

## THE BIRTHDAY HONOURS

The Honours List, issued on the occasion of His Majesty's birthday, includes the names of the following members of the medical profession:

## G.C.V.O.

Sir MILSOM REES, K.C.V.O., D.Sc., F.R.C.S.Ed., Laryngologist to Their Majesties the King and Queen.

## K.C.M.G.

AMBROSE THOMAS STANTON, C.M.G., M.D., F.R.C.P., Chief Medical Adviser to the Secretary of State for the Colonies.

## K.C.V.O.

MAURICE ALAN CASSIDY, C.B., M.D., F.R.C.P., Physician Extraordinary to the King.

## K.B.E. (Civil Division)

FREDERICK GRANT BANTING, LL.D., M.D., D.Sc., of the Dominion of Canada, discoverer of insulin.

## Knighthood

Major ROBERT GEORGE ARCHIBALD, C.M.G., D.S.O., M.D., R.A.M.C. (ret.), Director, Wellcome Tropical Research Laboratories, Sudan.

COMYN BURKE, M.A., M.D., M.Chir., F.R.C.P., F.R.C.S., F.C.O.G., M.M.S.A., Consulting Obstetric Surgeon, Middlesex Hospital, Director of the L.C.C. Radium Centre.

GRAFTON ELLIOT SMITH, M.D., Litt.D., D.Sc., F.R.S., F.R.C.P., Professor of Anatomy in the University of London (University College).

Major-General JAMES DRUMMOND GRAHAM, C.B., C.I.E., K.H.S., I.M.S. (ret.), late Public Health Commissioner with the Government of India.

Rai Bahadur UPENDRA NATH BRAHMACHARI, Medical Practitioner, Bengal.

## C.B. (Military Division)

Major-General PATRICK HAGART HENDERSON, D.S.O., M.B. (late R.A.M.C.), Honorary Physician to the King, Director of Hygiene, the War Office.

Major-General ERNEST ALEXANDER WALKER, M.B., F.R.C.S. Ed., I.M.S., Honorary Surgeon to the King, Director of Medical Services, India.

## C.B. (Civil Division)

Surgeon Rear-Admiral PERCIVAL THOMAS NICHOLLS, M.R.C.S., L.R.C.P.

## C.I.E.

Lieut.-Colonel JOHN ALFRED STEELE PHILLIPS, I.M.S., Director of Public Health, Bihar and Orissa.

Lieut.-Colonel HAROLD HOLMES KING, I.M.S., Director, King Institute, Guindy, Madras.

## C.V.O.

LOUIS FRANCIS ROEBUCK KNUTHSEN, O.B.E., M.D.

## C.B.E. (Military Division)

Group Captain EDWARD CECIL CLEMENTS, O.B.E., M.R.C.S., L.R.C.P., R.A.F.

## C.B.E. (Civil Division)

JOHN CROSTHWAITE BRIDGE, F.R.C.S.Ed., M.R.C.P.Ed., D.P.H., Senior Medical Inspector of Factories, Home Office.

WILLIAM HENRY PEACOCK, M.B., B.Sc., Deputy-Director of Health Services, Nigeria.

## O.B.E. (Military Division)

Colonel WALTER LISTER, T.D., M.R.C.S., L.R.C.P., late Assistant Director of Medical Services, 49th (West Riding) Division, Territorial Army.

## O.B.E. (Civil Division)

HARRY EDWARD HEWITT, M.D., B.S., D.P.H., Second Medical Officer, General Post Office.

Miss KATHERINE STEWART MACPHAIL, M.B., Ch.B.Glas., Member of the British Community in Belgrade.

Khan Bahadur KHWAJA ABDUL RAHMAN, M.B., Ch.B.Ed., D.P.H., Director of Public Health, Punjab.

GEORGE MACLEAN, M.B.E., M.B., Ch.B., Sleeping Sickness Officer, Tanganyika Territory.

## I.S.O. (Companion)

Rai Sahib LALA RAM SAHAI, Sub-Assistant Surgeon, Residency Hospital, Indore, Central India.

## M.B.E. (Military Division)

Flight Lieutenant FRANCIS WILFRID PETER DIXON, M.B., B.S., R.A.F.

## M.B.E. (Civil Division)

JOSEPH ANTOINE HERMANN ANDRÉ, M.R.C.S., L.R.C.P., Superintendent, Leper Asylum, Mauritius.

ANDREW BUCHANAN MACDONALD, M.B., Ch.B., for devoted work in the treatment of lepers in Nigeria.

JOSEPH LENNOX DONATION PAWAN, M.B., Ch.B., Government Bacteriologist, Trinidad.

Major FRANK HERMANN OTTO, Indian Medical Department, Assistant Surgeon on the Port Health Staff, Bombay.

GOFFREY OSMUND SCHMIDT, Indian Medical Department, Assistant Surgeon, British Consulate, Kashgar.

SOWANI PUAMAU, First Native Medical Practitioner, Gilbert and Ellice Islands Colony, Western Pacific.

## Hon. M.B.E. (Civil Division)

YUSUF HAJJAR, M.D., Medical Officer in charge of the Government Hospital at Jerusalem, Palestine.

## Kaisar-i-Hind Medal (First Class)

Miss DORIS LOUISA GRAHAM, M.D., B.Ch., Medical Missionary, Krishnagar, Bengal.

Miss MILLICENT VERE WEBB, L.R.C.P. and S.Ed., L.R.F.P.S., F.C.O.G., Chief Medical Officer, Women's Medical Service, and Secretary of the Funds under the Presidency of Her Excellency the Countess of Willingdon.

## LONDON AND COUNTIES MEDICAL PROTECTION SOCIETY

The annual general meeting of the London and Counties Medical Protection Society was held at Victory House, Leicester Square, on May 30th, with Sir JOHN ROSE BRADFORD in the chair.

The chairman, in presenting the annual report, said that there was no very outstanding feature to which he had to call attention. There had been a notable increase of work during the past year, not only in the number of applications for advice received, but in the number of cases which had had to be seriously considered by the society. Fortunately, settlements had been arrived at in the large majority of instances and litigation avoided. He had again to lay stress on the importance of membership of a defence society: the fact still remained that something like one-third of the practising members of the profession appeared content to remain without this protection. He referred regretfully to losses sustained during the year, in particular by the deaths of Dr. E. Collier Green and Sir George Makins, vice-presidents of the society for twenty-three and seventeen years.

The report was adopted, and Sir John Rose Bradford was unanimously re-elected to the presidency. The vice-presidents were also re-elected, with the addition of Sir William Hale-White and Sir Cuthbert Wallace, as were the retiring members of council, the secretary (Dr. C. M. Fegen), and the treasurer (Dr. R. L. Guthrie). In speaking to one of these resolutions Dr. C. O. HAWTHORNE said that it was really astonishing when one read the annual report how any member of the profession could comfortably sleep at night unless he had the protection of a defence society. The British Medical Association never lost an opportunity of urging newly qualified practitioners to join a defence society as one of their first acts after registration. The report showed also that it was advisable even for those of riper years to maintain their association with such a body, because new points of attack continually appeared to which no one's attention had ever been drawn before. The meeting concluded with votes of thanks to the officers, legal advisers, and staff.

## THE SOLICITORS' REPORT

The solicitors' report, which was embodied in the general report of the society, urged that the present relation of insurance practitioners to the Ministry of Health in the matter of prescribing appeared to need revision. The insurance practitioner was between the devil and the deep sea. If he failed to prescribe adequately he was liable to be brought before the medical service subcommittee on a charge of having failed to render all necessary and proper services; if he prescribed what in his opinion were the best drugs, his average might be above the average for the area. One piece of legis-

in the homes and numerous factories and workshops of Warrington. He leaves a widow and two sons, one of whom is a member of the medical profession.

J. S. M.

THE LATE DR. WILLIAM B. PATERSON

Sir James Barr writes: I am very sorry to learn of the death of Dr. W. B. Paterson from the excellent obituary notice by Dr. Robert Coope in the *Journal* of June 2nd. I owed many obligations, professional and personal, to Dr. Paterson, whom I always held in the highest esteem, and patients might trust their lives with confidence to him. I have a lively recollection of one night when getting off a tram-car the driver failed to stop and my right humerus was dragged out of its socket. I was assisted home. A surgical colleague was telephoned for, but he was at an operation and could not come for at least half an hour. A practitioner friend was obtained, but he had no anaesthetic. He laid me on the floor, and with his foot in my axilla he pulled for a considerable time, but, contrary to my expressed wish, he gave up the job as hopeless and went home for chloroform. I told my wife that I could not lie in agony till his return and asked her to ring up Paterson and tell him to bring chloroform with him. He arrived almost immediately fully armed and I asked him to put me under chloroform and keep me deeply under till the dislocation was reduced. I woke up comfortably in bed. The following day the surgeon and my other friends insisted on giving me a dose of tetanus antitoxin. My recovery from the accident took about six months. I very much regret that I did not hear of Paterson's illness when I was in Liverpool about nine months ago. The medical mortality in Liverpool of late has been somewhat appalling, and I am now very sorry to find Paterson added to the list. I wish to extend my sincere sympathy to Mrs. Paterson.

Dr. JOHN MYLES of Dolgelley was born in Limerick in 1855, and received his medical education at Trinity College, Dublin. Before this he had spent many years in Australia and New Zealand, and served in the New Zealand Artillery in the second Maori War. He graduated M.B., B.Ch.Dublin in 1889, and obtained the F.R.C.S.I. in the same year. In 1894 he proceeded M.D. After graduation he returned to New Zealand, engaged in private practice at Kumara, and was appointed medical superintendent of the Ross and Kumara hospitals. Five years later he came to England, living in Clapham, eventually removing to Dolgelley, where he had practised for twenty-seven years. At the outbreak of the Great War, although over military age, he obtained a commission as Captain R.A.M.C., and was medical officer to the Caerwynch Auxiliary War Hospital. Dr. Myles took an active part in the formation of the Dolgelley branch of the British Legion, and in recognition of his services in this connexion was awarded the gold badge of the Legion. He had been a member of the British Medical Association since 1897. A great athlete in his youth—he was an Irish Rugby international in 1875, and at about the same time was in the crew at Henley which won the Ladies' Plate—he carried with him through his life a zest for active pursuits and a great love for his fellow men. Wide in his reading as in his travels, he was a man of broad outlook, and a welcome member of many social organizations. His geniality and exceptional talent for making friends endeared him to his colleagues and patients, and at his funeral Dolgelley Parish Church was crowded with representatives of the many interests he had espoused in a long life of devoted service.

The following well-known foreign medical men have recently died: Dr. CHRISTIAN ZOELLER, professor of epidemiology and bacteriology at the Val-de-Grâce School of Medicine, Paris, aged 46; Dr. CHEDA MIHAICOVITCH, formerly Minister of Health at Belgrade, aged 64, from anthrax; and Professor ARTHUR HÜBNER, director of the Nerve Clinic at Bonn, aged 55.

## Medico-Legal

### BUSINESS RELATIONS BETWEEN DOCTORS

*This is the first of a series of articles, contributed by a legal correspondent, on some practical aspects of business transactions between medical practitioners.*

#### GENERAL CONSIDERATIONS

When a doctor buys or sells a practice, or takes a partner, an assistant, or a locumtenent, or enters the employment of another as an assistant or locumtenent, he creates, whether he realizes it or not, a legal relationship which is bound by legal rules. Unfortunately, the experience of the large defence societies, of the British Medical Association, and of those solicitors and agents who are accustomed to these transactions shows that doctors are lamentably careless in their dealings with one another. Men who take the most scrupulous care of their patients may display in their business relationships an indifference which if carried into their professional life would quickly expose them to a charge of manslaughter. The reason for this widespread failing may be a large generosity of mind, which assumes that other persons are honest and will carry out their intentions and obligations loyally, and which cannot see the necessity for legal compulsion. It may be a preoccupation with the needs of sick bodies and minds, and an impatience with intellectual abstractions which seem to have no practical value. But the fact remains that solicitors who specialize in medico-legal work are constantly being called in to unravel the complicated and acrimonious problems that arise when two or more medical men, in addition possibly to a number of lay relatives, have involved themselves in a financial and professional relationship of vital importance to all concerned, have based years of their working lives and hundreds of pounds of their savings on it, and then, when the situation is transformed by a quarrel or a death, find that their intentions have never been clearly stated and agreed, and that they all hold completely different and antagonistic views about the rights and duties of each party to the arrangement.

The purpose of this paper is therefore twofold: to persuade the medical practitioner how important it is to conduct his business relationships with his fellows in the proper legal way, and to show him something of the law governing these relationships. It is impossible to avoid giving a certain amount of general advice as distinguished from legal information, but this tendency has been resisted as far as has been practicable. The material is not by any means original. For practically all of it the author is indebted to the classical textbook of Barnard and Stocker, the earlier chapters of *The Conduct of Medical Practice*, various articles and letters that have appeared from time to time in the *British Medical Journal* and the *Lancet*, and the more recent annual reports of the two great professional defence societies.

The chief business relationships between doctors are those of partnership, of a principal with his assistant or locumtenent, and of a doctor selling his practice with the doctor who buys it. These relationships have several features in common. He who buys part of a practice is at once a purchaser and a prospective partner, so his relationship with the vendor—the technical term for a party who is selling something—is a double one. A doctor sometimes becomes an assistant with a view to becoming a partner later on; or under terms, such as a small share in the profits in addition to his salary, which make his position difficult to distinguish from that of a partner. A locumtenent's position is much like that of an assistant, but as it is transitory it does not involve much provision for the future.

## Universities and Colleges

### UNIVERSITY OF OXFORD

At a congregation held on June 2nd the degree of Doctor of Medicine (D.M.) was conferred on K. N. Irvine.

### UNIVERSITY OF LONDON

Dr. G. R. Cameron and Dr. L. P. Garrod have been assigned to the Faculty of Medicine.

Mr. N. J. Ainsworth, M.R.C.S., L.D.S., has been recognized as a teacher of dental surgery at the Royal Dental Hospital of London, School of Dental Surgery, and assigned to the Faculty of Medicine.

Professor H. S. Raper, D.Sc., M.B., F.R.S., has been appointed as an additional external examiner on the Board of Examiners for the Diploma in Biology in 1934.

The Regulations for the Academic Post-Graduate Diploma in Medical Radiology (*Red Book*, 1933-4) have been amended as follows: (1) By the addition of the following after the seventh paragraph on page 497:

"Students who have passed the B.Sc. (Special) Examination in Physics as Internal Students of this University will be exempted from the course of study and examination for Part I of the Diploma."

"Students who have passed the B.Sc. (General) Examination in Physics or the B.Sc. (Special) Examination with Physics as their subsidiary subject as Internal Students of this University will be exempted from the course of study for Part I of the Diploma."

(2) By the deletion of the tenth, eleventh, and thirteenth paragraphs on pages 497-8 and the substitution therefor of the following:

"Part I of the Examination will be held twice in each year, beginning on the Tuesday following the third Monday in March and on the first Monday in December.

"Part II of the Examination will be held twice in each year, beginning on the third Monday in June and on the second Monday in December.

"Every student entering for either or both parts of the Examination must apply to the Academic Registrar for an entry form and a certificate of course of study, which must be returned duly filled in and attested in accordance with the General Regulations as to Approved Courses of Study, together with the proper fee, not later than February 8th for the March Examination, April 8th for the June Examination, or November 8th for the December Examination.

The following appointments have been made: Professor G. E. Gask, F.R.C.S., and Mr. H. L. Eason, M.S., F.R.C.S., as Governors of the British Post-Graduate Medical School; Sir Cooper Perry, M.D., as representative on the governing bodies of the National Training College of Domestic Subjects and the Battersea Polytechnic; and Dr. H. G. Cook, F.R.C.S. (reappointed), to act as representative on the Court of Governors of the University College of South Wales and Monmouthshire for a further period of five years as from October.

Applications for the William Julius Mickle Fellowship must be sent in by October 1st. The Fellowship is of the value of at least £200, and is awarded annually by the Senate to the man or woman who, being resident in London and a graduate of the University, has in its opinion done most to advance medical art or science within the preceding five years, and has therein shown conspicuous merit. Further particulars may be obtained on application to the Academic Registrar.

Provided there is a candidate of sufficient merit, a Paul Philip Reitlinger Prize of £30 will be awarded on December 3rd for the best essay embodying the result of some research work on a medical subject carried out by the candidates, who must be matriculated students who, on June 1st preceding the award, were studying in one of the schools of the University in the Faculty of Medicine, or graduates of the University who on the same date were of not more than five years' standing from the taking of the first degree, and are or were students of such school. Essays must reach the University by October 1st, and regulations for the award of the prize may be obtained from the Academic Registrar.

### UNIVERSITY OF WALES

The following candidates have satisfied the examiners in the examination indicated:

TUBERCULOUS DISEASES DIPLOMA.—P. K. Ghosh, B. K. Pal, H. K. B. Rustogi, P. K. Sen, H. A. Zaki.

### SOCIETY OF APOTHECARIES OF LONDON

The following candidate has been approved at the examination indicated:

MASTER OF MIDWIFERY.—Marjorie Houghton James, M.B., B.S., D.P.H.

### ROYAL COLLEGE OF PHYSICIANS OF IRELAND

At the monthly meeting held on June 1st a resolution was adopted in silence expressing regret at the death of Dr. John Hugh Robert Glenn, a Fellow of the College.

The following were admitted Licentiates and Members of the College: W. R. F. Collis, M. J. O'Donnell, R. B. Pringle, and T. F. M. Woods.

## The Services

### DEPUTY DIRECTOR-GENERAL, A.M.S.

The War Office announces that Colonel W. P. MacArthur, D.S.O., O.B.E., M.D., F.R.C.P.I., Honorary Physician to the King, who is at present consulting physician to the Army and professor of tropical medicine at the Royal Army Medical College, has been appointed Deputy Director-General, Army Medical Services, the War Office, with effect from September 16th, in succession to Colonel F. D. G. Howell, D.S.O., M.C., Honorary Surgeon to the King, who, on completion of his temporary tenure of the appointment, will proceed to India to take up the appointment of Deputy Director of Medical Services at Army Headquarters, which will become vacant on December 26th. Colonel MacArthur will be succeeded as consulting physician to the Army and professor of tropical medicine at the Royal Army Medical College by Lieut.-Colonel J. Healy-Spencer, O.B.E., M.D., R.A.M.C.

### LEISHMAN PRIZE

Major F. McKibbin, R.A.M.C., has been awarded the Leishman Prize for the year 1933, consisting of a silver medal and a sum of £30, for his work in the interests of military hygiene. This prize is awarded annually for the best piece of work in any branch of medicine, surgery, or allied sciences, or in connexion with the general duties of the Royal Army Medical Corps, by an officer of the R.A.M.C. or Army Dental Corps, or by an officer removed from either of these corps but still on the active list.

### NORTH PERSIAN FORCES MEMORIAL MEDAL

Surgeon Lieutenant-Commander S. G. Rainsford, Royal Navy, has been awarded the North Persian Forces Memorial Medal for the year 1933 for his paper on "Laboratory Methods of Diagnosis of Brucella Infections" published in the *Journal of the Royal Naval Medical Service*, January, 1933. This is awarded annually for the best paper on tropical medicine or hygiene published in any journal during the preceding twelve months by a medical officer, of under twelve years' service, of the Royal Navy, Royal Army Medical Corps, Royal Air Force, Indian Medical Service, or of the Colonial Medical Service, provided the Memorial Committee considers that any of the papers published has attained a standard of merit justifying an award.

### DEATHS IN THE SERVICES

Colonel Robert Blood, late R.A.M.C., of Kingstown, County Dublin, died on April 2nd, aged 87. He was born on March 10th, 1847, was educated at Queen's College, Galway, and in the school of the Royal Irish College of Surgeons, Dublin, and graduated M.D. and M.Ch. in the long-defunct Queen's University of Ireland in 1871. Entering the Army as assistant surgeon on September 30th, 1871, he became colonel on August 10th, 1901, and retired on August 13th, 1904. In the old regimental days he served in the King's Regiment, the 8th Foot, now the King's Liverpool Regiment.

Surgeon Captain John Joseph Hogan Rooney, R.N. (ret.), died after a long illness in the Royal Naval Hospital, Chatham, on May 24th. He was educated at the Cecilia Street Hospital, Dublin, and in the school of the Royal College of Surgeons, Edinburgh, and took the Scottish triple qualification in 1901, after which he entered the Navy as surgeon. He attained the rank of surgeon commander on January 1st, 1917, and retired with an honorary step of rank as surgeon captain on August 18th, 1925. He served in the war of 1914-18, receiving the medals. He leaves a widow.

was removed were wrong, for while the protection had existed insulin had steadily become cheaper and cheaper. Denmark was able to produce insulin more cheaply than we were, partly because of the subsidized nature of the manufacture, partly because of the ease with which the Danes could obtain the pancreas, and partly because of the cheapness of the pancreas. In the hospital with which he was connected only British insulin was used. That was not from patriotic reasons, but because the doctors said that it was the best. There was the danger that it might pay Denmark to sell her insulin here at a loss for a period if she could succeed in closing down our chemical works.

Mr. CHAMBERLAIN said that the imposition of the duty of 33½ per cent. on imported insulin under the Safeguarding of Industries Act was a kind of accident. Insulin was not picked out by the Government as being an article of such importance to the country in wartime that it must be safeguarded. The omission of insulin from the list of fine chemicals was challenged by the Association of British Chemical Manufacturers. The Board of Trade took up the challenge, and opposed the inclusion of insulin. The matter went before the tribunal, which decided that insulin must be included in the list. The purpose of the association was to establish the principle that certain biological products should be defined as fine chemicals; having established that principle by the decision of the tribunal it was not particularly interested in insulin. The clause in the Bill was not introduced because of any improper behaviour on the part of the chemical manufacturers in this country. It was very much to the credit of the British manufacturers that they had not only continually reduced the price of insulin, but had produced insulin of a quality which had established a special reputation here and abroad. Representations had been made to him to the effect that diabetics felt that the price of insulin was higher than it would have been but for this duty. There were a considerable number of people to whom insulin was a matter of life or death. If these people thought, even mistakenly, that they had to pay more for it than was necessary by reason of the duty they would have a just cause of complaint. Since the announcement that the duty was to be repealed there had been a further reduction in price. The repeal of the duty left the British manufacturer free to make application to the Import Duties Advisory Committee for a duty on imported insulin. There would be an inquiry into the facts of the case, and if the committee came to the conclusion that diabetics would suffer they would, he imagined, make a recommendation accordingly.

The clause was ordered to stand part of the Bill.

*Water in Swimming Baths.*—Mr. SHAKESPEARE told Mr. D. G. Somerville, on May 31st, that a report on the purification of water in swimming baths was prepared by the Ministry of Health in 1929. This report emphasized the importance of clean water in public baths, and explained the best method of purification. Local authorities were aware of the recommendations in the report, to which attention would again be called in the forthcoming annual report of the Ministry. In the case of swimming pools not belonging to local authorities, the water, if impure, would constitute a nuisance under the Public Health Act, and local authorities would have power to deal with it.

*Specialists on Royal Commissions.*—In reply to Mr. Chorlton, on May 31st, Mr. BALDWIN said he had noted the views expressed by the Parliamentary Science Committee in a letter dated May 8th, which urged the inclusion of scientists and technicians in the personnel of all Royal Commissions, Departmental Committees, and other committees dealing with scientific and technical matters. He said it would be inadvisable to lay down a general rule. The importance of including scientists and technicians in appropriate cases was, and would be, borne in mind.

*Vaccination in the Navy.*—On June 4th Sir B. EYRES-MONSELL informed Mr. Groves that it was not the practice to allow persons to enter the Navy who were conscientious objectors to vaccination. All candidates on entry were required to declare their willingness to be vaccinated, or revaccinated and inoculated if necessary. Otherwise they were not accepted for entry.

## Medical News

The Queen has consented to open the new Students' Hostel at the London Hospital Medical College on Tuesday, July 3rd, at 3.30 p.m.

The Earl of Derby will distribute the prizes at St. Thomas's Hospital Medical School in the Governors' Hall, on Tuesday, June 26th, at 3 p.m. There will be tea and music on the terrace.

The annual general meeting of the British Science Guild will be held on Tuesday, June 12th, at 4 p.m., at the Royal Society of Arts, John Street, Adelphi, with the president, Lord Melchett, in the chair. The meeting will be followed by a popular lecture (illustrated by lantern slides and experiments) on "Friction," by Professor E. N. da C. Andrade, D.Sc. Tickets for the meeting and lecture may be obtained, free of charge, from the secretary of the guild, 6, John Street, Adelphi, W.C.2.

An exhibition, organized by the Rubber Growers' Association, will be held at the Hotel Metropole, Northumberland Avenue, W.C., on June 13th, 14th, 15th, and 16th, from noon to 8 p.m. Admission free.

The Fellowship of Medicine (1, Wimpole Street, W.) announces a lecture-demonstration on "Oedema and Diuretics" at 11, Chandos Street, W., on June 12th, and another, on "Renal Insufficiency," for June 19th. There will be a course in proctology at St. Mark's Hospital from June 11th to 16th, and a course in medicine, surgery, and the specialties at the Prince of Wales's Hospital from June 11th to 23rd; the latter will be repeated from June 25th to July 7th. Forthcoming courses include cardiology at the National Heart Hospital, June 25th to July 7th; diseases of children at the Children's Clinic, June 25th to July 7th; ophthalmology at the Central London Ophthalmic Hospital, July 2nd to 7th; and a week-end course in medicine and surgery at the Metropolitan Hospital, June 30th and July 1st.

The Faculty of Medicine of the University of Paris has arranged a post-graduate course in cancer for the month June 11th to July 12th. In addition to formal lectures, discussions, and clinics in the mornings, there will be demonstrations of surgical, x-ray, and radium treatment. The fee is 300 francs, and a certificate will be awarded at the end of the course. Inquiries should be directed to the Faculty of Medicine, Salle Béclard, Paris.

The next conference of the British Health Resorts Association will be held at Cromer, at the invitation of the urban district council, supported by the local medical practitioners and the Norfolk Branch of the British Medical Association, from Friday, June 29th, to Sunday, July 1st. There will be discussions on "The Seaside Resort in the Treatment of Respiratory Diseases," to be opened by Dr. R. A. Young, followed by Dr. L. S. T. Burrell, and "Climatic and Allied Factors in the Incidence of Disease and its Treatment on the East Anglian Coast," to be opened by Dr. R. Fortescue Fox.

A congress on *B. coli* infections and intestinal intoxications will be held at Châtel-Guyon on September 23rd and 24th, and will comprise medical, surgical, therapeutic, and hydrological sections. Among the topics to be considered are septicaemia of *B. coli* aetiology, also the diseases of children caused by this organism, and its localization in the genital organs. Other subjects for discussion include hydromineral therapy in intestinal infections and intoxications, nervous complications in these conditions, and the gynaecological aspects of *B. coli* infection. The fee for membership of the congress is 50 francs. Specially reduced railway fares and hotel charges are available for those who attend. Further information is obtainable from the administrative secretary of the congress, M. Juin, or Dr. P. Balme, Les Grandes Thermes, Châtel-Guyon.

The third French Congress of Gynaecology will be held in Paris from July 7th to 10th, with Professor Koenig of Geneva as president of honour, and Dr. André Binet of Nancy as president.

The King has approved the grant of the Polar Medal in bronze, with clasp inscribed "Antarctic 1929-31," to Dr. William W. Ingram, M.C., who was a member of the British, Australian, and New Zealand Antarctic Research Expedition, 1929-31.

Owing to the present financial crisis the Austrian Minister of Education has decided to reduce the number of university institutes. One of the two oto-rhino-laryngological clinics has already been closed, as well as one of the three gynaecological clinics.

A lecture on the theory and practice of contraception will be given to medical students and practitioners by Dr. Gladys Cox on Tuesday, June 12th, at 6 p.m., at the Walworth Women's Welfare Centre, 153A, East Street, S.E.17. Tickets must be applied for in advance.

The second centenary of the birth of the Spanish surgeon Antonio de Gimbernat is being celebrated this month by the Surgical Society of Catalonia, when a prize of 1,500 pesetas will be awarded for the best biography of Gimbernat.

The summary of deaths among medical practitioners during 1933, published in the *Journal of the American Medical Association*, shows that the four commonest causes of death were heart disease (1,131), cerebral haemorrhage (360), pneumonia (313), and cancer (286).

The prize of 5,000 Belgian francs offered by *Bruxelles-Médical* for the best work published in its columns during 1933 has been divided between Professor Bessemans, rector of Ghent University, and Dr. Dumont, a colonial medical officer.

Dr. Jean Charcot, the well-known explorer and member of the Académie de Médecine, has been nominated Grand Officer of the Legion of Honour.

Professor W. His has been awarded the Goethe Medal and nominated honorary doctor of philosophy in the University of Berlin.

## Letters, Notes, and Answers

All communications in regard to editorial business should be addressed to **The EDITOR, British Medical Journal, B.M.A. House, Tavistock Square, W.C.1.**

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## QUERIES AND ANSWERS

### Orchitis After Prostatectomy

"X. Y. Z." writes: A man aged 72 had a suprapubic prostatectomy done a year ago for hypertrophy. Prior to his operation he had frequent acute attacks of epididymo-orchitis. These attacks still persist. Can any reader suggest what form of treatment one might adopt? The patient is strong and active; no history of gonorrhoea, or anything to suggest malignancy.

### Worms in White Fish

"RURAL G.P." writes from Ireland: I have on several occasions found small "wire-worms" in the flesh of white fish such as codling. Are such worms found in all fish or in some only; are they completely killed by ordinary cooking; and, if swallowed alive, would they become parasitical in man?

### Movement of Needles in the Tissues

Dr. C. BELCHER (Birmingham) writes in reply to "Sceptic" (May 12th, p. 880), who asks whether foreign bodies move in the tissues: The following cases will prove that such is a fact. Foreign bodies do travel from the original entry. A youth consulted me for a pain in his right side, not severe, but worse at one time than another. On his first visit I found little to account for his trouble. On his second visit I went over him more carefully, and passing my hand over his side felt a prick. I examined the part again, and still experienced the sharp prick like that of a pin; and, looking at the spot, which was in the posterior axillary line at a level with the first lumbar vertebra, I saw a small discoloured spot, the point of a pin or needle; but he could give me no information as to how it got there. The following evening he returned, with his mother. I explained to her what I had discovered and asked permission to remove it, which I did; it was a darning needle about two inches long, blackened, but quite serviceable. Immediately the woman saw it she recognized it, and exclaimed "I remember it very well; when he was a baby, not having a safety-pin handy, I fastened his shawl in front with the needle, put him in the cradle in a hurry as I was called away, and forgot it until I came to undress him and then thought about the needle. Look as I would I could not find it." The other case was a man with a small beershop, who came to me complaining of numbness and tingling of the fingers of his left hand. I could see nothing in the hand to account for it, and so examined his arm and upper arm; when I put my hand in his left axilla I felt a slight ridge, and when I pressed upon it he said that this started the tingling in his fingers. I recognized that whatever it was this was the cause of his trouble, and intimated that he had got some substance into his axilla and asked him how it had got there. He refused to admit anything being there: never, to his knowledge, had he had anything go into his side. I suggested he might let me put a needle under the skin (as the foreign body was only skin deep), which he did, and I distinctly felt a hard substance beneath. Without any anaesthetic, local or otherwise, I made a small incision, and with the forceps withdrew a triangular splinter of glass one and a half inches long. I showed it to him, and he was dumbfounded. On coming back to have it dressed he told me he had talked it over with his wife, when she remembered that on a windy day the previous summer the glass door leading to the shop had blown to and he had put his shoulder to it to prevent slamming, but he had smashed the glass pane. He felt nothing, but she noticed a spot of blood on the top of the shoulder of his white shirt afterwards, and mentioned it to him, but they could see no wound.

### Income Tax

#### Review of Past Years

"JUNIUS" asks how many years is the inspector authorized to go back for investigation of accounts.

\*\* The Income Tax Acts do not give the inspector much authority in the matter, but they give the Commissioners the right of making assessments for the six previous years. In certain circumstances those assessments may be confirmed wholly or partially in treble duty. Consequently it is advisable to meet any reasonable requests by the inspector as there is in the background the possibility that refusal may lead to action by the Commissioners, which may in effect enforce production of the evidence requested by the inspector.

### Motor Car Transactions

"W. A." bought a car in 1927 for £685 and sold it in May, 1933, for £35, the reduced value then being £231. He bought a new car for £405 in replacement, but sold it in October for £295, and may not buy another. He has been allowed depreciation at 15 per cent. per annum.

\*\* He is entitled to obsolescence allowance in respect of the replacement in May, 1933, the amount being £231 - £35 = £196. That sum can be treated as a professional expense of the year 1933. No obsolescence allowance is due in respect of the subsequent transaction unless and until another car is purchased in replacement of the one sold in October, 1933.