

Local News

ENGLAND AND WALES

Amalgamation of Bristol Hospitals

At a meeting held on February 23, with Colonel P. G. Robinson, president, in the chair, the governors of the Bristol Royal Infirmary gave the committee power to amalgamate that institution with the Bristol General Hospital. This proposal had already been approved by the committee of the General Hospital, and the governors of that institution will be invited to confirm it at a special meeting on March 15. The resolution adopted on behalf of the Royal Infirmary on February 23 makes provision for central administration of the two hospitals, the pooling of funds and finance, the formation of one joint honorary medical staff, and such centralization of functions as may be agreed upon. Professor Rendle Short, who seconded the resolution, said that this had in the first place gone before a united meeting of the medical staffs of both institutions a few months ago and had been passed unanimously.

New Dental Hospital for Manchester

At the annual meeting of the governors of the Manchester Dental Hospital on February 26 Professor J. S. B. Stopford, vice-chancellor of the University, announced that Mr. Samuel Turner of Rochdale had offered to defray the cost of building a new dental hospital and school. Three years ago Mr. Turner made a gift towards the establishment of a chair of dental surgery, and he has contributed annually to its maintenance. The vice-chancellor was not able to announce the proposed site for the new hospital or the estimated cost of the scheme. He said, however, that a start might be made on the new building in October. Included in the hospital will be a children's clinic, a special department for the treatment of pyorrhoea and other chronic infections of the mouth, and full facilities for research work. Professor Wilkinson, director of the hospital, pointed out that since 1910 the number of patients treated each year had grown from 20,000 to nearly 40,000. The Manchester Dental Hospital is the only one of its kind in East Lancashire, and receives patients from a very wide area. In appreciation of Mr. Turner's gift Professor Stopford said: "It is impossible to measure its value to the city, the neighbourhood, dental education, and the advancement of dental science. Mr. Turner realizes that dentistry is of fundamental importance in the domain of preventive medicine, and I trust that his gift may awaken others to this fact."

District Nursing in London

The annual meeting of the Central Council for District Nursing in London was held at County Hall on February 25 under the chairmanship of Sir William Job Collins. The business was formal, chiefly concerned with the adoption of the annual report. The amount which the central council received during the year by grants from trustees of charities, subsidies from the London County Council, and a certain number of donations amounted to just over £11,000, and a similar sum has been distributed among the more than eighty affiliated district nursing associations covering the metropolitan area, which extends far beyond the county of London. The outstanding grant was one of £4,000 from the trustees of the London Parochial Charities for services rendered during the year, to which the trustees added another £500 for general purposes. It was reported that the scheme for home nursing of persons coming within the scope of the public assistance department of the London County Council, which has now been in operation for four years, was progressing, and that under the scheme 181,513 visits were paid to 5,324 cases last year. The question of the considerable number of

such cases, especially in East End districts, which need nursing visits for the insulin treatment of diabetes has been settled by the London County Council for two years on the basis that the payment made by the Council should be at the rate of 6d. for each "insulin visit"; previously such visits had counted for grant as half-visits. There were 24,000 such visits during each quarter of the year that the scheme has been in operation, and it is anticipated that the total payment by the London County Council for these "insulin visits" for the year 1936-7 will be £2,300. A new provident scheme has been launched for the district nursing of Greater London, and on the preliminary committee the central council was invited to appoint two representatives. The executive, however, decided not to express an opinion before ascertaining the views of its affiliated associations. On this being done, eighteen associations, employing 154 nurses, were found to be in favour of the scheme and thirty-four employing 227 nurses, against. It was decided, therefore, that the central council should not be associated with the scheme. It is understood that the scheme is proceeding. It was mentioned that the first distribution to district nursing associations by the King Edward's Hospital Fund was made in April last, £2,000 being distributed among 109 district nursing associations. This allocation was made in response to representations from the central council. An executive committee of thirty members was elected from the meeting. Sir Comyns Berkeley and Dr. W. Paterson, two of the three British Medical Association representatives on the central council (the third being Dr. Mary Blair), were appointed on the executive, the chairman of which is Sir Francis Morris and the vice-chairman Sir Stanley Woodwork.

Medical Candidates for the L.C.C.

The results of the triennial election for the London County Council will not be completely known until mid-day on March 5; but it is satisfactory to note that there is a very strong list of candidates drawn from our profession. Newcomers include Dr. Doris Odlum, who is standing for North Hammersmith in the Municipal Reform interest; her special experience should make her a most valuable member of the Mental Hospitals Committee if she secures election, but the constituency is not an easy one to contest, and it will be a feather in her cap if she succeeds. Dr. E. A. Whitfield is a Labour candidate for North Paddington, for which he has quite a possible chance of election. Dr. R. F. B. Bennett is standing as M.R. candidate for East Woolwich. All the other medical candidates are members of the expiring council. They include Dr. J. A. Gillison (Lab.) for Bermondsey (Rotherhithe); Miss E. Rickards, F.R.C.S. (Lab.), for Greenwich; Dr. B. Homa (Lab.) for Central Hackney; Dr. S. Monckton Copeman (M.R.) for Hammersmith; Dr. Henry Robinson (M.R.) for North Kensington; Dr. S. W. Jeger (Lab.) for Shoreditch; Dr. C. W. Brook (Lab.) for North Southwark; Mr. Somerville Hastings, F.R.C.S. (Lab.), for Stepney (Mile End); Dr. F. Barrie Lambert, C.B.E. (M.R.), for Westminster (St. George's); and Dr. S. McClements (Lab.) for West Woolwich. The superstitious may note that the total is thirteen; it is probably too much to expect that all will be elected, but it is clear that most of them will be, to the advantage of London as a whole.

Growing Demand for Hospital Almoners

At the annual general meeting of the Institute of Hospital Almoners, held at the Westminster Palace Rooms on February 25, when Sir George Newman gave the address, a very successful year's work was reported. The great need for more almoners to fill the posts which are rapidly materializing was stressed. The number of students in training at present is the highest on record, but the number of new posts also grows, and there are not enough almoners to meet the demand. The Executive Council reported that during last year four opportunities of opening new departments were lost and two established

posts passed to untrained workers because of the scarcity of almoners. The demand for almoners is now coming even more urgently from hospitals out of London than from those within the metropolitan area. In London in 1935 there was a preponderance of appointments owing to the action of the London County Council, which during that year opened an almoner's department in each of its general hospitals. During 1936, of the fifty-nine posts of almoner or assistant almoner filled, twenty were in London and thirty-nine out of London. It was also stated that although the majority of the appointments are still made by the voluntary hospitals the number of county and municipal health committees employing almoners is increasing. Public health authorities enjoy considerable latitude as to the methods by which they work, and the duties of an almoner in a municipal or county hospital are varied to suit the requirements of the area. The appointment of almoners to these hospitals is in many cases still in the experimental stage, but the institute considers that it has been proved that there is a place for hospital social service no less in the municipal or State hospital system than in the voluntary. Some account was given to the meeting of the training required for the institute's certificate. The public health and public assistance authorities of London, Liverpool, Leeds, Manchester, Middlesex, and Surrey now admit students to their hospitals for part of their training. Mention was made of the fact that the institute has become a tenant in the building of the British Medical Association, and the new accommodation has made possible an increase in its activities, particularly in regard to its library. It was announced that Sir Farquhar Buzzard had consented to continue in office as president for a second period of three years.

SCOTLAND

Glasgow Royal Infirmary

A new nurses' home is to be added to the Glasgow Royal Infirmary at a cost of over £100,000, which will be met by a contribution from the Lipton Trust, as a memorial to the late Sir Thomas Lipton. The new home will contain 250 bedrooms, with the necessary rooms for reading, writing, private study, and recreation. A tenement has been removed between Provand's Lordship and the Cathedral Halls, the site of the new building. The annual report of the Infirmary shows that the number of patients treated in the wards last year was 18,416, with an average daily number resident of 849. In the out-patient department 119,914 patients received treatment, the attendances totalling 375,234. At the ophthalmic institution there were 752 in-patients and 15,890 outpatients. The ordinary revenue fell short of expenditure by £24,459, but this deficit was met out of legacies and large donations amounting to £50,655. Subscriptions totalled £28,773, and there was an increase of over £2,000 in the subscriptions from organized employees and wage-earners. At the end of the year special sums amounting to £19,710 were received from the estates of Miss Margaret and Mr. William M'Ghie to be devoted to cancer research, and these sums are to form the nucleus of a cancer research fund.

Bicentenary of Edinburgh Royal Medical Society

In celebration of the bicentenary of Edinburgh Royal Medical Society, which was founded in 1737, a dinner was held in the North British Station Hotel, Edinburgh, on February 25. Dr. A. G. Ross Lowdon, the senior president, took the chair and some 250 members of the society and guests attended, including Dr. Robert Hutchison, Sir Auckland Geddes, Sir Thomas Holland (Principal of the University), Professor W. T. Ritchie (President of the Royal College of Physicians), and Mr. Henry Wade (President of the Royal College of Surgeons). Dr. Robert Hutchison, who was the chief guest and a former presi-

dent of the society, in submitting the toast of "The Royal Medical Society," said that if the half-dozen obscure students to whom the society owed its birth could look down upon them from the Elysian fields they would be surprised to find that the seed which they had planted had grown into a tree which had braved the centuries. All the chances had been against the survival of the seedling, for the eighteenth century was a time when the foundation of medical and scientific societies was rife, and the mortality among them was heavy so that few still existed to-day. The Royal Medical Society, however, seemed to have been robust from the start, and it had never looked back. Before it reached its first half-century a hall had been built, the society had received a Royal Charter, and a library had been started, and in the middle of last century the society became possessed of its present house. The speaker wondered why that society had succeeded when so many had failed, but he thought there were several reasons. The society must have supplied a need which the University failed to provide, and had proved itself complementary to the education of the classrooms and Infirmary. The medical student had to spend most of his time in absorbing facts and having the views of teachers pumped into him, and this society had provided him with a means for self-expression, if necessary with a heterodoxy which would be perilous in the examination hall. Secondly, the society had been a great help to its members in the digestion of knowledge. The medical student to-day was crammed with facts. Nothing was so good for mental dyspepsia as open discussion, and mental digestion, like its physical counterpart, proceeded best in public. Argument and refutation, ridicule and laughter, had always been provided by the Royal Medical Society in abundance. The most important principle in the training of doctors was expressed in the old saying, "You can't have the terriers too soon at the rats," or, in other words, the student could not be brought too early into contact with patients, and this was stimulated by the Royal Medical Society. The society had witnessed many changes in practical medicine, including the disappearance of the polypharmacy and antiphlogistic treatment of the eighteenth and early nineteenth centuries, and two of its old members, Lister and Simpson, had inaugurated the advances of antisepsis and anaesthesia. The society had survived many political troubles. The present times held a threat to intellectual life which had been unknown in Europe for many generations, for in several countries free discussion and open expression of opinion, even in scientific matters, were no longer tolerated, so that there was all the more need for societies to which intellectual freedom was the breath of life and where unrestrained individual opinion was not only tolerated but encouraged. Dr. Lowdon, in reply, said that the society was constituted by a membership which ranged from their oldest living member, Sir James Crichton-Browne, who joined in 1858, to the last undergraduate who added his name to the roll. He suggested that a telegram of warmest greetings should be sent to Sir James. Speaking of present activities, he said that the numbers attending the meetings were greater than ever, and last year sixty-six new members had joined, while this year again they had enrolled sixty-six new members up to date. The bicentenary fund, which would be used for preservation and endowment of the library, now amounted to £1,800, but more subscriptions would be needed. The toast of "The Royal Colleges" was proposed by Dr. R. F. Dawson and acknowledged by the Presidents of the two Colleges, and the toast of "The Chairman" was given by Sir David Wilkie.

On February 26 Sir Auckland Geddes, a past-president of the Royal Medical Society, read a dissertation. Explaining its title, "A Voice from the Grandstand," Sir Auckland said that for many years his path had lain away from the profession of medicine, and he now felt like one of those pathetic figures who frequented grandstands at international football matches, and who, on the strength of precarious membership of school clubs forty years before, shouted advice and criticism to the national

players. The root of the present discontent among the public seemed to be that medical students were never given a chance systematically to study man as a whole. Beyond their scientific knowledge of man lay an incompletely explored area in which important things happened without discoverable cause, but they had become so sure that science was the only door to knowledge that they tended to ignore the older ways of approach. If they could succeed in reawakening the sense of wonder which in the days of the Renaissance gave birth to science itself they could make fresh starts along new lines. The brilliant achievement of science had won prizes by disciplined curiosity, but that must not obscure the fact that to-day science was running into blind alleys from which it could only emerge by escaping from direct touch with human understanding. A vote of thanks was proposed by Professor R. W. Johnstone and seconded by Dr. R. F. Dawson, in which the former reminded the members that Sir Auckland Geddes, as a president of the society, had given a dissertation some thirty years ago on the subject of "Waste," and that he had later been a professor of anatomy in McGill University, director of recruiting at the War Office, Minister of National Service, Minister of Reconstruction, and British Ambassador to the United States.

Central Midwives Board

At a meeting of the Central Midwives Board for Scotland, held for the election of office-bearers, with Dr. R. C. Buist in the chair, Professor R. W. Johnstone, C.B.E., M.D., F.R.C.S.Ed., F.C.O.G., of Edinburgh, was unanimously elected chairman and Professor James Hendry, B.Sc., M.B., F.C.O.G., of Glasgow, deputy chairman. The meeting appointed committees and examiners for the ensuing year.

Correspondence

A Bureau of Geographical Medicine

SIR.—The letters of Dr. F. C. Eve (*Journal*, October 24, 1936, p. 840) and Professor Walter P. Kennedy (November 14, 1936, p. 1002) prompt me to ask to be allowed to bring to the notice of your readers the existence of an organization designed to meet, to a certain extent at any rate, the needs they have so clearly expressed for a central bureau. Those of us working among non-European races rapidly become aware of the fact that physiological constants based on observations of a small sample of human beings are not necessarily the average constants of any other or all other races. At its meeting held in Zurich in 1934 the International Federation of Eugenic Organizations discussed this problem, and the result was the formation of a Committee on Anthropological Physiology. The aims of this committee, of which I am chairman, are: (1) to stimulate the investigation of physiological constants among the various races of mankind; (2) to make contact with the workers on this subject in the different parts of the world in order that interchange of ideas and results may be facilitated; (3) to ensure that, where possible, similar methods may be used so that comparative data may be of greater value; and (4) to provide at the meetings of the organization facilities for investigators to meet and discuss their problems. Owing to the nature of this committee it is doubtful whether as a whole it will ever meet, and hence its numbers are not limited; rather it is advisable to have it as large as possible, and have on it a representative of every country where physiological standards are being investigated. The main duty of each member towards the committee is to keep the chairman

informed from time to time of the work being done in his particular part of the globe. This information is then circulated to all other members by the chairman. In order that investigators may know who already represents the various countries on this committee, and also in the hope that workers not thus represented may be induced to volunteer to act as members, I should like to give the personnel of the committee as it now stands.

America.—Professor L. Snyder, Columbus, Ohio; Professor Benedict, Boston, Mass.

China.—Dr. H. G. Earle, Henry Lester Institute, Shanghai.

India.—Lieut.-Colonel Bhatia, Grant Medical College, Bombay.

Japan.—Professor Sen Nagai, Imperial University, Tokyo.

Netherlands Indies.—Professor Radema, Batavia.

New South Wales.—Professor Whitridge Davies, Sydney.

South Australia.—Professor Clelland, Adelaide.

Denmark.—Dr. Taga Kemp, Copenhagen.

Information concerning the work of this committee in particular and the organization in general may be obtained from the honorary secretary, Mrs. C. B. S. Hedson, 443, Fulham Road, London, S.W.10.—I am, etc.,

The University, Hong Kong, Feb. 4.

LINDSAY RIDE.

Specific Antitoxins for Gonococcal and Meningococcal Infections

SIR.—May I be allowed to discuss several points and state facts concerning matters raised by your annotator in the *Journal* of February 13 and of February 27 in regard to my paper on gonococcus antitoxin published on February 13 (p. 321). The annotation stated that the starting-point of the work which had led to the adoption of this treatment was an attempt by Corbus to prepare a Besredka "antivirus." Had this been so I should have acknowledged Corbus. Without decrying his work, may I state the facts more explicitly.

For many years all the known methods of treatment, their possibilities, and what we thought might be fruitful avenues of research had been discussed between Professor Edward Mellanby and myself. Over a period of twenty years innumerable experiments achieved little until on February 2, 1934, Mellanby sent me a letter from the office of the Medical Research Council stating that he was very anxious for me to meet Dr. Mervyn Gordon of St. Bartholomew's Hospital to discuss "the possibility of testing some antitoxic preparations in gonorrhoea, as he [Gordon] had much experience in the problems of the meningococcus which might be extended to the gonococcus." Immediately communicating with Gordon I received a letter three days later in which he expressed the opinion that "the problem of immunity as regards the gonococcus is not so vastly different from the same problem in relation to the meningococcus." Active co-operation followed, and I enjoyed the inestimable advantage of Gordon's mature experience and judgement.

I feel, Sir, that your annotator hardly does justice to the part played by Mellanby and Gordon in this work, although I tried to do so in my paper. May I record again that the starting-point of the work was our recognition of the close similarity of the meningococcus to the gonococcus, and Gordon's previous researches in connexion with meningococcal meningitis which resulted in such brilliant clinical results.

Again, as a practical clinician I am not too concerned with your annotator's academic discussion and the interpretation placed on tests by bacteriologists to the complete exclusion of the clinical results. Apart from my own observations the clinical evidence submitted by Dr. Stanley

should be of particular use in cases where unmodified insulin does not provide adequate control or where several administrations daily are necessary. While extensive clinical trial has determined the issue of a satisfactory preparation there is still much to be learned about its general use; therefore care will be necessary if reactions are to be avoided due to unfamiliarity with its use or deviations from a properly balanced dietary.

Protamine insulin (with zinc)—suspension is issued at present in one potency: 40 units per c.cm. Two sizes are available—5 c.cm. containing 200 units, and 10 c.cm. containing 400 units. The packings will be distinct in colour from existing packings of unmodified insulin.—We are, etc.,

ALLEN AND HANBURY'S LTD.
BOOTS PURE DRUG CO. LTD.
THE BRITISH DRUG HOUSES LTD.
BURROUGHS WELLCOME AND CO.

London, March 1.

** An article on protamine zinc insulin by Dr. R. D. Lawrence and Dr. Nora Archer appears in this week's issue at page 487.—ED., *B.M.J.*

The Services

THE ARMY DENTAL CORPS

The War Office invites applications from dental surgeons for appointment to eight commissions in the Army Dental Corps. Candidates will be selected for these commissions without undergoing competitive examination, and will be required to present themselves in London for interview and physical examination about the middle of March, 1937. They must be registered under the Dentists Acts or Medical Acts, and be not over the age of 28 years. Successful candidates will, in the first instance, be given short service commissions for six years, at the end of which period they will retire with a gratuity of £1,000 unless during the fifth year they have applied for and been granted permanent commissions. Full particulars and forms of application may be obtained from the Director, Army Dental Service, the War Office, London, S.W.1.

DEATHS IN THE SERVICES

Major-General THOMAS MARTIN CORKER, C.B., late R.A.M.C., died in London on February 24, aged 80. He was born at Cork on May 2, 1856, the son of Thomas Ware Corker of Rushbrooke, County Cork, and was educated at Queen's College, Cork, where he graduated in 1876 as M.A. with honours and a gold medal and scholarship in the Queen's University of Ireland, and subsequently as M.D. and M.Ch. in 1879. He also studied for a while at St. Bartholomew's Hospital. Entering the Army as surgeon on March 6, 1880, in the same term as the late Sir Alfred Keogh, he attained the rank of colonel on August 26, 1905, and of Surgeon General on December 11, 1911, retiring on December 26, 1917. As an administrative medical officer he served successively in the Scottish Division, 1905-9; Egypt, 1909-11; Lucknow Division, 1911; Poona Division, 1912; and Secunderabad, 1913. He served in the North-West Frontier campaign in India in 1897-8, on the Malakund and in the operations in the Mamund country; and in the Tirah campaign of 1897-8, taking part in the actions of the Arhunga and Sampagna Passes and in the operations in the Bazar Valley, was mentioned in dispatches in the *London Gazette* of April 5, 1898, and received the Frontier medal with two clasps. He was made an Honorary Physician to the King in 1912, and received the C.B. in 1915, and the degree of LL.D. from the National University of Ireland in 1920. He was also a Knight of Grace of the Order of St. John of Jerusalem. In 1886 he married Florence, daughter of the late Mr. J. E. Leslie of Lee Carrow, Passage West, Co. Cork. He had been a member of the British Medical Association since 1888, and contributed letters from time to time to the *British Medical Journal*.

HIS MAJESTY'S HOUSEHOLD THE MEDICAL APPOINTMENTS

The *London Gazette* of March 2 announces the following medical and dental appointments to His Majesty's Household, to date from March 1, 1937.

Physicians in Ordinary:

Viscount DAWSON OF PENN, G.C.V.O., K.C.B., K.C.M.G., M.D., P.R.C.P.
Lord HORDER, K.C.V.O., M.D., F.R.C.P.
Sir JOHN WEIR, K.C.V.O., M.B.
Sir MAURICE CASSIDY, K.C.V.O., C.B., M.D., F.R.C.P.

Physicians Extraordinary:

Sir FARQUHAR BUZZARD, Bt., K.C.V.O., M.D., F.R.C.P.
Professor JOHN A. RYLE, M.D., F.R.C.P.
GEORGE FREDERICK STILL, M.D., F.R.C.P.
HENRY LETHBY TIDY, M.D., F.R.C.P.

Sergeant Surgeon:

WILFRED TROTTER, M.D., M.S., F.R.C.S., F.R.S.

Surgeon:

Sir THOMAS DUNHILL, K.C.V.O., C.M.G., M.D.
Sir JAMES WALTON, K.C.V.O., M.S., F.R.C.S.
Sir LANCELOT BARRINGTON-WARD, K.C.V.O., F.R.C.S.

Surgeon Oculist:

Sir STEWART DUKE-ELDER, M.D., F.R.C.S.

Consulting Surgeon Oculist:

Sir WILLIAM LISTER, K.C.M.G., K.C.V.O., M.D., F.R.C.S.

Manipulative Surgeon:

Sir MORTON SMART, K.C.V.O., D.S.O., M.D.

Surgeon Dentist:

C. S. MORRIS, M.R.C.S., L.D.S.

Surgeon Apothecary to His Majesty and Apothecary to the Household:

Sir STANLEY HEWETT, K.C.B., K.C.V.O., K.B.E., M.D.

Physicians to the Household:

ARNOLD STOTT, B.Ch., F.R.C.P.
DANIEL T. DAVIES, M.D., F.R.C.P.

Surgeon to the Household:

ARTHUR E. PORRITT, M.Ch., F.R.C.S.

Surgeon Oculist to the Household:

FRANK ANDERSON JULER, M.B., F.R.C.S.

Surgeon Dentist to the Household:

F. D. DONOVAN, C.V.O., L.D.S.

Surgeon Apothecary to the Household at Windsor:

Sir HENRY L. MARTYN, K.C.V.O., M.B., F.R.C.S.

Surgeon Apothecary to the Household at Sandringham:

Sir FREDERIC WILLANS, K.C.V.O., M.R.C.S.

Coroner of the Household:

W. H. L. McCARTHY, D.S.O., M.C., M.D.

Medical Household in Scotland

Physicians in Scotland:

JOHN COWAN, M.D., D.Sc., F.R.F.P.S.
ALEXANDER GREIG ANDERSON, M.D., F.R.C.P.
Professor JOHN WILLIAM MCNEE, D.S.O., M.D., F.R.C.P.

Extra Physicians in Scotland:

Sir ROBERT PHILIP, LL.D., M.D., F.R.C.P.
Sir ASHLEY MACKINTOSH, K.C.V.O., M.D., F.R.C.P.Ed.

Surgeons in Scotland:

Sir JOHN FRASER, K.C.V.O., M.C., M.D., F.R.C.S.Ed.
Professor JAMES R. LEARMONT, Ch.M., F.R.C.S.Ed.

Surgeon Oculist in Scotland:

ARTHUR H. H. SINCLAIR, M.D., C.M., F.R.C.S.Ed.

Surgeon Dentist in Scotland:

LESLIE C. BROUGHTON-HEAD, M.B., Ch.B., L.D.S.

Surgeon Apothecary to the Household at Balmoral:

GEORGE PROCTOR MIDDLETON, M.B., Ch.B.

Surgeon Apothecary to the Household at the Palace of Holyroodhouse:

NORMAN SCOTT CARMICHAEL, M.B.

physiology. After settling in practice at Reading he was appointed public vaccinator for the Nos. 1, 2, and 3 districts, and medical officer for No. 2 district. He obtained the Cambridge D.P.H. in 1893, and the subject of his M.D. thesis was the distribution and classification of cancer and phthisis in the borough of Reading during 1886-98. Dr. Stansfield joined the British Medical Association forty years ago; was chairman of the Reading Division in 1922-5; was president of the Oxford and Reading Branch in 1923-4; and had also been president of the Reading Pathological Society. He was a keen botanist and a prominent member of the British Pteridological Society. He edited the *British Fern Gazette* and contributed scientific papers on ferns to the *Journal of the Linnean Society*.

South London has lost an outstanding member of the profession in Dr. WILLIAM DENISON WIGGINS, for twenty-five years medical superintendent of St. Alfege's Hospital, Greenwich. Born in 1873 at Watlington, he was educated at Magdalen College School, Oxford, and St. Mary's Hospital. His first post was that of assistant medical officer at Fulham Infirmary, and he moved a year later to the Greenwich Infirmary, where his life work was done. At the time of his appointment the surgical work at the infirmaries was rather rudimentary, but by his firmness and tact Dr. Wiggins was able to get good surgical quarters and operating rooms. He had considerable technical skill as an operator, and his opinion was much in request for surgical cases in the district outside the hospital. He practically organized from the beginning the nursing school upon modern lines. His lectures to the nurses were highly appreciated for their insistence upon practical and intelligent ward work. In 1904 he published a handbook of midwifery for nurses and gave many refresher courses for practising midwives. He reported clinical material from time to time in the *British Medical Journal*—a case of acute intestinal obstruction in 1897 and a case of ulcerative endocarditis with perforation of ventricle in 1898. He was a man of many interests. A good all-round sportsman, he was a member of the old Blackheath Golf Club. A pigeon fancier, he raced his pigeons with the best, and played an excellent hand at bridge. He was a Mason and held the office of Grand Master of his Lodge. No account of him would be complete that left out his interest in curios of all sorts. He had a fine collection of old china and furniture, and was regularly to be seen at the Caledonian market. He leaves a son, who is a student at Guy's Hospital, and one daughter.

L. P.

The death of Dr. JULES FREDERICK REY was recorded in our issue of February 20 (p. 422), and we have now received the following appreciation from Professor J. A. Ryle: His end came swiftly after many years of ill-health patiently and cheerfully borne, and after two years of disability so pronounced that for most men life might have seemed no longer to retain any virtue or advantage. From Rey, however, the limitation or crippling of one faculty after another brought no complaint, but only the same courageous acceptance and the same unaltered determination to enjoy to the full what still remained for him. It was a rare privilege for his professional colleagues to be called to see him in one or other of his complicating illnesses and to discover always smiles in place of despondency and never to hear a whisper of defeat. Reading became difficult in the last eighteen months of his life, and his wife used to read aloud to him, but he still insisted each week on perusing the *B.M.J.* for himself. A friend, writing an appreciation of him in one of the daily papers, spoke of his "amazing pluck which seemed almost abnormal." It was abnormal, like all outstanding spiritual courage, and for those who nursed and attended him in his own home it was a constant source of inspiration and pride. Rey was born at Ashford in Middlesex on October 16, 1880, the youngest son of the well-known engineer Jules Rey. He was educated at Boulogne and

Guy's Hospital, and qualified in 1904. Inheritance and example may have determined some of his special interests, for his particular enthusiasm in medicine was always centred in x-ray work and electrotherapy. At the West Hants Hospital as a young man he was the first to take stereoscopic x-ray photographs. He practised first in Cardiff and, after his marriage in 1910, at Bognor. He was much beloved by his patients, and his family circle was one of the happiest. One of the original members of the staff of the Bognor Regis War Memorial Hospital, he was partly instrumental in obtaining a generous gift for the hospital from a patient, and, characteristically, a last request was for gifts for Guy's Hospital rather than wreaths for his funeral. Among his hobbies he numbered carpentry, engraving, gardening, and photography, but his greatest hobby and interest was always his work. He leaves a widow and a daughter, and a son now at Guy's to succeed him in his profession.

The following well-known foreign medical men have recently died: Dr. FRANCESCO MAGGI, director of the ophthalmological clinic at Milan; Dr. PAUL LEGENDRE, a well-known Paris physician, member of the Académie de Médecine; Dr. WILLIAM C. BUCHANAN, professor of bacteriology in the University of Cincinnati; and Dr. HENRI DAUSSET, director of the Institute of Physiology at the Hôtel-Dieu, Paris.

Universities and Colleges

UNIVERSITY OF OXFORD

The result of the Oxford University by-election for the vacant seat in Parliament was announced on February 27. Sir Arthur Salter (Ind.) was returned with a poll of 7,580. Sir E. Farquhar Buzzard, Bt., M.D. (C.), received 3,917 votes, and Professor F. A. Lindemann (I.C.) 3,608 votes.

At a congregation held on February 27 the following medical degrees were conferred:

D.M.—W. H. Owles, D. H. Brinton.

UNIVERSITY OF CAMBRIDGE

At the Congregation held on February 20 the degree of Master of Arts was conferred on the following demonstrators in anatomy: J. S. Baxter, M.S., M.B., B.Ch.Belf.; D. V. Davies, M.B., B.S.Lond.; M. T. Greig, M.B., Ch.B., B.Sc. (N.Z.); and W. R. M. Morton, M.D.Belf.

ROYAL COLLEGE OF SURGEONS OF ENGLAND

Museum Demonstrations

A course of museum demonstrations in the theatre of the College commenced on March 1, when Mr. R. Davies-Colley showed specimens illustrating diseases of the thyroid gland. To-day (Friday, March 5) Mr. A. J. E. Cave will speak on anatomy of the knee-joint, on March 12 on the anatomy of nasal fossae and sinuses, and on March 19 on the anatomy of the trigeminal nerve. On March 8 Mr. L. W. Proger will show recent additions to the museum, and on March 15 Dr. C. Keith Simpson will speak on the pathology of the adrenal gland in relation to sudden death. All the demonstrations commence at 5 p.m., and are open to advanced students and medical practitioners.

SOCIETY OF APOTHECARIES OF LONDON

The following candidates have passed in the subjects indicated:

SURGERY.—E. S. Dismorr, B. T. Jones, J. E. R. Palmer, B. A. R. Pitt, A. W. Perren, J. R. Rocyn-Jones, R. L. Williams.

MEDICINE.—J. D. Anderson, R. F. B. Bennett, H. A. Bhuttacharji, S. M. M. Niall, G. G. Sahasrabuddhe, R. G. Stitt, G. Theophilus.

FORENSIC MEDICINE.—J. D. Anderson, R. F. B. Bennett, H. A. Bhuttacharji, J. T. Boocock, S. M. M. Niall, G. G. Sahasrabuddhe, R. G. Stitt, G. Theophilus.

MIDWIFERY.—J. D. Buckner, J. W. Cazalet, F. T. Futers, O. I. Green, W. A. Groom, S. J. Nathan, R. G. Stitt.

The diploma of the Society has been granted to R. F. B. Bennett, H. A. Bhuttacharji, J. T. Boocock, J. W. Cazalet, E. S. Dismorr, F. T. Futers, J. E. R. Palmer, J. R. Rocyn-Jones, and R. L. Williams.