

Local News

ENGLAND AND WALES

Treloar Cripples' Hospital, Alton

On April 29 the trustees of the Lord Mayor Treloar Cripples' Hospital and College entertained members of the honorary medical board at dinner in Barbers' Hall, Monkwell Street. Colonel the Hon. Frederick Lawson was in the chair; he had beside him Alderman Sir Charles Batho, Mr. O. L. Addison (chairman of the medical board), Mr. Maurice Hovenden (Master of the Barbers' Company), Sir Frederick Menzies, Mr. T. J. Harrowing, and Miss Florence Treloar. Colonel Lawson expressed his pleasure and that of his co-trustees in entertaining the medical board, after an interval of eight years, in this City hall, with its ancient associations with surgery. He recalled that a great Lord Mayor of London, Sir William Treloar, was the founder and inspiration of the hospital at Alton, and that other civic dignitaries took part at its birth and had given help since. Under the enthusiastic guidance of the medical superintendent, Sir Henry Gauvain, the trustees had now adopted the widest definition of the word "cripple." Mr. Addison, in his reply to the toast, spoke of the growth of the orthopaedic department during the past ten years and the change in the type of cases now treated. Surgical tuberculosis had become a disappearing disease, he said, largely due to the pioneer work at Alton, hence the enlargement of the scope of the hospital and college. Treloar, with Coram and Barnardo, would go down to posterity as three great benefactors of children. The toast of "The Corporation and the City of London" was submitted in happy terms by Sir Henry Gauvain, who paid warm tributes to his colleagues; and Sir Charles Batho, in reply, spoke of the pleasure it had given him when Lord Mayor to help forward the work begun by William Treloar. Sir Charles Gordon-Watson, proposing the health of the Worshipful Company of Barbers, said that it was a privilege to do so in that beautiful and ancient hall, whose possessions made him almost regret the severance of the surgeons and the barbers in 1745; "for 400 years the barber-surgeons were the foster-mother of our craft." The Master, in his acknowledgement, showed the cup given to the Company by Henry VIII, and other pieces of priceless plate.

The Tuberculosis Association in Manchester

The annual provincial meeting of the Tuberculosis Association will be held in the Central Library, Manchester, on Thursday, Friday, and Saturday, June 10, 11, and 12, under the presidency of Dr. S. Roodhouse Gloyne. The provisional programme is as follows: June 10 (joint meeting with the North-Western Tuberculosis Society): 2.15 p.m., papers on "How Long Should Collapse Therapy be Delayed?" by Dr. Geoffrey Marshall and Mr. H. Morriston Davies; 5 p.m., paper on "Bronchiectasis in Pulmonary Tuberculosis," by Mr. J. E. H. Roberts; on "Pleural Effusions after Thoracoplasty," by Dr. O. M. Mistal; 6.20 p.m., annual meeting. June 11, 9.45 a.m., papers on "Reflections on the Treatment of Unilateral Pulmonary Tuberculosis," by Dr. P. J. L. De Bloeme; and on "My Chief Difficulties in Dealing with the Tuberculosis Problem," by Professor A. Ramsbottom (consulting physician), Dr. W. F. Jackson (general practitioner), Dr. A. Dove Cormac (medical superintendent of a mental hospital), Dr. R. E. Lane (medical officer to a large factory), and Dr. D. P. Sutherland (tuberculosis officer); 2.15 p.m., visit to Manchester Sanatorium, Baguley; 7 p.m., president's reception and annual dinner at Midland Hotel. June 12, 10 a.m., papers by Dr. J. B. McDougall on "The Use of the Tomograph"; by Dr. C. D. S.

Agassiz on "Artificial Pneumothorax in Children"; 12 noon, problem cases presented by Dr. E. H. A. Pask and Dr. G. Jessel. In the afternoon members will be welcome at the Liverpool Sanatorium, Crossley Sanatorium, Barrowmore Hall Colony, Abergel Sanatorium, and the Manchester Tuberculosis Office and Clinic, 352, Oxford Road, which will be open to members throughout the conference from 10 a.m. to 4 p.m. daily. Members of the North-Western Tuberculosis Society and their friends will be welcome at all the meetings, the annual dinner, and the excursions. Full information may be obtained from the honorary secretary, Tuberculosis Association, 26, Portland Place, London, W.1.

Coroners' Inquests in London

During 1936 the number of deaths reported to London coroners was 8,748 as compared with 8,209 in 1935. Of these deaths 3,343 occurred in mental hospitals and other institutions. Inquests were held in 3,180 cases as against 3,239 in the previous year. The total number of suicides was 583. Three suicides were under 17 years of age and 171 were over 60. Deaths from want of attention at birth decreased from forty-two to twenty-five. The number of people who met their deaths by accident was 1,622 as against 1,766 the previous year; thirty-six deaths resulted from injuries and forty-eight from drowning. A verdict of "Death from natural causes" was returned in 568 cases and there were eight verdicts of "Cause of death unknown." In nine cases a verdict of murder was returned, and in one case a verdict of manslaughter. Three inquests were held in connexion with executions. Inquests on newly born children decreased from fifty-five to forty-seven. Three verdicts of murder of newly born children were recorded. Sixty-six deaths were attributed to excessive drinking. The coroner directed post-mortem examinations to be made in 2,578 cases, or 81 per cent., of the inquest cases, and in 3,413, or 61.3 per cent., of the remaining cases in which it was decided that no public inquiry was necessary.

SCOTLAND

Hospital Treatment of Infectious Disease

In his annual report for the year 1936 Dr. C. Barclay Reekie, medical officer of health for the burgh of Dunfermline, urges the importance of wide floor space in hospitals for the treatment of infectious disease. With regard to scarlet fever, he says that apart from the natural decline in the severity of this disease, which some authorities had attributed to the segregation in hospitals over a number of years of the more severe cases and the introduction of scarlet fever antitoxin, the diminution of complications had been largely due to improved ward environment. Overcrowding of wards instead of being economical resulted in an increased number of septic infections with protracted stay in hospital. The number of scarlet fever cases treated in the West Fife Infectious Diseases Hospital at Dunfermline had been 202 during the past year, a decrease of 360 cases on those of the previous year. Discussing diphtheria the report states that there is a tendency to send cases earlier to hospital. In the analysis of fatal cases of diphtheria it had been found that the shortest period any patient had been ill before coming into hospital was three days, and this illustrated the serious effect of delaying the giving of antitoxin and the provision of skilled nursing. The number of cases of diphtheria admitted to this hospital had been 182, a decrease of 83 on those of the previous year. There was an increasing demand for the admission of cases of measles. It was not generally recognized that measles had a high mortality between the ages of 6 months and 1 year, so that the

problem of measles was not so much prevention of the occurrence of the disease as its postponement to the later years of childhood.

Simpson Memorial Maternity Hospital

At the annual meeting of the Edinburgh Royal Maternity and Simpson Memorial Hospital the hope was expressed that the Royal Infirmary of Edinburgh would be able to take over the hospital, which is now approaching completion in the Infirmary grounds, by November, 1938. It had been necessary to transfer £3,520 from the reserve fund to meet working expenses, but receipts from legacies had showed a satisfactory improvement from £3,400 to £8,276. A subscription income of at least £4,500 was required for the hospital until the time when it could be taken over by the Infirmary. Reference was made to the fact that the municipal authorities had insisted that the new building should be constructed of natural instead of synthetic stone as had been intended, and this had involved an added expenditure of £7,000 which, it was suggested, the Corporation should provide. The number of cases treated last year had been 3,393, and there had been 10,883 attendances at the ante-natal clinics, of which 2,358 were of new cases.

Correspondence

High Hyoscine Dosage in Chronic Encephalitis

SIR.—Sir Arthur Hall's paper in the *British Medical Journal* of April 17, on "The Results of High Atropine Dosage in Chronic Epidemic Encephalitis," records that the highest dose of atropine given was 54 mg. daily. The following describes briefly a case in which we have used nearly four times this dose (up to 195 mg. daily) to secure symptomatic relief from oculogyric crises.

Miss X, aged 28, had an acute attack of encephalitis, regarded as "influenza" in 1924. In October, 1928, advanced Parkinsonism was present, with the tremor and rigidity more marked on the right side. She could not walk without help, and had to be assisted with changing her clothes and in eating; there was no gross mental change. Oculogyric crises were, however, her most distressing complaint. She was given a course of tryptansamide injections and genoscopolamine pills. Considerable improvement followed. In August, 1933, she was taking, in addition to six genoscopolamine pills daily, a mixture containing *tinctura belladonnae* 15 minims and *tinctura stramonii* 15 minims twice daily; the latter was gradually increased until 1 drachm was given in each dose of her mixture, and this was continued until September, 1936, when oculogyric crises were so severe and distressing that hypodermic injections of hyoscine were commenced, at first in small doses (3 to 5 mg.). The dose was gradually increased until in December, 1936, she had 1 grain (65 mg.) and occasionally 1½ grains (97 mg.) morning and night (that is, a total of 130 to 195 mg. daily). Any reduction of the dose below half a grain morning and night caused a return of intensely distressing oculogyric crises, and even with the larger doses mild attacks still occur morning and evening. Dryness of the mouth has never been a troublesome feature during the administration of these large doses, nor have any gastro-intestinal, urinary, or mental symptoms appeared. Mydriasis is controlled by instilling two drops of a 1 per cent. solution of eserine into the eyes morning and night.

We have been unable to find any recorded case in which comparable doses of hyoscine have been given therapeutically over prolonged periods.—We are, etc.,

HENRY COHEN,
Liverpool.
JOHN W. CRAW,
Northwich.

April 28.

Blood Transfusion in Obstetrics

SIR.—May I make brief comment upon two or three points arising out of Dr. Malcolm D. Black's paper in the *Journal* of May 1 (p. 903). Dr. Black states that "if blood will be available within half an hour to one hour, or if the patient be at the point of death [as a result of haemorrhage], it is better to start giving an intravenous saline injection and to continue it until blood has been secured." . . . "Patients have died within half an hour of admission. An intravenous saline injection can be started within ten minutes of admission, and blood transfusion could be started in the same time if blood were kept in storage."

I maintain that an immediate intravenous-infusion is essential without waiting for the patient to be "at the point of death" whenever the systolic blood pressure falls to 80 mm. Hg, or fails to rise above 90 mm. Hg after routine nursing measures have been taken. Crystalloid saline solution is not very satisfactory for this purpose, and when whole blood is not immediately obtainable I have found an ephedrine-glucose-gum preparation to be the most satisfactory substitute at present available (*J. Obstet. Gynaec. Brit. Emp.*, 1935, **42**, 852; *British Medical Journal*, 1936, **2**, 537). The ephedrine is omitted in cases of shock. Sometimes blood transfusion is required later, but in many cases, especially those of accidental haemorrhage, the simple infusion will suffice.—I am, etc.,

Newcastle-upon-Tyne, May 1.

WM. HUNTER.

SIR.—Dr. Malcolm D. Black (*Journal*, May 1, p. 903) seems to strain at a gnat and swallow a camel when he states, "... cutting down on to a donor's vein should never be permitted," and goes on to say, "... cutting down on to the recipient's vein is always advisable. . . ." One can quite well understand acute dilatation of the heart being included under the heading of "dangers" when it is stated that "... twenty minutes at least should be taken in introducing 600 c.cm. . . ."

I venture to suggest that the gravity method of blood transfusion is obsolete, and when used is sheer cruelty to the nurse who stands with arms aloft; perhaps the twenty minutes is the time limit of her endurance!

It is a simple matter in the most collapsed of patients to introduce a 17 gauge hypodermic needle even in the dorsum of the hand, for argument's sake, and to deliver the citrated blood at one's ease by means of a two-way syringe; personally I use a "Rotanda": the small bore of the needle forces one to give a slow transfusion—one hour and twenty minutes will not be ill-spent in giving 600 c.cm. of citrated blood! With regard to the mixing of the blood with the citrate solution, I have found a sterilized Horlick's malted milk glass and mixer of great value.—I am, etc.,

Longtown, Cumberland, May 2.

R. RUTHERFORD.

Bran in the Prevention of Constipation

SIR.—Having advocated the use of a "processed" preparation of bran as the best remedy for nearly all ordinary cases of habitual constipation (*Practitioner*, 1935, **135**, 229; *Med. Press and Circ.*, 1935, **191**, p. 336), and also to some extent as a preventive of chronic catarrhal colitis, I was most interested on reading confirmatory evidence in Dr. E. M. Dimock's paper (*Journal*, May 1, p. 906). By retaining moisture the bran tends on the whole to make the contents of the rectum somewhat softer in constipated subjects, and does not "scrape" any

and regularly attended the courts at Seaham, and he was chairman of the Durham County Panel Committee for twenty-one years in succession. As M.O.H. for Seaham he spared no effort to obtain better housing and a higher standard of living for the workers, and he was co-opted a member of the Health Committee of Durham County Council. On retirement from public office three years ago he was entertained to a dinner and presentations were made to him. He had been a member of the British Medical Association for forty years.

The Services

HONORARY SURGEON TO THE KING

The King has approved the appointment of Colonel W. J. Powell, C.I.E., I.M.S., Honorary Surgeon to the Viceroy of India, as Honorary Surgeon to the King, in succession to Major-General A. W. M. Harvey, I.M.S., who has retired.

DEATHS IN THE SERVICES

Major-General Sir (MICHAEL) THOMAS YARR, K.C.M.G., C.B., late R.A.M.C., died in a nursing home in London on April 24, aged 74. He was born at Cloughjordan, County Tipperary, on October 17, 1862, the son of Thomas Yarr, J.P., of Rathgar, Dublin, and was educated at French College, Blackrock, and in the Medical School of the Royal Irish College of Surgeons, studying subsequently at Paris and Vienna. He took the L.R.C.S.I. and L.K.Q.C.P. in 1882, and subsequently the F.R.C.S.I. in 1894. After filling the post of chief clinical assistant at the Royal London Ophthalmic Hospital, he entered the Army as surgeon on January 30, 1886, passing first into Netley. He attained the rank of colonel in the long war promotion list of March 1, 1915, became major-general on December 26, 1917, and retired in 1921. He had a more varied experience of service than falls to the lot of most Army medical officers. From 1890 to 1895 he was surgeon to the 1st Battalion of Coldstream Guards, and from 1895 to 1899 was seconded as Physician to the Crown Prince of Siam. He served in the South African War in 1900-1, taking part in operations in the Orange Free State, the Transvaal, and Cape Colony, and gaining the Queen's medal with four clasps. From 1903 to 1908 he was surgeon to the Governor of Bombay. He then served throughout the war of 1914-18, first as A.D.M.S. at Gallipoli, where he took part in the landing and in the operations of the 29th Division, and later as D.D.M.S. of the Egyptian Expeditionary Force, and at Malta, was mentioned in dispatches in the *London Gazette* of August 5, 1915, and received the C.B. in 1916, the K.C.M.G. in 1917, and was made a Chevalier of the Legion of Honour. After the war he was Inspector of Medical Services to the War Office, a post which involved much travelling abroad. Throughout his career he specialized in ophthalmology, and was the author of *A Manual of Military Ophthalmology* and of many papers and articles on his specialty. After retirement he served on the board of management of St. David's Home for Crippled Soldiers at Ealing, and of the Royal Normal School for the Blind at Norwood. He was unmarried.

Surgeon Commander JOHN WILLIAM TIGHE, R.N. (retired), died at Castlerea, County Roscommon, on April 4. He was the only son of Dr. J. M. Tighe of Melbourne, was educated in Dublin, and took the L.R.C.P. and S.I. in 1920, after which he entered the Navy. He became surgeon lieutenant commander on February 12, 1927, surgeon commander in 1935, and retired in May, 1936.

Lieut.-Colonel FREDERICK J. GARLAND, D.S.O., R.A.M.C. (ret.), died on April 29, aged 59. He was born on November 5, 1877, and was educated in the Royal University of Ireland, where he graduated as M.B., B.Ch., and B.A.O. in 1901. Entering the R.A.M.C. as lieutenant on January 30, 1904, he became major on July 1, 1915, during the war, and retired as lieutenant-colonel on May 18, 1929. Before entering the Army he served as a civil surgeon for over a year. He served in the war of 1914-18, when he was mentioned in dispatches in the *London Gazette* of July 21, 1917, and June 11, 1918, and received the D.S.O. in 1918. After retirement he was employed for some years at Lydd.

Universities and Colleges

UNIVERSITY OF CAMBRIDGE

At a congregation held on May 1 the following medical degrees were conferred:

M.B., B.CHR.—*G. D. Pirrie, *A. B. Evans, *P. J. Wenger-Byrne, A. H. Knowles, N. A. Buxton, L. A. Collins, G. C. L. Pile, H. T. H. Wilson, F. I. Evans, L. N. G. Lytton, A. C. Blandy, A. A. D. La Touche, I. W. MacKichan, D. S. Scott, E. D. Hoare, R. J. Porter.

M.B.—*H. Sandeman Allen, *G. C. Milner, *H. C. Maclare, *A. Monk-Mason Payne, *F. Bush, *J. F. Lown, *W. A. Briggs, *F. H. Morrell, *H. B. Dodwell, *C. M. Ryley, *D. A. Smith, A. B. R. Finn, E. O'D. C. Grattan, J. H. Moseley, D. R. Seaton, T. G. Armstrong, R. J. Buxton, B. S. C. Gaster, A. M. Barry, A. M. Weston, C. E. R. Wood, H. K. Meller, E. Sharp, A. F. Bryson, F. Clifton, P. A. Walford, J. E. A. David, R. Colley, E. P. H. Drake, H. S. H. Gilmer, T. B. L. Bryan, R. E. K. Levick, J. R. G. Harris, R. B. Heisch.

* By proxy.

UNIVERSITY OF LONDON

The following candidates have been approved at the examination indicated:

POST-GRADUATE DIPLOMA IN PSYCHOLOGICAL MEDICINE.—(With Special Knowledge of Mental Diseases): G. A. FitzPatrick. Part A: G. L. Ashford, Augusta G. Harrison.

LONDON SCHOOL OF HYGIENE AND TROPICAL MEDICINE

The course of study for the Diploma in Public Health covers a period of nine calendar months' whole-time work and commences on September 28. The fee is 54 guineas. One Fishmongers' Company Studentship, which is awarded annually, carries remission of fees for the course and the next examination for the studentship will be held on June 22 and 23. Applications to compete must reach the secretary, London School of Hygiene and Tropical Medicine, Keppel Street, Gower Street, London, W.C.1, by June 14. A fuller announcement appears in our advertisement columns this week.

UNIVERSITY OF DURHAM

At the summer convocations the honorary degree of Doctor of Science will be conferred on Sir Henry Dale, M.D., F.R.C.P., F.R.S., director of the National Institute for Medical Research, and the honorary degree of Doctor of Surgery on Mr. R. P. Ranken Lyle, Emeritus Professor of Midwifery and Gynaecology in the University.

The centenary of the foundation of the University will be celebrated at Durham on Thursday, July 1, and at Newcastle on the following day. Invitations are being issued to other universities and educational bodies to send representatives, and a number of honorary degrees will be conferred.

UNIVERSITY OF MANCHESTER

The Rockefeller Foundation has made a grant of £5,000, to be spread over four years, in support of the research work in biochemistry being carried out under the direction of Professor Heilbron.

Dr. Donal Sheehan has resigned his appointment as lecturer in neuro-anatomy on his appointment as Professor of Anatomy in the College of Medicine, New York University.

The conferment of degrees in science and medicine will take place on Saturday, July 10, in the morning.

ROYAL COLLEGE OF PHYSICIANS OF LONDON

A meeting of the Royal College of Physicians of London was held on April 29, with the President, Viscount Dawson of Penn, in the chair.

The following were elected Fellows of the College:

Arthur Cecil Alport, M.D.Ed.; Thomas Pearse Williams, M.D. Lond.; William Noel Goldsmith, M.D.Camb.; Henry Fitzgerald Maudsley, M.D.Melb. (Melbourne); Lewis Ralph Yealland, M.D. Ontario; Francis Joseph Bentley, M.D.Durh.; Ernest Noble Chamberlain, M.D.Liverp. (Liverpool); Francis Wiremu Brian Fitchett, M.D.Ed. (New Zealand); Jeffrey Ramsay, O.B.E., M.D. Lond. (Blackburn); Frank Dutch Howitt, C.V.O., M.D.Camb.; Oscar Brenner, M.D.Birm. (Birmingham); Benjamin Branford Morgan, M.D.Ed. (Norwich); Douglas Kinchin Adams, M.D.Glas. (Glasgow); Percy Selwyn-Clarke, M.C., M.D.Lond.

(Nigeria); William Sydney Charles Copeman, M.D.Camb.; Sidney Smith, M.B.Lond.; Brevet Lieut.-Colonel R.A.M.C. (Hong Kong); Edward Humfrey Vere Hodge, M.D.Camb., Lieut.-Colonel I.M.S. (Calcutta); Charles Cady Ungley, M.D.Durh.; (Newcastle-upon-Tyne); Richard Desmond Curran, M.B.Camb.; Allan William Spence, M.D.Camb.; Robert Stevenson Aitken, M.B.New Zeal.; Arnold Ashley Miles; Harry Edward Mansell, M.B.Oxf.; Thomas Anwyl Davies, M.D.Lond.; Dame Louise McIlroy, D.B.E., M.D. Glas.; Edward Johnson Wayne, M.B.Leads (Sheffield); Henry Ashbourne Treadgold, C.B.E., M.D.Lond., Group Captain R.A.F.M.S. (Elstree); Harold Kingston Graham-Hodgson, C.V.O., M.B.Durh.; Reginald St. Alban Heathcote, M.D.Oxf. (Cardiff); Philip Graham Stock, C.B., C.B.E., M.B.Bristol; John Frederick Wilkinson, M.D.Manch. (Stockport); and under By-law XXXVIII (b) Ernest Laurence Kennaway, M.D.Oxf., D.Sc.Lond., F.R.S.; William Porter MacArthur, D.S.O., O.B.E., D.Sc., M.D.Belf., Major-General, A.M.S.

Viscount Dawson of Penn was re-elected representative of the College on the Governing Body of the British Post-Graduate Medical School, and Dr. Archibald Malloch the representative at the celebration (at Philadelphia) of the fifteenth anniversary of the founding of the College of Physicians of Philadelphia on May 14.

The following were admitted Members of the College:

Mohammed Attia Abboud, M.B.Cairo, Sitaram Damodar Ambegaonker, M.B.Bomb., Major John Bennet, M.D.Ed., R.A.M.C., Roy Clarke, M.B.Oxf., Ewan Lawrie Corlette, M.B.Sydney, Guy Pascoe Crowden, L.R.C.P., Emmanuel Andrew Danino, M.D.Lond., Leslie John Davis, M.D.Ed., William Alexander Elliott, M.B.Camb., Ahmed Mahmoud El Nakai, M.B.Cairo, Noel Gordon Harris, M.D.Lond., George William Hearn, M.B.Lond., Charles Anthony Hinds-Howell, M.B.Oxf., Kenneth Tamworth Hughes, M.B.Sydney, Archibald Louis Percy Jeffery, M.D.Lond., Manoah Robert Kark, L.R.C.P., Heneage Marchant Kelsey, M.B.Lond., Frederick Harold Kemp, M.B.Birm., Mrs. Phyllis Margaret Kerridge, L.R.C.P., Samuel Lazarus, M.D.Glas., Archibald John McCall, M.B.Liverp., Murray McGeorge, M.B.New Zeal., Richard Alfred Amyas Pellew, M.B.Adelaide, William Gwynfryn Rees, M.B.Oxf., John Samuel Richardson, M.B.Camb., Charles Ronald St. Johnston, M.B.Birm., Joseph Smart, M.B.Camb., Seth Kenneth Squires, M.B.Lond., Stephen James Lake Taylor, M.B.Lond., Henry Renwick Vickers, M.B.Shev., Denis John Williams, M.D. Manch., Reginald Alexander Wilson, M.D.McGill.

Licences to practise, and special diplomas, were granted; the names will appear next week.

BRITISH COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS

At the quarterly meeting of the Council, held in the College House on April 24, with the President, Sir Ewen Maclean, in the chair, the following were promoted to the Fellowship and formally admitted by the President. O'D. T. D. Browne, Dublin, J. R. C. Canney, Cambridge, R. H. J. M. Corbet, Dublin, *T. F. Corkill, Wellington, New Zealand, *H. D. De Sa, Bombay, Charlotte A. Douglas, Edinburgh, H. H. Evers, Newcastle-upon-Tyne, A. O. Gray, London, S. B. Herd, Liverpool, *Charlotte L. Houlton, Delhi, A. C. McAllister, London, W. McK. H. McCullagh, London, *G. H. Mahony, Patna, P. Malpas, Liverpool, *M. Mehta, Bombay, D. Miller, Edinburgh, *C. MacD. Plumptre, Madras, F. Roques, London, H. H. Seymour, Hove, H. L. Shepherd, Bristol, J. E. Stacey, Sheffield, *B. H. Swift, Adelaide.

The following were admitted to Membership of the College:

G. S. Adam, Australia, *R. F. W. K. Allen, Nagpur, Doris C. Bates, Australia, *F. A. Bellingham, Australia, Margaret G. Bott, Nottingham, *Edith M. Brown, India, H. H. Caple, Canada, W. Clement, Glasgow, D. I. Finlayson, Edinburgh, W. F. Flint, Glasgow, U. Pati Gupta, India, W. Hunter, Newcastle-upon-Tyne, C. W. A. Kimbell, New Zealand, W. A. Liston, Edinburgh, Barbara M. MacEwen, London, Margaret M. McDowall, Halifax, K. A. McGarry, Australia, G. Maizels, Hull, *Gladys H. Marchant, Lucknow, C. F. Marks, Australia, H. S. Morton, London, B. C. Murless, London, L. Rich, Manchester, C. E. B. Rickards, Manchester, G. W. Robson, Canada, J. M. Sanson, Edinburgh, J. W. Schabot, South Africa, C. P. Scott, London, *Lydia I. H. Torrance, Calcutta, W. Waddell, South Africa.

At the annual general meeting of the College, held on April 24 with the President, Sir Ewen Maclean, in the chair, the following were elected to the Council in place of those retiring by statutory rotation. *Representatives of the Fellows*: Mr. J. P. Hedley, Professor E. Farquhar Murray, Professor Gilbert Innes Strachan, Professor William Gough, and Mr. D. G. Madill. *Representatives of the Members*: Mr. J. W. G. H. Riddell, Mr. John Sturrock, and Mr. A. W. Spain.

* *In absentia.*

Medical Notes in Parliament

Lord Astor gave notice that in the House of Lords on May 5 he would draw attention to the report of the Advisory Committee on Nutrition to the Ministry of Health.

The second reading of the Methylated Spirits (Scotland) Bill will be moved in the House of Lords on June 1 by Lord Kinnaird.

The House of Commons this week discussed the Livestock Industry Bill, and read it a third time on May 4. A debate was arranged on the salary of the Secretary for Mines, and the adjournment motion was taken on May 6. The Government has arranged for the House to rise till May 24.

Progress of Bills

The Woodhall Spa Urban District Council Bill to provide for the utilization and development of the mineral springs in the district of the council, has passed the House of Lords, and was read a first time in the House of Commons on April 28.

The Protection of Animals Bill, "to protect animals which, though nominally wild, are, in fact, kept in captivity or confinement and released for the purpose of being hunted or coursing," was read a first time in the House of Commons on April 28.

The Hydrogen Cyanide (Fumigation) Bill was reported in the House of Lords with one amendment on April 28. It was read a third time on May 4 and passed.

The Physical Training and Recreation Bill passed through a Standing Committee of the House of Commons on April 29 with slight amendments.

The Royal Assent was given in the House of Lords on April 29 to the Army and Air Force (Annual) Act, to the Education (Deaf Children) Act, and to the Edinburgh Royal Maternity and Simpson Memorial Hospital Order Confirmation Act.

Factories Bill in Committee

On April 20 the Standing Committee of the House of Commons which is examining the Factories Bill resumed discussion of Clause 63 (General conditions as to hours and employment of women and young persons), and the Chairman allowed a general debate on a series of amendments proposed by Mr. Alfred Short which collectively would reduce the hours of labour for women and young persons to 40 in any week. Mr. SHORT said women were more prone to accidents than men, and now that workshops were being brought into the Factories Bill there would be a further increase in accidents. The Home Secretary had already given statistics showing that the accident rate for boys and girls was much higher than for men in 1928, and that in the cotton district the accidents occurring to women and young persons while cleaning machinery were twice and thrice the proportion of accidents occurring to men. It was stated that in London alone 5,364 boys under 16 worked seventy-two hours a week. If children from 14 onwards were to work forty-eight hours a week and children over 16 forty-eight hours a week plus overtime, what opportunities would they have for recreation of the kind which was proposed in another Bill introduced by the Government?

Wing Commander WRIGHT, as an employer with a factory in which much repetitive work was done, said employers could get the same sort of production with much shorter hours. One of the problems of the day in Birmingham was that employers could not get juveniles for instruction in the trade because they were lured away into industries which paid wages higher than they would receive during their