through overcrowding. Moreover, 2,000 such camps would be necessary for the accommodation of London children alone. Therefore recourse is to be had to billeting. The local authorities in the "safer" areas are being asked to make a survey of the surplus rooms available in houses in their area, the basis taken being one habitable room per person. A point was raised with the Ministry's officials regarding health precautions with such wholesale billeting, but the questioner was reminded that school children are medically examined fairly thoroughly, and that medical care would continue while evacuation was proceeding. The children will be evacuated school by school to their appointed place. Teachers or other helpers will accompany them, possibly up to a maximum of one to every ten children. The school medical officers will probably also go to the places where the children are billeted. The reply to a question whether it was intended to augment the medical services in the rural areas to deal with the influx of children was inconclusive; the plans are still in the shaping. Children under school age will be accompanied by their mothers or other responsible persons. Arrangements will be made by the Government for transport and for increased supplies of food to be made available to shopkeepers in the receiving areas.

#### Health, Finance, Registration

In the survey which is immediately to be made it is considered that health visitors and sanitary inspectors will prove useful agents, with suitable voluntary assistance. Discretion and tact are urged upon the inquirers; they have no right to enter houses, in the face of objection, for the purpose of obtaining information. At the same time the point is made that if householders with suitable accommodation to spare do not agree voluntarily to accept children they may properly be informed that they may be required to take other persons. Householders will be paid at the rate of 10s. 6d. a week where one child is taken, and at the rate of 8s. 6d. where there are more than one. In the case of the pre-school children accompanied by their mothers, householders will be asked to provide lodging only at the rate of 5s. a week for each adult and 3s. for each child. The local authorities concerned received at the end of last week the registration forms on which there is provision for setting out the addresses of the dwellings, the number of habitable rooms, the number of persons ordinarily resident, the possible number who can be accommodated, the provisional decision of the local authority as to the number which should be taken, and, with other particulars, the amount of additional bedding required. It is stated that in some cases there may be difficulty as to the adequacy of the water supply, especially where the household is dependent upon a well. This should not ordinarily arise when the added population to a house will be only one or two children, but the knowledge of the local authority will no doubt enable it to deal with exceptional cases. In addition to houses there may be other buildings which could be brought into use to supplement the domestic accommodation, but schools should not be taken, as any surplus space there will be required for the education of the transferred children.

#### **CAPETOWN HEALTH REPORT**

Satisfactory statistics are produced in the annual report (1936–7) of the Medical Officer of Health, City of Capetown. General mortality, infant mortality, and mortality from respiratory and diarrhoeal diseases all show the lowest figures ever recorded. Comparing the figures for the year under review with the average over the previous five-year period the general death rate is seen to be diminished by 14 per cent., the infant mortality rate by 23 per cent., the death rate from tuberculosis by 18 per cent., from bronchitis and pneumonia by 32 per cent., and from diarrhoea and enteritis by 34 per cent. The improvement was greatest in the non-European section

of the population. Nevertheless, despite this improvement, the health statistics of the coloured people still compare unfavourably with those of the whites. The non-European death rate per thousand is 23.47, the European 10.33; infant mortality rate 128.86 against 41.03; tuberculosis death rate 4.76 against 0.82; maternal mortality rate 5.63 against 2.74. From a population comprising almost equal numbers of Europeans and non-Europeans the latter show far the larger number of deaths from bronchitis, all forms of pneumonia, and infantile diarrhoea. The number of deaths from the last-named disease was 324 among the coloured and 16 among the white. On the other hand, both cancer and diabetes caused more than twice as many European as non-European deaths.

#### Plague and Rats

No cases of plague are reported from Capetown itself, although during the year under review there were fifty-two human cases in the Union, including thirty in Cape Province. The City Council's rodent staff destroyed in the course of the year 3,642 brown rats, 4,030 black rats, and 619 gerbilles. The report comments on the remarkable increase in the number of black rats and the decrease in the number of brown rats in recent years. In 1926 the rat-catching staff destroyed 8,409 brown rats and 1,206 black rats. Since that date the number of brown rats caught annually has decreased to less than onehalf, while the number of black rats has increased more than threefold.

# Local News

### ENGLAND AND WALES

#### Vital Statistics for 1936

The Registrar-General's Statistical Review of England and Wales for 1936, Text Volume (H.M. Stationery Office, 3s.), contains the official commentary on the two volumes of vital statistics already published-namely, Tables Part I, Medical, and Tables Part II, Civil. It deals with the statistics of births, deaths, and marriages registered in 1936. the estimates of population, registrations under the Legitimacy Act and the Adoption of Children Act, and with the numbers of Parliamentary and local government electors. The estimate of the population of England and Wales in the middle of 1936 was 40,839,000 persons, of whom 19,591,000 were males and 21,248,000 females. The total is 194,000, or 0.48 per cent., greater than the estimate for the previous year and 887,000, or 2.2 per cent., greater than the population at the census of 1931. The figure of 887,000 is made up of the excess of births over deaths, about 599,000, and the balance of migration, 288,000. The average ages of the estimated population are 32.9 years for males and 34.8 for females. These are gradually increasing; in 1931 they were 31.8 and 33.5 respectively, and in 1921 29.9 and 31.2. The live births registered in 1936 were 605,292, or 6,536 more than in 1935. The corresponding birth rate was 14.8 per 1,000 population. A comparison with the rates in many other countries shows that only two of them-Austria and Sweden-had lower rates. The number of male births exceeded the number of female births in the ratio of 1,054 to 1,000. Stillbirths formed 4 per cent. of the total births registered. The natural increase in 1936-that is, the excess of live births over deaths—was 109,528, as compared with 121,355 in 1935 and 120,832 in 1934. The rate is 2.7 per 1,000 population.

#### ANALYSIS OF DEATHS

The report reviews in detail the mortality from various causes during the year 1936 and, in addition, contains a number of special studies. A comparison of the death rates for London and the aggregates of county boroughs, urban districts, and rural districts during 1911-14 with

those recorded during 1931-6 shows that owing to the more rapid decline of urban mortality the disadvantage as measured by mortality to residents in a large town compared with residents in the country is to-day little more than half what it was in pre-war days. Infant mortality due to prematurity, congenital causes, and birth injuries shows no improvement since 1930-2, though for all other causes in the aggregate the rate has fallen considerably. A comparison of mortality among married women at ages 35 to 65 from cancer of the uterus, breast, and ovary, according to the social class of the husband, shows an increasing mortality from uterine cancer in passing down the social scale, but for cancer of the breast and ovary the trend is in the opposite direction. Rheumatic fever death rates by sex and age for the years 1891-1900, 1911-20, and 1935-6 indicate a decline during the last twenty years at every age period, but the proportionate decrease has been much greater at ages over 35 than in childhood. The death rate attributed to angina pectoris continues to increase rapidly, but mortality attributed to other cardiovascular disease and arteriosclerosis has not changed much in the last ten years. From an analysis of deaths caused by road accidents it appears that more than half the fatalities were those of pedestrians, about onefifth were of pedal cyclists, another fifth were of motor cyclists, and the remaining tenth were of occupants of cars and other vehicles.

### IRELAND

#### Londonderry Medical Society

The annual dinner of the Londonderry Medical Society was held in Derry on December 17 last, the president, Dr. G. V. F. Leary of Castlederg, being in the chair. There was a large attendance of members and guests, not only from the vicinity of Derry but also from Tyrone, Donegal, Antrim, and Belfast. The Mayor of Londonderry, Sir James Wilton, was present, and among the Belfast guests was Mr. S. T. Irwin, president of the Northern Ireland Branch of the British Medical Association. The toast list was a happy one, and stimulated a most hospitable evening. The entertainment programme was up to the usual standard, special attention being given to an amusing monologue in Biblical language inspired by events in a court compensation case. The honorary secretary of the society, Dr. J. A. L. Johnston, was congratulated on all sides for the success of the event, and also thanked for the energy he has displayed in reviving this old-established medical society in Ulster during the past eight years.

#### Puerperal Emergencies

The annual report for 1937 of the Royal Maternity Hospital, Grosvenor Road, Belfast, records 1,729 admissions with twenty maternal deaths, a percentage mortality rate of 1.15. Eleven of these maternal deaths followed emergency admissions, which numbered 396, with a percentage mortality rate of 2.77. In this hospital a special unit, the Rea block, is set aside entirely for the treatment of potential, suspected, and established sepsis in any form. To this block are admitted as emergencies septic cases which have been delivered in their own homes; thither are also transferred cases delivered in the clean unit of the hospital which may later fall into the above categories. The report gives a very full summary of each fatal case. With regard to maternal morbidity, which showed a rate of 6.7 per cent., an analysis of eighty-two cases includes twenty-one of puerperal sepsis, sixteen of mastitis, and fourteen of infection of the urinary tract. A further series of statistical tables, of which there are eighteen in this report, deal with cases classified under the appropriate headings-for example, eclampsia gravidarum, prolapse of the cord, and Caesarean section. Appended is the district report, from which the following figures are taken: new patients for ante-natal treatment 1,882; new patients in infant clinic 493; total number of patients confined in their own homes 644.

#### Diphtheria Immunization and Mosquito Control in Belfast

In the Report on the Health of the County Borough of Belfast (1937) stress is laid on the importance of diphtheria immunization. It is stated that within a period of seventeen months 11,000 children completed the immunization course. Lectures have been given to parents, leaflets issued at child welfare centres and at schools, and advertisements inserted in newspapers, drawing attention to the dangerous nature of diphtheria as a children's disease and the desirability of immunization measures. "If diphtheria can be suppressed in Chicago and Toronto, surely this can be accomplished in Belfast." With regard to mosquito control the report states that considerable areas of breeding-ground have now been drained or filled in, thereby extensively reducing the necessary amount of spraying and oiling. This is still, however, considerable; 3,018 gallons of "Civic" fluid, 130 gallons of mixed crude oil and paraffin, and 435 gallons of petroleum fluid were used during the year. Six striking photographs showing mosquito breeding-grounds before and after draining and cleansing illustrate the report. It is stated that some of the worst breeding-places have been entirely wiped out by these measures.

## Correspondence

#### **Mechanical Respirators**

SIR,—It is singularly unfortunate that Sir Frederick Menzies's strong criticism of Lord Nuffield's gift of Both respirators should have been delayed from the date of its announcement (November 24, 1938) until to-day, a week after Lord Nuffield's departure on a trip as far afield as New Zealand, and a few weeks after Mr. Both had sailed for Australia via U.S.A. A letter so strongly worded as to arouse widespread publicity in the lay press calls for an answer, and I gladly avail myself of the opportunity of putting before you the relevant facts.

During the summer I was asked to give a lecture on artificial respiration. I decided to prepare a film on the subject, and to make it more interesting and instructive by incorporating in it many of the mechanical devices for supporting respiration. I told Dr. Topping of the L.C.C. of this film, and he kindly introduced me to Mr. Both at the L.C.C. Western Fever Hospital. There I and one or two provincial M.O.H.s saw the Drinker and Both respirators working side by side on patients recovering from respiratory paralysis. Dr. Topping modestly did not mention his own work on respirators, and he and the sister in charge told us that, in their experience, the Both was the best machine of its kind on the market. The only tragedy was that there were so few of them. I am informed that at this time the combined number of Drinkers and Boths in the country was nineteen.

The film on artificial respiration included views of the Drinker, Both, Bragg-Paul, Burstall, and other effective but less-known machines, all in action. A month later Lord Nuffield made a tour of inspection of the Medical Research Institute which bears his name. Amongst other things he saw the film, which was prepared under the supervision of Dr. C. L. G. Pratt, physiologist to the Department of Anaesthetics. A few days later Lord

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authority was that, because they maintained the man out of the rates, they ought to be entitled to receive his old age pension. This was a complete misconception. The object of the order was to build up for the patient something which he would not get for himself: a small capital which would be available on his leaving. The order was an extremely wise and just one.

The decision is valuable as showing that the law regards a rate-aided mental patient as a citizen with rights of his own and not as a mere dependant upon the local authorities.

## Universities and Colleges

#### UNIVERSITY OF LONDON

Recognition of Teachers

The following have been recognized as teachers of the University in the subjects indicated in parentheses:

sity in the subjects indicated in parentheses: St. Bartholomew's Hospital Medical College: Dr. H. A. Magnus (Morbid Anatomy). Guy's Hospital Medical School: Dr. S. J. De Navasquez (Pathology). St. Thomas's Hospital Medical School: Dr. W. J. Griffiths (Chemical Pathology); Mr. R. W. Haines (Anatomy). Middlesex Hospital Medical School: Mr. J. P. Monkhouse (Oto-rhino-laryngology). St. Mary's Hospital Medical School: Mr. A. C. Frazer (Physiology); Dr. E. R. Williams (Radiology). Charing Cross Hospital Medical School: Dr. H. G. E. Arthure (Obstetrics and Gynaecology); Mr. D. Trevor (Ortho-paedic Surgery). Westminster Hospital Medical School: Dr. R. C. Lightwood and Dr. S. P. Meadows (Medicine). King's College Hospital Medical School: Mr. T. Cawthorne (Oto-rhino-laryngology). laryngology).

#### **Appointments**

At a meeting of the Senate held on December 14, 1938, it was reported that R. M. Calder, M.B., had been appointed to the Graham Scholarship in Pathology for one year from November 1, 1938.

Sir Ernest Graham-Little, M.P., and Sir Holburt Waring, Bt., have been appointed members of the Court of Governors of the London School of Hygiene and Tropical Medicine.

Professor Major Greenwood, F.R.S., has been nominated for appointment as a co-opted member of the Court of Governors of the London School of Economics.

#### Lectures

A course of two lectures on "Pre- and Post-operative Management of Surgical Cases" will be given by Professor E. R. Flint in the physiological lecture theatre of St. Bartholomew's Hospital Medical College on Thursday and Friday, February 16 and 17, at 5.30 p.m. At the first lecture the chair will be taken by Professor J. Paterson Ross. A lecture on "The Present Position of the Cancer Problem"

A lecture on "The Present Position of the Cancer Problem" will be given by Dr. W. E. Gye, F.R.S., director of the Imperial Cancer Research Fund, at St. Thomas's Hospital Medical School on Monday, March 20, at 5 p.m. A course of two lectures on "The Action of Drugs in Muscular Fatigue and as Circulatory Restoratives" will be given by Professor J. H. Burn at University College on Monday and Wednesday, February 6 and 8, at 5 p.m. On Wednesday, January 25, at 7.30 p.m., Professor V. H. Mottram will give the first of a course of twelve lectures on "Dietetics and Nutrition" at Gresham College, Basinghall Street, E.C. Tickets and further particulars may be obtained from the University Extension Registrar, Senate House, Street, E.C. Tickets and further particulars may be obtained from the University Extension Registrar, Senate House, University of London, W.C.1.

Dr. Maitland Radford, medical officer of health for St. Pancras, will deliver a lecture on "Slum Clearance" at University College, Gower Street, W.C., on Wednesday, March 8, at 7.30 p.m. The lecture is open to the public without fee or ticket.

The following candidates have been approved at the examination indicated:

M.D.—Branch I (Medicine): R. F. Clarke, J. G. Clothier, J. H. Cobb, P. C. C. de Silva, G. G. Gillam, F. J. D. Knights, K. A. Latter, E. Samuel, R. N. Tattersall. Branch II (Psychological Medicine): Joyce McConnell. Branch IV (Midwifery and Diseases of Women): J. E. Giesen, Nora L. Keevil, E. R. Rees, C. G. Roworth, Mary G. Tate, Eileen M. Whapham. Branch V (Hygiene): M. Markowe.

#### UNIVERSITY OF GLASGOW

We are informed by Professor Emile de Grósz that the lecture on "The Surgery of the Eye in Hungary," which was announced in this column on December 31, 1938, as to be given at the Tennent Memorial Institute, Glasgow, on January 18, will be delivered by him on April 25.

#### UNIVERSITY OF WALES

The following candidates have been approved at the examina-tion indicated:

D.P.H.—Part 1: Beryl Badham, R. T. Bevan, D. J. Davies, C. T. Jones, H. R. Stubbins, A. J. Thomas.

#### ROYAL COLLEGE OF SURGEONS OF ENGLAND

The course of lectures for 1939 is arranged as follows: January 16, Professor Cecil A. Joll, The pathology, diagnosis, and treatment of Hashimoto's disease (struma lymphomatosa); and treatment of Hashimoto's disease (struma lymphomatosa); January 18, Professor J. Paterson Ross, The effects of radium on carcinoma of the breast; January 20, Professor A. J. Gardham, Classification of new growths of the mouth in relation to treatment and prognosis; January 27, Professor E. W. Riches, Hydronephrosis: the results of conservative treatment; January 30, Professor H. T. Simmons, Relapse following sympathectomy; February 1, Professor A. L. d'Abreu, Congenital cysts of the lung and pleura; February 6, Professor F. J. Sambrook Gowar, The post-operative com-plications of pulmonary lobectomy: a clinical and experi-mental study; February 8, Professor Ronald Edwards, Studies in experimental pneumonectomy and the development of a in experimental pneumonectomy and the development of a two-stage operation for the removal of a whole lung; February 10, Professor J. H. Mulvany, A differentiation in the mechanism, symptomatology, pathology, and treatment of two types of exophthalmos occurring in association with thyrotoxicosis. All the above lectures begin at 5 p.m. On February 14, at 4 p.m., Mr. W. Sampson Handley will deliver the Hunterian Oration.

# ROYAL COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS

The second William Blair-Bell Memorial Lecture will be delivered by Mr. Alan Brews on "Hydatidiform Mole and Chorion Epithelioma" at the College House, 58, Queen Anne Street, W., on Friday, January 27, at 5.30 p.m. It is hoped that as many Fellows and Members as possible will attend; registered medical practitioners not members of the College will also be welcomed.

### The Services

#### DEATHS IN THE SERVICES

Lieutenant-Colonel HORACE COCKS, R.A.M.C. (ret.), died at Petersfield on January 2, within a month of his eightieth birthday. He was born at Shipdham, Norfolk, on January 31, 1859, and was educated at Edinburgh University, where he graduated M.B., C.M. in 1883. After filling the post of house-surgeon at Preston Royal Infirmary, he entered the Army as surgeon on January 30, 1886. He became lieutenant-colonel after twenty years' service and retired on January 4, coloner after twenty years service and refined on January 4, 1913. He rejoined on January 15, 1916, for service in the war of 1914-18. After the war he was employed as a deputy commissioner of medical services in the Cardiff area. He had been a member of the British Medical Association for thirty-two years.

Major HENRY PRIESTLEY BIRCH, R.A.M.C. (ret.), died at Ealing on January 2, aged 79. He was born in London on December 24, 1859, and was educated at University College Hospital and took the M.R.C.S. and L.R.C.P. in 1882. He entered the Army as surgeon on February 2, 1884, became major after twelve years' service, was placed on half-pay on account of ill-health on September 14, 1903, and retired on account of III-health on September 14, 1903, and retired on February 17, 1904. He served in the Sudan in the Nile campaign of 1884-5, receiving the Egyptian medal with clasp and the Khedive's bronze star; and in South Africa in 1900-2, when he took part in the relief of Kimberley and in the opera-tions in the Orange Free State, including the actions of Paardeberg and Dreifontein, receiving the Queen's medal with three clasps and the King's medal with two clasps. He rejoined for service in the war of 1914-18 from August 6, 1914 He had been a member of the British Medical Asso-1914. He had been a member of the British Medical Association for forty-eight years.