

Need for Research

Dr. M. W. GOLDBLATT referred to the general ignorance of the effects of industrial products on the worker. Attention was drawn to the dangers often only after calamities had occurred. The necessity of systematic research in industrial medicine could not be too strongly emphasized. The problem of the worker with some obscure and unsuspected idiosyncrasy might appear acutely at any time, even when the main facts about a given product might have led to the belief that no harmful effects were to be expected. Criteria for the detection of susceptible subjects, particularly in regard to skin hazards, should be worked out, and such workers allocated to employment remote from exposure to the, for them, hazardous products. It was not sufficient to conclude that a man was suffering from an industrial disease because he presented a symptom of a condition which might arise from his work. It was similarly unwise for the dermatologist to conclude that a skin irritation was due to a dyed garment because on previous occasions he had come across cases attributed to this dye. This was so because the same name often referred to dyes of very different composition, and unless the dermatologist discovered the precise composition of the particular product involved he was likely to be misled. Describing some of the practical difficulties of carrying out investigations in industry, Dr. Goldblatt said that the co-operation of managements and workmen could not be obtained unless the investigation did not interfere with production on the one hand and the morale of the workmen on the other. The worker, already more than a little suspicious of medical service in industry, had to be handled with extreme care if useful results were to be secured. In certain industrial conditions routine blood, urine, and x-ray examinations had to be performed on the workers, and the difficulty of organization and administration of schemes to effect these was not readily realized by medical men whose experience was limited to hospital or private practice.

Dr. DAVIDSON referred to old and new risks in old industrial methods, the new risks following new uses of old poisons, and the dangers of new industrial processes. Mr. H. HEAP indicated how modern views on lead poisoning were being influenced by newer and more accurate methods of chemical analysis, and the need for estimating the many mineral elements that were normally found in the body.

OEESOPHAGEAL SURGERY

At a meeting of the Royal Medico-Chirurgical Society of Glasgow on December 4th, 1936, with the president, Mr. G. H. EDINGTON, in the chair, Professor GREY TURNER gave a talk on oesophageal surgery, which was illustrated by lantern slides. It was only possible, he said, to deal with some few aspects of the surgery of this out-of-the-way part of the body.

Professor Grey Turner first referred to examples of achalasia or cardiospasm which had resisted treatment by dilatation, and in which the patients were getting steadily worse. He suggested that this condition was found in three stages: (1) when it was simply a matter of neuromuscular imbalance; (2) later, when there was some super-added inflammatory trouble; and (3) still later, when inflammatory trouble had led to fibrosis producing an ordinary cicatricial narrowing. He gave particulars of cases, probably belonging to Group 1, in which he had merely mobilized the lower end of the oesophagus and in which the patients had been very greatly relieved, although they still suffered occasionally from quickly passing attacks of what they called spasm. On that account it would probably be better to combine with operative intervention the denervation of the lower end of the oesophagus, as advocated by Mr. Knight. In the cases which had gone on to a later stage improvement often followed gastrostomy, but of course that could never be allowed to be permanent, and he had made

an anastomosis between the oesophagus and the cardiac end of the stomach in a series of cases with lasting good results.

Cardioplasty

In the third group, where there was definite cicatricial narrowing of the lower end, a plastic operation of the nature of cardioplasty had also proved most effective. Professor Grey Turner then spoke of the treatment of cases of simple cicatricial stricture in the middle of the oesophagus, which usually followed the swallowing of some corrosive poison. He had dealt with six of these cases in which treatment by intermittent dilatation, often carried out by experts under oesophagoscopy, had not succeeded in bringing about lasting relief. In his cases he had taught the patients to pass their own bougies, and by great patience and perseverance on the part of the house-surgeons and nurses, as well as fortitude on the part of the patient, they had all succeeded so well that they might be looked upon as permanent cures. After a time the improvement in the capacity of swallowing introduced a new automatic dilatation, which probably aided the permanence of the instrumental dilatation.

Local News

SCOTLAND

Department of Health

Dr. James L. Brownlie, Chief Medical Officer to the Department of Health for Scotland, who was on sick leave for some time, has now resigned from this post, but his successor has not yet been appointed. Dr. Brownlie took up the post some four years ago in succession to the late Dr. J. Parlange Kinloch, having been at that time bacteriologist and pathologist to the county of Lanark. A medical student of Glasgow University, he graduated M.B., Ch.B. there in 1913, and after holding resident appointments in the Glasgow corporation hospitals proceeded to the D.P.H. of Cambridge in 1916 and in 1918 to the M.D. of Glasgow, when his thesis on "The Problem of the Diphtheria Carrier" was highly commended. He was for six years assistant bacteriologist in the laboratory of Glasgow corporation and for two years one of the medical officers in the Department of Health before taking up the post of bacteriologist to the county of Lanark. He has contributed numerous papers to current medical literature.

St. Andrews Institute for Clinical Research

The seventeenth annual report of the Sir James Mackenzie Institute for Clinical Research at St. Andrews dealing with the year to October, 1936, emphasizes the general purposes for which this Institute exists—namely, to investigate disease before the occurrence of structural changes in the body, to investigate symptoms and minor maladies, to study conditions under which patients live, and to conduct research into the early symptoms of consumption and of ill-health in children. During the year sixty-two new cases were recorded and further notes were added to 967 cases already under observation. A classification of the records at the end of the year showed that additions had been made in steady sequence to 52 per cent., while 25 per cent. required bringing up to date and in 23 per cent. contact with the patients had been lost. In the children's department the Institute continues the records made up to the age of 2 years by the child welfare centre of the local authority and continues a series of notes on the children several times each year until these come under the school medical service. The report claims that the organization of the Institute has anticipated many of the recommendations now made by the recent Departmental Committee on Scottish Health Services, for it has conducted during several years in St. Andrews a medical

service supported by laboratory and specialist services and based upon the work of the general practitioner. The financial statement of the Institute shows for the year an income of £1,256 and expenditure of £1,461, but its assets amount to £15,389.

District Nursing in Scotland

At the annual meeting of the Scottish Branch of the Queen's Institute of District Nursing held in Glasgow on December 18th, Lord Provost John Stewart presided and Mr. J. M. Vallance, assistant secretary to the Department of Health, spoke of the important work for the public carried on by district nurses. He said there was now an army of over 900 fully trained nurses who played a great part in providing a health service for the country. The county federation that had taken place during the past year had further strengthened the activities of district nursing associations. With regard to the medical service for the Highlands and Islands the grants paid to nursing associations had amounted to £18,000 in 1935 as compared with £12,000 in 1925 and £6,000 in 1919. About 200 nurses were engaged in work in the Highlands and Islands, and the great success of medical service in this area was due to the complete co-operation that existed between doctors and nurses. The Maternity Services (Scotland) Bill now before Parliament was an attempt to solve the most serious problem that had confronted the Department for many years, and Mr. Vallance expected it would make a big reduction in infantile mortality. He considered that it would also strengthen voluntary nursing associations by arrangements between them and local authorities. Lady Susan Gilmour, secretary of the Scottish Branch, said she expected that district nurses would do their share in helping the national work of reducing deaths among mothers, especially in the country areas. District nurses during the past year had attended 14,521 maternity cases, or one-sixth of the total for Scotland, and the mortality amounted to 3.5 per 1,000 births as compared with 6.8 of cases otherwise attended.

ENGLAND AND WALES

The University College Hospital Extensions

Extensions of University College Hospital, Gower Street, close to the new home of the University of London, were opened last month by the Duke of Kent. The extensions comprise a paying patients' wing, a new ante-natal and infant welfare department, an x-ray diagnostic department, and homes for the nursing and domestic staff. In performing the ceremony the Duke of Kent emphasized the importance of the provision for paying patients, mentioning that University College Hospital had not been as fortunate as some other institutions in finding a generous donor to provide such accommodation, and therefore had taken upon itself the responsibility of erecting the building. Sir Herbert Samuelson, chairman of the hospital, stated that the new extensions had cost about £300,000, two-thirds of which had still to be raised. The new wing for paying patients claims to be one of the finest of its kind ever erected. Accommodation is provided for seventy-seven patients, all of whom are housed in separate rooms, except in two four-bed wards, which can be converted into separate cubicles when desired. All of them are attractively decorated, and some which have a south-westerly aspect have large balconies suitable for open-air treatment. On the ground floor, in addition to reception, waiting, and consulting rooms and offices, the new x-ray department is installed. The operating theatres, of which there are three, with ancillary accommodation, and the pathological laboratories are situated on the sixth floor. The hospital is said to be the first in the country in which all the theatres and sterilizing rooms, and indeed all the seven floors, are equipped with an automatic supply of constant running hot and cold, distilled, and sterile water. The air which comes into the operating theatres is filtered

and passed through radiators to warm it. An alternative system of lighting is provided, coming on automatically in the event of breakdown of the main supply. On the top floor there is a solarium for convalescent patients, and a space which can be used for a badminton court for the nurses and for exercise for the patients. The new ante-natal and child welfare department, which was opened in part, is another example of careful planning. The post-natal clinic includes four examination rooms, with three cubicles for suspected cases of infectious or contagious disease, and these are so arranged as to have direct access to the street, in order that such cases can be removed at once by ambulance without retracing their way through the department.

Leeds Students' Union

It has for long been an aspiration on the part of the authorities of the University of Leeds and of the past and present students that adequate accommodation should be made for the Students' Union. When the great scheme for the extension of the buildings of the University was launched, a scheme which has been recently referred to in these columns (*Journal*, December 19th, 1936, p. 1282), this was one of the objects mentioned. The sum of £50,000 was spoken of as necessary for the purpose. The matter was taken up by the past and present students and a sum of about £4,000 has been collected. Nothing is more likely to encourage generosity on the part of those who have the welfare of the students at heart than action of this kind, and it may well have been this that influenced Mr. W. Riley-Smith of Tadcaster to give £25,000 towards the scheme last June. At the annual dinner of the Leeds University Old Students' Association, which was held on December 19th, 1936, it was announced that a Treasury grant of £15,000 had been voted towards the object. Plans have been in readiness for some time and will soon be put in hand. An excellent site has been secured within what will be the ring fence of the greatly extended university buildings. As the distance between these and the more strictly medical buildings, such as the Medical School, the Institute of Pathology, the School of Dentistry, and the General Infirmary, is not great, it is hoped that these Union buildings may act as a stimulus to that intimate relationship between all the faculties which is the essence of a university.

Medical Society of London

The second half of the 164th session of the Medical Society of London opens on January 11th with a pathological meeting at 8 p.m. Discussions will be held at 11, Chandos Street, W., at 8.30 p.m., as follows: January 25th, value of experimental and laboratory training in medical education; February 8th, treatment of facial paralysis; February 22nd, aetiology and diagnosis of jaundice; March 8th, effects of prolonged dorsal decubitus; March 22nd, consideration of some occupational diseases. The Lettsomian Lectures on "Surgery of the Thyroid Gland" will be delivered by Sir Thomas Dunhill on February 15th and 24th and March 1st, at 9 p.m. The annual general meeting will be held on May 10th, at 8 p.m., and will be followed by the Annual Oration on "Perspective and Poise in Practice," by Dr. R. A. Young, and a conversazione.

Birmingham Health Congress

The Earl of Dudley will preside over the Health Congress of the Royal Sanitary Institute at Birmingham from July 12th to 17th. The Minister of Health (Sir Kingsley Wood) will address a general session on July 13th. The deliberations of the Congress will be divided among eight sections dealing with: preventive medicine; engineering, architecture, and town planning; maternity, child welfare, and school hygiene; veterinary hygiene; national health insurance; hygiene in industry; tropical hygiene; sewage disposal. There will also be conferences of representatives of local authorities, medical officers of health, engineers and surveyors, sanitary inspectors, and health visitors.

Students' Representative Council and of the Royal Medical Society in Edinburgh. After holding a post as tutor in clinical medicine in Edinburgh Royal Infirmary he took up the subject of pathology and became pathologist to that institution, and from 1892 held the post of lecturer in pathology at the School of Medicine of the Royal Colleges in Edinburgh. He joined the Royal College of Physicians of Edinburgh as a Member in 1891, proceeding to the Fellowship in 1892.

In 1899 he was appointed professor of pathology and bacteriology at Birmingham University, a post which he held until 1919. During his active years Professor Leith had been examiner in pathology and bacteriology for the Indian Medical Service and for the Universities of Cambridge, Bristol, Glasgow, and Sheffield, as well as for the Royal College of Physicians of Edinburgh and the Royal College of Veterinary Surgeons. He was celebrated as a teacher and as a pathologist, and his publications included many contributions to medical and scientific journals. He may be described as a great all-round man, for in his Edinburgh days he was a keen tennis player in the celebrated Whitehouse Tennis Club, and he was also a member of the polo club at Murrayfield and of the Alpine Club. When he retired from the chair at Birmingham in 1919 he spent the winter months regularly at Cannes and the summer at Gullane, Scotland, where he was a well-known figure on the golf links. Professor Leith was also a well-known collector of china, in which he was regarded as a connoisseur, and some years ago he divided his valuable collection of china between Birmingham Art Gallery and the Royal Scottish Museum in Edinburgh. He was a man of many friends, and his death will be widely regretted. He joined the British Medical Association in 1888, was vice-president of the Section of Pathology at the Toronto Meeting in 1906, and president of the same Section at the Birmingham Meeting in 1911. In 1934 he made a donation to Birmingham University of £1,000 as foundation for a prize in pathology. His portrait hangs in the great hall of the university at Edgbaston.

SIR JOHN ROBERTSON

Dr. JAMES F. BRAILSFORD writes: With the passing of Sir John Robertson one of the great pioneers of preventive medicine has left us. Only those who worked with him can appreciate how devoted and untiring he was in this labour. There was no sphere of public health work in which he did not take a leading part, and we owe to him a great measure of the success and benefit which this work has achieved. Until his death he actively discharged his duties as professor of hygiene and public health at the University of Birmingham, a post which he had held for nearly a quarter of a century. He organized and took a large part in courses of training for all branches of public health service. His popular lectures secured the willing co-operation of all sections of the public.

He was a great teacher, who loved his work and inspired his students with a desire to obtain the goal which he so ardently desired and for which he so faithfully and unsparingly worked. But above all he was a kindly man, possessed of a charming old-world modesty and courtesy of manner which endeared him to all. Easy of approach to all and ready at all times, no matter how sorely pressed by his manifold duties, to give his sympathetic hearing and advice, there must be many of us who owe to him not only advice in the planning of but also much support in our early careers. We mourn his loss and extend our sympathy to his wife and children. In the words of the leader in the *Birmingham Mail*: "No one can measure the boon which he conferred upon the community. His memory will be preserved on the tablets which record the names of great public servants, professional and voluntary, for his work was at no time and

in no wise bounded by the limits of his official responsibilities, great though these were."

We regret to announce the death of Dr. EDWARD JAMES LLOYD, for many years a leading practitioner at Bangor, North Wales. He was born in 1850, and studied medicine at St. Bartholomew's Hospital and Aberdeen, graduating M.B., C.M.Aberd. with honours in 1873. He proceeded M.D. in 1875, and became M.R.C.S.Eng. in 1877. Immediately after qualifying he acted as civil surgeon in the Transport Service of the Ashantee Expedition. In later life he reached the rank of surgeon-colonel to the 1st Cheshire and Carnarvonshire R.G.A.Vol., receiving the Volunteer decoration. Dr. Lloyd was for twenty years surgeon to the Carnarvonshire and Anglesea Infirmary, and on retirement from the active staff was elected consulting physician. He joined the British Medical Association in 1873 and was president of the North Wales Branch in 1888. He was also a past-president of the Menai Medical Society. The funeral, at Bangor on December 18th, was largely attended.

We regret to record the death in London on December 22nd, 1936, of Dr. EDWARD FULLER MARTIN of Weston-super-Mare, in his eightieth year. Dr. Martin was the son of the late Dr. Edward Martin, and was born at Bristol in 1857. He received his medical education at Edinburgh University, where he graduated M.B. in 1879 and received the diploma of membership of the Royal College of Surgeons of England, and in 1895 he proceeded to the M.D. and C.M. degrees. Dr. Martin settled in general practice in Weston-super-Mare, becoming surgeon to the hospital there, and on retirement from the active staff in 1927 was elected consulting surgeon. He had been a member of the British Medical Association since 1880.

The Services

PARKES MEMORIAL PRIZE, 1936

Major E. F. W. Mackenzie, O.B.E., M.C., R.A.M.C., has been awarded the Parkes Memorial Prize for 1936 for his investigations into the ammonia-chlorine process of water purification in the field, coupled with research carried out by him in connexion with food supplies in India. By this work Major Mackenzie has achieved much in the advancement of military hygiene. The prize is awarded annually to the officer who is considered by the committee to have done most to promote the advancement of naval or military hygiene by professional work of outstanding merit, and is open to medical officers of the Royal Navy, the Army, and the Indian Army, with the exception of the professors and assistant professors of the Royal Naval Medical College, Greenwich, and of the Royal Army Medical College, London, during their term of office.

GREENWICH HOSPITAL PENSION

A Greenwich Hospital pension of £50 a year has been awarded to Fleet Surgeon C. S. Facey, R.N., retired, in the vacancy created by the death of Surgeon Captain P. E. Maitland, R.N., retired.

DEATHS IN THE SERVICES

Lieut.-Colonel JAMES TIDBURY, O.B.E., R.A.M.C. (retired), died at Woking on December 22nd, aged 84. He was born on July 4th, 1852, was educated at Queen's College, Cork, and at University College, London, and graduated M.D., M.Ch., and L.M. of the Queen's, later the Royal, University of Ireland, in 1877. Entering the Army as surgeon on February 3rd, 1878, he became lieutenant-colonel after twenty years' service, and retired on June 25th, 1898. He served in the Egyptian campaign of 1882, was present at the action of Tel-el-Kebir, and received the Egyptian medal and the Khedive's bronze star. While on the retired list he was employed at Winchester. He rejoined for service in the war of 1914-18, and early in the war was employed in recruiting and later was in charge of the Woking Military Hospital.

Universities and Colleges

UNIVERSITY OF CAMBRIDGE

At a congregation held on December 19th, 1936, the following medical degrees were conferred:

M.D.—E. W. P. Thomas, J. J. Keevil.
M.B.—A. G. V. Aldridge, J. H. Conyers, C. W. C. Karran, I. C. Robertson.
B.CHIR.—*S. J. R. Reynolds, E. E. Pochin, H. S. Mellows, J. Woodrow.

* By proxy.

The following candidates have been approved at the examination indicated:

THIRD M.B.—*Part I (Surgery, Midwifery, and Gynaecology)*: C. D. Anderson, D. A. P. Anderson, E. F. Aubert, A. M. Barry, F. G. A. Beckett, A. G. Bellamy, I. G. Braddon, A. S. J. Bradford, H. A. Brook, C. T. A. Burgess, J. H. Burkinshaw, R. D. Caton, N. F. Coghill, F. S. Cosh, F. M. Crawshaw, A. C. Cunliffe, S. B. Darbishire, C. M. Dickens, E. S. Dismorr, R. Edwards, J. S. Ellis, E. M. Evans, J. N. Fell, G. M. Fleming, E. B. French, J. C. Gilson, C. W. C. Gough, I. A. Guest, H. Haigh, J. N. Horne, C. W. Hutt, N. D. Jekyll, W. H. R. Jeremy, P. Kidd, G. J. G. King, A. P. Kitchin, J. I. H. Laurie, A. D. Ledward, R. G. M. Longridge, T. P. H. McKelvey, R. W. Markham, A. H. Masina, R. M. Miller, B. D. Molesworth, R. C. Neville, L. B. Paling, A. K. Pardy, M. T. Parker, E. A. Pask, G. O. Richardson, A. Rothwell, C. G. Scorer, C. J. S. Sergel, K. M. M. Sheldon, A. W. Stewart, C. E. Watson, R. W. Watts, R. R. Wilson, L. A. C. Wood, G. H. Wooler, G. E. Yardley.
Women: M. B. Billington, G. M. S. Caldwell, C. E. Peaker. *Part II (Principles and Practice of Physic, Pathology, and Pharmacology)*: A. M. Barry, K. E. Bond, R. S. Castle, K. W. Donald, F. S. A. Doran, G. W. N. Dunn, J. S. Ellis, A. B. Evans, D. G. Freshwater, E. A. G. Goldie, T. E. Johnson, R. G. M. Keeling, O. C. Lloyd, T. E. S. Lloyd, G. E. Loxton, H. C. Maclaren, C. McNeil, H. K. Meller, A. J. Moon, W. S. Nutt, W. V. Owen, B. C. M. Palmer, A. M.-M. Payne, W. L. Petter, E. H. Platts, G. Rigby Jones, V. C. Robinson, K. W. B. Rostrom, A. Rothwell, H. Sirota, L. W. Spratt, R. H. Taylor, C. E. Watson, A. S. Wigfield, J. Woodrow.
Women: M. E. Barnard, A. F. M. Briggs, F. Pollecoff.

The Vice-Chancellor gives notice of the forthcoming appointment of a university demonstrator in pathology, whose duties will begin not earlier than April 1st. Particulars of the stipend and duties may be obtained from Dr. F. J. W. Roughton, Physiological Laboratory, Cambridge.

UNIVERSITY OF LONDON

V. S. Mangalik has passed in the examination for the Academic Post-Graduate Diploma in Clinical Pathology, and P. J. B. Murphy in the examination for the Academic Post-Graduate Diploma in Medical Radiology.

UNIVERSITY OF BIRMINGHAM

The following degrees were conferred at a congregation held on December 18th, 1936:

M.B., Ch.B.—G. S. Adams, J. H. Austin, Margaret B. Dow, Lilian M. Fogarty, A. H. Khan, J. Lockley, G. W. Phillips, D. Senzer.

UNIVERSITY OF BRISTOL

The following candidates have been approved at the examinations indicated:

M.D.—H. E. Pearse.
FINAL M.B., Ch.B.—Coralie W. Rendle-Short (with distinction in obstetrics and public health), L. Schnipelsky, E. Want. *In Group II (completing examination)*: Ursula G. Hewitt.

UNIVERSITY OF MANCHESTER

The following appointments have been made: *Lecturers in Surgery*: H. H. Rayner, M.B., Ch.B., F.R.C.S., W. H. Hey, M.B., Ch.B., F.R.C.S., J. P. Buckley, M.D., M.S., F.R.C.S., W. R. Douglas, M.C., M.B., Ch.B., F.R.C.S., A. H. Southam, M.D., M.Ch., F.R.C.S., D. McK. Sutherland, M.D., F.R.C.S., A. Graham Bryce, M.D., D.P.H., F.R.C.S., R. L. Newell, M.D., F.R.C.S.; *Clinical Lecturer in Dermatology*: P. B. Mumford, M.D., F.R.C.P.; *Lecturer in Regional Surgery*: R. L. Newell, M.D., F.R.C.S.; *Lecturer in Medical Ethics and Conditions of Medical Practice*: Lawrence Kilroe, M.D.

The following candidates have been approved:

FINAL M.B., Ch.B.—*Part II*: Beryl A. Barlow, Hélène E. K. Booth, Muriel J. Brayshay, Violet Cohen, B. Flacks, J. A. Herd, C. B. Holland, V. T. Lees, A. E. Martin, W. S. Parker, A. Shashoua, H. B. Slater, A. M. L. Smith, J. Starkie. *Part I*: L. S. Anderson, L. Ballon, R. S. A. Beckett, C. D. Coe, J. H. Ferguson, W. S. Holden, R. B. Hollos, R. Jackson, G. B. Locke, J. R. Monks, D. A. F. Shaw.

THIRD M.B., Ch.B.—*Pathology and Bacteriology*: N. Altham, J. N. Appleton, Muriel I. R. ApThomas, H. B. Austin, T. M. Brand, W. W. Burnett, T. E. A. Carr, J. E. Coates, A. E. David, D. B. H. Dawson, T. B. S. Dick, A. M. Dickson, G. Garmany, K. Harrison, Kathleen M. Henderson, A. G. Heppleston, C. P. Heywood, Barbara M. Jessel, F. A. Langley, N. Levy, L. Linnell, D. Longbottom, Jean Mason, J. C. Mellor, A. Morgan-Jones, *S. Mottershead, *T. H. Norton, Mary B. Oakden, Lilian P. Parry, J. K. Rowson, E. Saunbury, M. R. Tomlinson, T. B. Whitehead, W. W. Wilson, Frances T. Wright. *Pharmacology*: Peggy Anderson, G. T. Ashley, T. G. Barlow, D. Bolchover, Irene M. Bower, Frances M. Bullough, R. Cocker, E. Consterdine, G. R. Crawshaw, Barbara H. Fiddian, J. H. Gifford, R. T. Grime, Joan Halstead, C. Hamwee, P. Haslam, Hannah Horton, W. L. R. Kenyon, J. Latham, Joyce Leach, E. Lee, *A. D. Leigh, R. A. Martin, Asa Mills, *M. D. Milne, A. S. Ogden, M. J. Parsonage, J. R. Platt, T. H. Redfern, J. C. A. Renshaw, E. Ridehalgh, W. E. Rigby, G. G. Robertson, B. Roditi, E. S. Rogers, M. S. Rowley, L. D. Rutter, Barbara M. Statham, F. W. Taylor, A. F. Williams, R. M. Winston.

DIPLOMA IN PSYCHOLOGICAL MEDICINE.—*Part II*: G. Williamson.
* With distinction.

UNIVERSITY OF DURHAM

The following degrees were conferred at a Convocation held in the College of Medicine on December 19th, 1936:

M.S.—H. B. L. Levy, T. Moore, L. M. Snaith.
M.B., B.S.—J. N. Alexander, Rachel Birk, Mary Buchan, W. S. Gale, R. M. Gray, H. Halson, B. D. Houston, L. Ison, G. S. Michelson, Margaret L. Osborne, E. V. Parker, E. D. Robson, J. W. G. Weddle, H. D. Welch, G. A. Wilthew.
D.P.H.—A. J. Muir, H. J. Peters, A. Swindale.

UNIVERSITY OF LEEDS

The annual report of the University, presented at a meeting of the Court held on December 23rd, 1936, records that during the past educational year the number of full-time students in attendance during the year was 1,663, the highest figure attained since the institution of the University, and an increase of exactly 1,000 above the number in attendance in the last year before the great war. In the Faculty of Medicine it was decided that as soon as possible Readers in Medicine and in Surgery should be appointed, so that the University might, by the appointment of whole-time clinical investigators, make its contribution to what has come to be one of the most promising methods of developing medical knowledge.

UNIVERSITY OF EDINBURGH

A graduation ceremonial was held in the Upper Library Hall on December 18th, 1936, when the following degrees were conferred:

M.D.—J. S. Brown (*in absentia*), †J. Bryant, *C. W. Clayson, A. D. Frazer, A. J. Galbraith, C. P. Hay, †I. C. Macdonald, Surgeon Lieutenant R.N., J. Meyer, A. M. Simson, Major, R.A.M.C. (*in absentia*), R. C. Speirs (*in absentia*), †J. M. M. Steven, R. H. Tait, W. H. F. Wilson.
PH.D. (*Faculty of Medicine*).—G. P. Matthews (*in absentia*).
M.B., Ch.B.—B. G. H. Balfe, W.-F. E. Baumann, R. C. Bellingham, N. R. Butcher, E. Christianson, W. Drummond, J. E. Farren, I. Ferguson, B. N. S. Gillette, M. Hurwitz, R. W. Irving, A. F. Maccabe, R. B. M'Martin, Frances I. B. Macmillan, H. Miller, Evangel H. Murcott, Jane K. Murray, L. Nandkeolyar, E. G. C. Orchard, M. B. Parhad (*in absentia*), W. Paterson, J. G. Paton, H. W. Porter, K. Ll. Pringle, J. A. F. Roberts, A. St. C. Robertson, D. N. S. Robertson, I. M. Shahin, V. J. R. Sheridan, A. Stadion, N. B. Stewart, D. A. Thomas, J. K. Thomson, S. Viravaidaya, R. M. White.

* Awarded gold medal for thesis. † Highly commended for thesis. ‡ Commended for thesis.

SOCIETY OF APOTHECARIES OF LONDON

The following candidates have passed in the subjects indicated:

SURGERY.—G. F. C. Harvey, G. G. Sahasrabudhe, J. S. Wood.
MEDICINE.—J. T. Boocock, J. S. Wood.
FORENSIC MEDICINE.—J. S. Wood.
MIDWIFERY.—J. R. Audy, J. M. Lea, J. E. R. Palmer, O. Rochlin.
The diploma of the Society has been granted to G. F. C. Harvey, J. M. Lea, and J. S. Wood.

ROYAL COLLEGE OF SURGEONS OF EDINBURGH

A meeting of the Royal College of Surgeons of Edinburgh was held on December 17th, 1936, when Mr. Henry Wade, President, was in the chair. The following candidates, having passed the requisite examinations, were admitted Fellows:

G. R. Butterfield, C. E. Thomas, A. L. Allen, C. P. Allen, W. H. Belford, D. L. C. Bingham, D. D. Campbell, J. P. Campbell, N. Chakravarty, C. D. Clark, G. D. Falconer, N. F. Greenslade, N. Heath, F. S. M. Heggs, C. P. Hudson, J. R. S. Lahz, D. K. Lennox, J. S. Lyle, A. Mukerji, B. F. Macfarlane, A. G. Palin, C. E. Roberts, R. D. Stronach, T. Wooldridge.

NATIONAL UNIVERSITY OF IRELAND

UNIVERSITY COLLEGE, CORK

The following candidates have been approved at the examinations indicated:

M.D.—J. G. O'Sullivan.
M.B., B.Ch., B.A.O.—B. J. O'Driscoll (first-class honours), T. J. Conran, M. J. Downing, D. Lehan, M. F. Magnier, P. F. O'Connor, J. W. Reade, Margaret M. M. Reynolds. *Part I*: T. Sheahan. *Part II*: J. J. McCarthy, D. J. G. Maher Loughnan, P. L. O'Neill.
D.P.H.—R. T. Ahern, J. J. Hurley, T. J. Mullins, T. P. O'Connor. *Part I*: M. J. McCarthy (second-class honours), J. O'Herlihy. *Part II*: T. P. O'Connor, J. J. Hurley (first-class honours).

Medical Notes in Parliament

Parliament rose for Christmas on December 18th. On that day the Royal Assent was given to the Expiring Laws Continuance Act, the Trunk Roads Act, and the Public Order Act. The House of Lords stands adjourned till January 26th and the House of Commons till January 19th.

The Geneva Convention Bill was read a first time by the House of Commons on December 16th. Various orders consequential on the Government of India and Burmah Acts, 1935, have been approved by both Houses, and a message from the King was received by Parliament on December 16th which announced that effect would be given to these decisions.

The Earsdon Joint Hospital District Bill was read a second time by the House of Commons on December 16th. It has been decided that the Liverpool United Hospital Bill shall originate in the House of Lords.

Preparation of the Factory and Workshop Bill has reached an advanced stage, and the Home Secretary hopes to introduce it shortly after the Christmas recess. This will be a codifying and amending Bill.

Unemployment and Malnutrition

Mr. GEORGE HALL moved on December 17th that the Unemployment Assistance (Determination of Need) Regulations, so far as they involved reductions in existing allowances, should be suspended. He said the operation of the regulations affected 520,000 householders, or with their dependants 1,500,000 people. He quoted a person charged with the care of the health of a large urban district in South Wales, who said that 76 per cent. of the pregnant and nursing mothers attended the clinics in that district, and the majority of these mothers suffered from malnutrition. Debilitated children were seen at the clinics, and many women could not breast-feed their children owing to malnutrition. Of 270 children in the schools who received one meal a day 215 were still in a state of malnutrition, and of 812 receiving milk only 310 were normal.

Mr. BOOTHBY said medical and scientific opinion which was beyond reproach declared that 20 per cent. of the population was undernourished. Recruiting figures bore this out.

Mr. ERNEST BROWN said the Government had paid out this year from the employment exchanges nearly £80,000,000, of which nearly £40,000,000 was paid on the assistance side. In the past twelve months £80,000,000 had been paid in South Wales for benefit and assistance. Under the new regulations more than a third of the cases would get increases. The process of reviewing the cases was nearing completion, and no applicant had yet received a notice that his allowance would be decreased as the result of the new regulations. Mr. Hall's motion was rejected by 218 to 135.

Distress in the Highlands and Islands

Mr. ROBERT GIBSON opened a debate on December 16th on distress and depopulation in the Highlands.

Mr. MALCOLM MACMILLAN read a petition from inhabitants of a roadless district in Harris, who declared that "in cases of illness it is at least a matter of hours before the doctor can be brought, and if the patient has to be removed to hospital it means heavy labour for the bearers and unspeakable torture for the sufferer before the road-end can be reached." He instanced a confinement, during which one twin was born in Harris and the other several hours later in the town of Stornoway, whither the mother had to be carried over bad roads after enduring a boat journey. In the island of Scalpay there was only one nurse and no doctor. Outside Stornoway, Tarbert, and the few smaller towns of the Hebrides there was no communal water supply, and in North Uist the water was taken from dip-holes or small lochs fouled by cattle.

Mr. CASSELLS spoke on old and bad housing in the Highlands.

Mr. ELLIOT said that in the Highlands since 1919 over 6,000 houses had been built with State aid. Some 3,000 had been improved under the Rural Workers Acts, and the Department of Agriculture had made loans to 4,000 more persons for improvement of their houses. The adjusted death rate in the Highlands was about four-fifths of the death rate for Scotland as a whole. The sickness rate among the insured population was only 70 per cent. of that for the country as a whole. Infant mortality in the Highlands and Islands was far below that for the country as a whole—32 per cent. below. These were not the signs of a dying and decaying race. They were the signs of a race which had undergone and was undergoing hardships and required that its lot should be improved. The Highland population was susceptible to tuberculosis, but not so much in the Highlands as when the Highlander moved into the crowded cities. The Government intended to examine the problem further. The Scottish Development Council, in consultation with the late Secretary of State, had set up a Highlands Subcommittee. That subcommittee was now engaged on its investigations. He hoped that it would bring forward far-reaching proposals. They would receive the careful and sympathetic consideration of the Government.

Housing in Glasgow

Replying on December 18th to a discussion about housing in Glasgow Mr. ELLIOT said he did not think 2,000 houses would be built in Glasgow this year nor 3,000 next year. For some time past representations about unfit houses had been restricted till the mass of condemned houses had been dealt with. It was hoped within six months to resume the practice of making representations in regard to unfit houses. There was enough land in possession of Glasgow Corporation for two years' building at the rate of 6,500 houses a year. Scotland had nearly completed 200,000 houses, but had not yet made a serious inroad on the problem. In Glasgow 4,638 single-apartment houses were each occupied by four or more persons and 9,786 two-apartment houses were occupied by six or more persons, not taking account of children under 1 year. For Scotland as a whole 23 per cent. of the houses were overcrowded against 3.8 per cent. for England and Wales. In the last three years roughly 20,000 houses a year had been built in Scotland, but in the past year not much over 15,000, and only some 20,000 houses were under construction. That was not a record of which any Secretary of Scotland could be proud. There were 30,000 families in Glasgow living in conditions which provided only one water-closet for four families. The Government proposals in the new block grants would ease the financial position of local authorities. They had 40,000 families averaging more than three families to a water-closet and 10,000 houses condemned as unfit in Glasgow. There were 600 houses scheduled for demolition that had not been demolished. May and June would pass before the medical officer could begin to deal with other houses for demolition. That was not common sense, it was not business, it was not investment.

Gas-proofing Rooms.—Mr. GEOFFREY LLOYD announced on December 17th that the gas-proofing of rooms in private houses would be further dealt with in the handbook in course

BRITISH MEDICAL JOURNAL

THE JOURNAL OF THE BRITISH MEDICAL ASSOCIATION

SUPPLEMENT

containing

Current Notes on the Work of the Association

Reports of Conferences

Meetings of Branches and Divisions

General Medical Council

Public Health Notes. Post-graduate News

National Health Insurance Proceedings

Naval, Military, and Air Force Appointments

Correspondence, etc.

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