodic pain in the right hypochondrium. On August 13th, 1929, the scar became swollen and tender, and one week later the swelling burst, giving vent to green discharge containing numerous small stones. The pain subsided, but discharge of stones continued, sometimes as many as twenty at a time. She was readmitted to hospital on August 27th with a biliary fistula in the old operation scar, and with stones in the discharge.

Paramedian laparotomy showed gall-bladder adherent by fundus to site of the fistula. Cholecystectomy was performed, the subhepatic space being drained by a tube inserted through the fistula, and healing was uneventful.

*Pathological Report.*—Greatly thickened gall-bladder wall showed muscle hypertrophy and much inflammatory fibrosis, with cellular infiltration of subacute and chronic type. Mucosa showed abundant new formation of mucous glands.

Glasgow.

G. H. EDINGTON.

**MENINGITIS FOLLOWING OPERATION ON THE ANTRUM IN A PATIENT WITH COMPLETE TRANSPOSITION OF VISCERA.**

THE case here recorded is of much interest, and seems worthy of publication.

A man, aged 24, seen during September, 1929, complained that he had been suffering from nasal obstruction for years, but that it had been very severe for the last two years. Examination revealed large multiple polypi on the left side. He was x-rayed. The films show an absent frontal sinus, but sphenoids, ethmoids, and both antra dull, especially the left.

He was admitted to hospital on October 13th, and examination confirmed the findings in the out-patient department, but also revealed the heart on the right side of the body. No other abnormality was detected.

On October 14th a Caldwell-Luc operation was carried out on the left side, and the polypi were removed through the antrum. A simple antrotomy was performed on the right side. He had an uneventful convalescence until October 21st, when he complained of headache and his temperature went to 102° F. A complete general and neurological examination was carried out, with negative findings. On October 22nd the condition was the same, except that his temperature was 106.2°, and again no other abnor-

mality could be discovered. On the 23rd his temperature had fallen to 104° F., and he looked very ill. He was seen by the physician, who also found no other abnormality, but on account of his general condition ordered him three doses of 20 c.cm. polyvalent antistreptococcus serum at eight-hourly intervals. On October 24th he was given 50 c.cm. intravenous saline. The following day he had lung signs. The whole of the left lung, although normal to percussion, had an almost complete cutting off of breath sounds. Late that afternoon he had an epileptiform convulsion of the whole body. A blood culture was taken, and 10 c.cm. of 1/2 per cent. mercurochrome was given intravenously. By midnight he was having almost continuous epileptiform attacks, but they were gradually settling down to the left side of his face. These persisted in spite of 1/3 grain of morphine and a little chloroform inhalation. Lumbar puncture was performed. The fluid was under intense pressure, and 20 c.cm. were withdrawn. This had a few cells with intracellular bacilli resembling the influenza bacillus. He slowly sank, and died at 6 o'clock the following morning.

A post-mortem examination was carried out, with the following findings. The heart was lying on the right side. The spleen also was on the right side. The liver and appendix were on the left side. Both lungs were rigidly bound to the pleura throughout, and the large branch of the left pulmonary artery had an ante-mortem thrombus about three inches long. The brain had an area of pus over the whole of the upper part of the parietal lobe on the right side. The remainder of the brain, including the left side, was slightly congested but otherwise normal. A culture was made of the blood within the heart by Dr. Ponder, and was negative. The pus on the surface of the brain contained *Streptococcus longus*, and the thrombus was organized and infiltrated with leucocytes. We thank Dr. Ponder for the many bacteriological and microscopical examinations.

I wish to thank my honorary surgeon, Mr. J. Aldington Gibb, for permission to publish this case, and also for the following note.

"The operation performed by me was so usual and uncomplicated that the possibility of traumatic involvement never entered my head. The occurrence of two consecutive cases of erysipelas in the ward at the time may have been the source of infection. Moreover, the heating apparatus failed at the time, which inclines me to the view that this may have been an exciting cause of the onset. Mr. Mitchell, the house-surgeon, was unremitting in his care of the patient, and the post-mortem findings are his entirely, for which he deserves any credit. The case is interesting and well worthy of publication."

It was interesting to note that there was no macroscopic evidence of the disease having tracked up from the nose by a direct path, but it was completely isolated high up on the right side of the brain; also that the man was passed for the police force as perfectly fit in spite of his complete dextrocardia, and that he had done hard manual work all his life without any ill effects.

Maidstone.

HUGH G. MITCHELL, M.B., B.S., D.L.O.

**HERPES OPHTHALMICUS FOLLOWING CHOREA AND ASSOCIATED WITH VARICELLA.**

THE following histories are rather difficult of interpretation.

A healthy-looking girl, aged 7, was admitted on December 9th, 1929, with a history of "jumpiness" for six days. Her well-marked chorea was treated with large initial doses of liquor arsenicalis, which were gradually decreased. By December 28th she had taken 424 minims, and her movements had almost stopped. On January 4th, twenty-six days after admission, she developed herpes in the distribution of the upper division of the left fifth cranial nerve, the cornea escaping. The herpes was confidently diagnosed as being due to arsenical poisoning of the fifth ganglion, a well-known arsenical symptom, though uncommon in the treatment of chorea, and also rare as the site of shingles in the child. However, in the same ward, three days later, a girl, aged 5, with acute suppurative pneumococcal arthritis of the left hip, developed chicken-pox, thirty days after admission.

Ought this second event to throw any doubt on the diagnosis of the cause of the fifth nerve herpes? There have been no further cases of herpes or chicken-pox. The patient with chicken-pox was isolated at once; twelve other patients had not had chicken-pox, and three patients had had chicken-pox. The bias of the writer's view is betrayed, for the girl with herpes ophthalmicus was not isolated.

I must thank the medical superintendent of the West Middlesex Hospital for permission to publish these cases.

Isleworth.

THOS. VIBERT PEARCE, F.R.C.S.

to the rigorous winter conditions of many sanatoriums? I am sure it is, as she says, futile and sometimes even cruel. Reform is highly desirable, and I trust her practical suggestions will receive the consideration they merit.—I am, etc.,

Gloucester, April 14th.

W. ARNOTT DICKSON.

SIR,—The tuberculin test is certainly not infallible, but anyone who has used it extensively can hardly fail to recognize in it a most valuable adjunct to other methods of diagnosis. The test being one of immunity there is no reason why a tuberculinized individual who has developed a partial active immunity to the toxin of the tubercle bacillus should give a marked positive reaction. But he will surely react in a modified way in proportion to the amount of immunity he has developed. In a case of chronic fibroid tuberculosis where the plasma is flooded with autogenous tuberculin, and when this toxin produces little or no toxic effect on the host, we need not expect a small quantity of injected tuberculin to have any appreciable reactive effect; the reactive phenomena are therefore minimal, but they are always present, especially if the subcutaneous test is employed. In the very acute type of tuberculous infection, particularly in young girls, where the reactive processes of the individual have been broken down completely, we cannot expect tuberculin to produce a reaction. In both of these types—the extensive chronic fibroid and the acute disseminated type of infection—we do not need the tuberculin reaction for a diagnosis. In the first type of infection physical signs and symptoms are obvious, and in the second type there is nearly always a typical x-ray picture.

Many years ago I used the Pirquet method, but I certainly found the result difficult of interpretation, because in this test the only guidance is a local manifestation. The tuberculin reaction is a complex, there being not only the specific element but also a purely toxic element in it, the second being probably of a protein shock nature. On the other hand, with the subcutaneous test, the picture is complete, with a local reaction, a characteristic temperature response, and the focal reaction; the last, when obtained, is certainly diagnostic of an active and progressive tuberculous lesion. I have employed the old tuberculin of Koch in diagnosis (by the subcutaneous method) in several hundred cases, and I have never yet seen mobilization of the tubercle bacilli as a result of it, although anybody who reads the alarmist literature on the subject would undoubtedly be frightened at its use.

During the war I had a curious experience. A fresh supply of the old tuberculin of Koch had been supplied to me by an English firm of manufacturers; I could not get a definite and typical reaction in cases which obviously ought to have responded thus. I became suspicious, and after a good deal of trouble I obtained from a foreign firm another supply of tuberculin, prepared in accordance with Koch's original formula, when I had no difficulty in obtaining a typical local, general, and focal reaction in those cases which had previously failed to react. A few years later I received from a well-known London physician a supply of tuberculin; he stated that he had been unable to obtain the reaction with it, but unfortunately at the time I was unable to test its properties in obviously tuberculous patients. I have no doubt that occasionally a tuberculin is encountered which, through faulty preparation, is of no value as a diagnostic agent.

Another method of real diagnostic value, which ought to be used more extensively, especially by the general practitioner who sees the case early, is the method of auto-intoxication excited by gradually increasing walking exercise. An apparently afebrile patient, in the earliest stage of tuberculosis, will often develop a sustained temperature, lasting a week or more; if the patient is carefully examined every day the transient appearance of some definite sign (a focal reaction) will clinch the diagnosis. Obviously, complete rest in bed is indicated as soon as the diagnosis is established, until the temperature and pulse have gained their normal level. I have occasionally made use of this procedure when the subcutaneous tuberculin test was contra-indicated.—I am, etc.,

Kingussie, April 16th.

FELIX SAVY.

\*\*. This correspondence is now closed.

## ERGOT PREPARATIONS FOR ORAL ADMINISTRATION.

SIR,—I should be greatly obliged if you would publish a correction of a statement in your article of April 12th (p. 707) on preparations of ergot for oral administration.

When referring to the examination by Elphick and myself of various samples of ergot, you stated that we found Polish ergot to contain 0.6 per cent. of the specific alkaloid. This figure should be 0.06 per cent. The error, which is due to my faulty proof-reading, requires correction because of the bearing of the facts on the future of these ergot preparations. The finding that Polish and Russian ergots, which constitute such a large proportion of the total production of this drug, contain so much less ergotoxine than the ergots from Spain or Portugal, may prove of importance in deciding the minimum amount of activity which will be permitted in extracts of ergot in the next edition of the *British Pharmacopoeia*.—I am, etc.,

London, W.C.1, April 15th.

FRANK WOKES.

## Universities and Colleges.

### UNIVERSITY OF CAMBRIDGE.

THE following candidates have been approved at the examination indicated:

DIPLOMAS IN PUBLIC HEALTH, HYGIENE, AND TROPICAL MEDICINE AND HYGIENE, PART I.—R. J. Dyson, M. S. El-Khadi, C. O. Karunakaran, J. H. Loois (distinguishe), Flora H. G. MacDonald, Ethel Morris, K. C. K. E. Raja, Jean Robinson.

### ROYAL COLLEGE OF PHYSICIANS OF LONDON.

At an ordinary meeting of the Royal College of Physicians of London held on April 14th, Sir John Rose Bradford was re-elected President of the College.

#### Diplomas.

The following Diplomas were also conferred, jointly with the Royal College of Surgeons, on the following candidates:

IN TROPICAL MEDICINE AND HYGIENE.—G. H. Arndt, S. Attanullah, Balkrishna, C. E. Bhole, R. C. Burgess, A. D. Cust, W. C. Davidson, Eugene Egan, A. P. Farmer, P. V. Gharpure, F. W. Gilbert, C. J. Hackett, W. K. Little, A. F. Mackay, N. M. MacLennan, W. A. Mirza, Z. Mitterstein, S. K. Mitra, C. C. Okell, G. M. C. Powell, J. T. Sorley, J. H. Strahan, W. K. Stratman-Thomas, S. H. Swift, G. E. Tilsley, E. A. Trim, L. E. Vine, N. T. Whitehead, K. L. Wig, F. Williams.

IN OPHTHALMIC MEDICINE AND SURGERY.—S. S. Ahluwalia, M. Ata Ullah, J. H. Beaumont, A. Biagoff, E. Dikshitulu, R. R. Ghosh, W. H. Gordon, A. H. Jackson, N. M. Macdonald, A. O. Maher, I. C. Michaelson, C. C. Mukhopadhyay, F. Phillips, H. Singh, A. D. Williamson, F. C. Wilson.

## The Services.

### I.M.S. DINNER.

THE annual dinner of the Indian Medical Service will be held at the Trocadero Restaurant, London, on Wednesday, June 18th, at 7.15 p.m. Major-General F. G. H. Hutchinson, C.I.E., has been invited to take the chair. Tickets and all particulars may be obtained from the joint honorary secretary, Sir Thomas Carey Evans, M.C. (Major, ret.), 31, Wimpole Street, W.1.

### DEATHS IN THE SERVICES.

Lieut.-Colonel William Snowden Hedley, R.A.M.C. (ret.), died at Liphook, Hants, on April 7th, aged 89. He was born on March 1st, 1841, and was educated at Edinburgh, where he graduated as M.D. in 1863, also taking the M.R.C.S. in the same year. Entering the Army as an assistant surgeon on September 30th, 1864, he became surgeon major after twelve years' service, and, after being on half pay from December 3rd, 1880, to November 29th, 1881, retired on October 14th, 1885, with an honorary step as brigade surgeon. He served in the Sudan campaign of 1885, with the Nile expedition, when he was in charge of the field hospital at Dongola, and received the Egyptian medal with a clasp and the Khedive's bronze star. During the old regimental days he served in the 1st Foot, the Royal Regiment or Royal Scots; and in the 53rd Foot, now the King's Shropshire Light Infantry.

Lieut.-Colonel William Henry Cazaly, Indian Medical Service (ret.), died at Earl Soham, Suffolk, on April 10th, aged 56. He was born on September 24th, 1873, was educated at Bart's, and took the M.R.C.S. and L.R.C.P. Lond. in 1893; he graduated as B.A. of London University in 1892, and as M.B. and B.S. in 1905; he also took the D.P.H. of the London Colleges in 1910. Entering the I.M.S. as lieutenant on June 28th, 1900, he became lieutenant-colonel on December 28th, 1919, and retired on March 14th, 1920. He took part in the war of 1914-18, serving in France and Belgium in 1914-15.

MALCOLM HUTTON, M.A., M.B.,  
Barrowden, Stamford.

We regret to record the death of Dr. Malcolm Hutton on April 7th, at the age of 49. Malcolm Hutton was born in Oban, Argyllshire, and studied at Glasgow University, where he took degrees in arts, science, and medicine. After qualifying he acted as house-physician at the Western Infirmary, Glasgow, and as house-surgeon at the Royal Infirmary, Maternity Hospital, and Ophthalmic Institution. In 1908 he took the diploma in public health at Manchester University, and shortly after became medical officer of health for the district of Crompton. He practised first in Shaw, Lancashire, and later in Barrowden, Stamford. From 1914 to 1916 he was secretary to the Oldham Division of the British Medical Association. Dr. Hutton is survived by his wife, who is also in the medical profession, and three daughters.

Dr. A. Vernon Davies, M.P., writes:

The tragically sudden death of Dr. Malcolm Hutton, upon the eve of his retirement from practice, has come as a shock to those who knew him. His family removed from Barrowden at the end of February, while he remained for a few weeks to introduce his successor. He had an attack of influenza, which he tried to overcome whilst carrying on his work. He went to his new home in Devonshire on March 15th, seriously ill. Acute tuberculosis of the lungs developed, and he died from heart failure in a sanatorium on April 7th.

I had the privilege of knowing Hutton as a friend and fellow practitioner in Shaw (Lancs) for twelve years; and as a friend for another eleven years. He was the senior partner in a large industrial practice. In 1914 his partner "joined up" for the duration of the war. Shortly afterwards three other medical men from Shaw joined the R.A.M.C., so that for a long time three men were left to do the work which had been done formerly by seven. During this period Hutton worked, literally, day and night, with the result that at the end of the war he was a tired man—showing evidence of the great strain he had undergone. He left Shaw in 1919 for a country practice, but, as far as I could judge, still worked very hard—although, perhaps, in more congenial surroundings. But, like so many of our profession, he was fated to die "in harness." Hutton was a man of high intellectual capacity. He held degrees in arts, science, and medicine, and a diploma in public health. The last he obtained whilst working hard in practice at Shaw. He had the dual personality of the student and of the man of affairs—a rare combination, I think, in our profession. He was a great reader of our best literature; he kept himself abreast of all recent medical knowledge and was always seeking "new worlds to conquer." He took up ophthalmology as a new line during his country practice, and yet in spite of his devotion to learning he was at all times the painstaking, practical, level-headed Scot. When he served on the local medical war committee his judicial outlook and sound common sense were of great help to his colleagues in selecting the civilian medical practitioners to supply the needs of the Army. These attributes were recognized again by his colleagues in Rutland later on when he was appointed chairman of the panel committee, and chairman of the county insurance committee. He was a worker with a very methodical mind, which enabled him to get through an enormous amount of work. Conscientious to a degree, hating "sham" and hypocrisy, yet kind and tolerant when necessary, a friend and helper of the poor and needy, and a deeply religious man, Hutton, by his outstanding personality, his skill and ability, stands out as an example of the highest type of "G. P." He has left with his friends and patients a sweet memory of affection, respect, and admiration.

Mr. H. PERCY ADAMS, F.R.I.B.A., who died recently at the age of 64, was well known to the medical profession inasmuch as he had for many years given special attention to the designing of hospitals in which he was an acknowledged master. He contributed an article to the Hospital Number of the *British Medical Journal*, of June 20th, 1908, on the construction of cottage hospitals, in which

he gave a full description of the Woburn Cottage Hospital designed by him for the Duke of Bedford. Mr. Adams was the architect of the British Medical Association's central headquarters in the Strand, at the corner of Agar Street, which were occupied from 1908 till the removal to Tavistock Square in 1925.

The following well-known foreign medical men have recently died: Professor JULIUS RAECKE, head of the clinic for nervous diseases at Frankfurt and author of a textbook on forensic psychiatry, aged 58; Dr. HERMANN FORTIG, extraordinary professor of genito-urinary diseases at Würtemberg University and head of the dermatological clinic at Würtemberg; Dr. CARLOS IBAN DE LA SIEVRA, founder of the medico-legal institute at Santiago; Dr. LÉON BLUM, professor of medicine at Strasbourg University, aged 52; Dr. EUSEBIO A. MORALES, one of the founders of the Republic of Panama, as the result of a motor accident; and Dr. ALBERT THÉVENOD, a paediatrist of Geneva, aged 32.

## Medical Notes in Parliament.

[FROM OUR PARLIAMENTARY CORRESPONDENT.]

PARLIAMENT rose on April 17th until April 29th. On April 15th it was announced that the first business of the House of Commons after the adjournment will be to discuss the Ministry of Health Estimates, with special regard to the administration of the National Health Insurance Act and recent charges of laxity. Poor Law administration and task work are also to be debated.

During the debate which preceded the Eastertide adjournment of the House of Commons on April 17th Mr. Adamson announced that April 1st, 1931, would be retained as the date on which the leaving age for pupils at elementary schools in Scotland would be raised to 15 years. On the same day the House of Lords decided not to insist on its amendment restoring desertion as a capital offence under the Army and Air Force (Annual) Bill. The Commons had disagreed with this amendment.

On April 17th a new writ was authorized in the House of Commons for a by-election in the West Fulham Division, Dr. G. E. Spero, who was returned for that constituency at the General Election, having retired.

The Hours of Industrial Employment Bill, "to regulate the hours of work in industrial undertakings," was presented in the House of Commons by Miss Bondfield on April 16th.

## Road Traffic Bill.

When the Road Traffic Bill was before the House of Lords Clause 36, which deals with requirements in respect of policies to be taken out by motorists against third-party risks, was amended by the insertion of a new subsection running:

(2) Where any payment is made by an authorized insurer under a policy issued under this part of this Act in respect of the death of or bodily injury to any person arising out of the use of a motor vehicle on a road and the person who has so died or been bodily injured has to the knowledge of the authorized insurer received treatment in a hospital in respect of the fatal or other bodily injury so arising, there shall also be paid by the authorized insurer to such hospital the expenses reasonably incurred by the hospital in affording such treatment to an amount not exceeding twenty-five pounds for each person so treated.

A standing committee of the House of Commons is now examining the same bill, and reached Clause 36 on April 10th. Mr. REMER moved to leave out Subsection 2, as set out above.

Mr. MORRISON (Minister of Transport) said he and the committee were agreed on the financial difficulties of the hospitals, and on the fact that they were faced with a problem in handling the accidents associated with motors. On the other hand, as one who believed that all health services should be public, he was bound to say that the only proper way to run them was on the basis of public services by public authorities. The present admitted difficulties of the hospitals might not then arise. In his view Subsection 2 was alien to the main purpose of this part of the bill, which was to ensure that the legal claim to compensation by a third party for death or injury should not be defeated by the financial insufficiency of the motorist. The subsection was illogical, and would be haphazard in effect, awkward to work, and largely ineffective. Hospital authorities would be unable to recover their expenses unless they were in a position to notify the insurer that the injured person had been treated in that hospital, and the insurance companies would probably take steps to prevent the fact of treatment in a hospital being brought to their notice. On the other hand, members of the committee were receiving numerous com-

## Medical News.

THE Oliver-Sharpey lectures before the Royal College of Physicians of London will be delivered by Professor J. J. R. Macleod at the College, Pall Mall East, S.W.1, on Tuesday, April 29th, and Thursday, May 1st, at 5 p.m. The subject of the lectures is diabetes as a physiological problem. They are open to members of the medical profession on presentation of visiting cards.

THE annual meeting and luncheon of the Tavistock Square Clinic for Functional Nervous Disorders will be held at the Wharnccliffe Rooms, Hotel Great Central, on Monday, May 5th. The Chairman of Council, Dr. H. B. Brackenbury, will open the proceedings at 12.15 o'clock, luncheon will be served at 1 o'clock, and after speeches by Sir Farquhar Buzzard and Miss Isabel MacDonald the honorary director (Dr. H. Crichton-Miller) will give an account of the year's work.

THE annual meeting of the Medical Mission Auxiliary of the Church Missionary Society will be held in the Central Hall, Westminster, S.W., on Wednesday, May 7th, at 7.15 p.m. The chair will be taken by Lord Lloyd, and among the speakers will be Dr. H. Gordon Thompson, formerly of Hanchow Hospital. Tickets of admission may be obtained from the superintendent, Loan Department, Church Missionary Society, Salisbury Square, E.C.4. A small number of reserved seats are available at one shilling each.

THE eighty-third half-yearly dinner of the Aberdeen University Club, London, will be held at the Trocadero Restaurant on Thursday, May 15th. The chairman will be Professor J. J. R. Macleod, and the guest of the club Professor Leonard Hill. The honorary secretary's address is 9, Addison Gardens, W.14.

THE annual dinner and meeting of the University of London Medical Graduates' Society will be held at the Langham Hotel, Portland Place, W., on Tuesday, May 13th, at 7.45 p.m. The President, Sir St. Clair Thomson, will be in the chair. Applications for tickets (price 10s. 6d.) should be sent to the honorary secretaries of the society, 11, Chandos Street, Cavendish Square, W.1.

A PUBLIC conference on by-laws under Section 5 of the Public Health (Smoke Abatement) Act, 1926, will be held under the auspices of the National Smoke Abatement Society, on Friday, May 2nd, at 71, Eccleston Square, Westminster, at 3.30 p.m. Mr. C. J. Allpass, chairman of the Greater London Regional Smoke Abatement Committee, and of the Public Control Committee of the London County Council, will open the discussion.

A POST-GRADUATE lecture entitled "Radium in cancer" will be given at the University of Sheffield, physics department, on Tuesday, May 6th, at 8.45 p.m., by Dr. J. Murdoch, chief of the department of radium and radiotherapy, Brugmann Hospital, Brussels, and director of the cancer centre of the University of Brussels.

UNDER the auspices of the British Institute of Philosophical Studies, Professor Lascelles Abercrombie will deliver a course of six lectures on aesthetic philosophy, commencing on Monday, May 5th, at 5.30 p.m. Further information may be obtained from the Director of Studies of the Institute, 88, Kingsway, W.C.2.

IN aid of King Edward's Hospital Fund for London a series of six "cross-examinations," in which various well-known persons will be charged with offences they are alleged to have committed, will be held at the London School of Economics, Houghton Street, Aldwych, each Tuesday, at 5.30 p.m., beginning on April 23rd. At the first cross-examination Mr. Low, the cartoonist, will be charged with libelling politicians, Mr. A. P. Herbert taking the part of prosecutor, and Mr. W. Pett Ridge of judge. Tickets (7s. 6d., 5s., 3s. 6d., and 2s. 6d. each, or £2, £1.5s., 18s., and 12s. 6d. for the series) may be obtained from the secretary, King Edward's Hospital Fund for London, 7, Walbrook, E.C.4, or at the doors.

THE centenary of the birth of the celebrated surgeon Richard von Volkmann, who was one of the founders of the German Society of Surgery, and died in 1889, will be celebrated at Halle on April 27th, when addresses will be given by Professor Voelcker and the President of the society.

PROFESSOR FRANCIS FRASER'S address entitled "Before the Finals and After," given to senior students and recently qualified practitioners at a reception organized by the Metropolitan Counties Branch of the British Medical Association, was reported in the *Supplement* to our issue of February 22nd, and the full text has now appeared in the April issue of the *St. Bartholomew's Hospital Journal*.

THE fifty-fourth Congress of the German Society of Surgery is being held at the Langenbeck-Vircchow House, Berlin, from April 23rd to 26th, under the presidency of Professor W. Anschütz of Kiel.

THE twenty-first congress of the German Roentgen Society will be held in Berlin from April 27th to 29th, when the following subjects will be discussed: intravenous pyelography, introduced by von Lichtenberg of Berlin, and the present methods of irradiation of cancer, introduced by Miescher of Zürich, Holfelder of Frankfurt, and Schinz of Zürich.

THE date of the second International Paediatric Congress at Stockholm has been advanced one day, and will cover the period August 18th to the 21st. The Swedish organization committee has chosen for discussion: the biological effect of direct and indirect ultra-violet irradiation; the physiological and pathological significance of the thymic-lymphatic system; and the psychology and pathological psychology of childhood, their significance as a branch of paediatric research and teaching, and their application in medico-social work. The fee of admission is 20 Swedish crowns for regular members, and 10 crowns for members of their families. Facilities are being arranged for excursions after the congress to various places of interest in Sweden. A booklet entitled *Summer in Sweden* can be obtained from the Swedish Organization Committee.

THE library of the Royal Society of Medicine is now open until 10 p.m. every Thursday in addition to being open to this hour on Tuesdays and Fridays. Hitherto Fellows resident outside the London postal area have enjoyed the privilege of having books sent to them from the library carriage paid. This privilege has now been extended to all Fellows not resident or practising within a mile of the Society's house.

ON March 3rd, the twenty-fifth anniversary of the discovery of *Spirochaeta pallida*, the Fritz Schaudinn medal was awarded by an international committee of the Hamburg Institute for Tropical Diseases to Professors M. Hartmann of Berlin, F. d'Hérelle of Paris, and E. Reichenow of Hamburg, in recognition of their microbiological researches.

IN the April issue of *The World's Children*, a monthly journal of child care and protection considered from an international point of view, are published two articles of medical interest: "For the children of Greece," an account by Mr. H. D. Watson, of the Athens Eye Clinic, devoted mainly to the treatment of trachoma; and "In the Welsh Marches," a description of the recently developed scheme of ante-natal work in Monmouthshire. *The World's Children* may be obtained from the Weardale Press, Limited, 26, Gordon Street, London, W.C.1, price 4d.

THE April issue of the *Leprosy Review* contains an interesting article by Dr. H. W. Wade, describing the growth of the anti-leprosy campaign in the Philippine Islands. The Philippine system combines segregation of infectives near their homes, when possible, with dispensary treatment of early cases, and intensive survey and educational work. Other articles in this issue deal with work on the Gold Coast and in Norway, and there is an account of leprosy of the nose and mouth. The *Review* may be obtained from the office of the British Empire Leprosy Relief Association, 29, Dorset Square, N.W.1, price 2s.

AN article by Dr. T. Wilson Parry entitled "Holes in the skulls of prehistoric man and their significance," has been reprinted from the *Archaeological Journal*, 1928. Dr. Parry discusses the five chief causes of these holes, and gives illustrations of their incidence. The subject-matter is illustrated by numerous reproductions of photographs of such skulls.

THE Alexander Pedler Lecture for 1929, under the auspices of the Manchester Literary and Philosophical Society and the British Science Guild, was delivered by Dr. G. C. Simpson, F.R.S. In considering his subject, "Past climates," from a meteorological point of view Dr. Simpson remarked that while all meteorologists accepted certain geological evidence of radical differences in present and past climates they disagreed, as did the geologists, in explaining how these changes had been brought about. The problem of past climates was to determine what changes in the existing conditions would produce the climates which the geologists inferred from their observations. Present temperature distribution depended on the amount of solar radiation, the horizontal transfer of heat from one part of the earth to another, and on the characteristics of terrestrial radiation. How much did variation in each of these factors contribute to the observed climatic changes? Copies of the lecture may be obtained from the offices of the British Science Guild, 6, John Street, W.C.2, price 1s.

THE KING has confirmed the appointment of Dr. Lawson Gifford and Dr. Basil Mayor Wilson (superintending medical officer) to be nominated members of the Legislative Council of the Island of Jamaica.

THE late Sir Alfred Fripp has left estate of the gross value of £101,903, with net personalty £52,655.

DR. C. ZOELLER has recently been appointed professor of epidemiology and bacteriology at the Val-de-Grâce School of Military Medicine, Paris.