

From the small number of cases no conclusion could be drawn, but in view of the admitted inadequacy of treatment at present advocated it was worth a trial, but in full doses—say, 10 grains every four hours. Dr. D. J. GAIR JOHNSTON described four undoubted and two probable cases of abortus fever which he had encountered since 1931. Dr. M. H. PAPPWORTH suggested two reasons why brucellosis infections were possibly being missed. First, little attention had been paid in this country to porcine brucellosis. No case of brucellosis of porcine origin had been reported in this country, although over a hundred such cases had been noted in the U.S.A. Secondly, clinicians usually regarded brucellosis infections as protracted fevers, but cases had been described of proved brucellosis infection in which the total pyrexial period was only ten days or less. In these cases the patients would have apparently recovered before the occurrence of demonstrable agglutinins in the blood. The only way to diagnose such cases was by blood culture, a method not in common use in this country for this group of infections. Might not some cases of obscure pyrexia lasting up to ten or twelve days and followed by complete recovery be examples of brucellosis? He found it difficult to accept the view that the infection was usually spread by milk because of the age incidence and the occurrence of cases of porcine origin. Might not infection from meat be more important?

At the same meeting Professor R. E. KELLY read a paper on recurrent peptic ulceration, which was illustrated by a coloured film of the operation for jejunal ulceration and gastro-colic fistula.

This also provoked an interesting discussion, in which Mr. H. C. W. NUTTALL, Mr. A. KIRK WILSON, Mr. PHILIP HAWE, Mr. COSBIE ROSS, and Professor HENRY COHEN took part.

laboratories of the Burden Mental Research Trust are also being considerably enlarged and will be ready for occupation in about three months. The two together will give Stoke Park great importance among mental institutions. Further, the committee of administration of the Trust has accepted an invitation to be represented at the triennial meeting of the American Associations for Psychiatry and Mental Deficiency by the chairman and the principal investigator (Professor R. J. A. Berry and Dr. Fraser Roberts). The invitation has been accepted in order to place before the American medical public some account of the work of the Trust during the five years of its existence. Mrs. Burden has also now made possible the continuance of the Trust on a permanent basis.

The research clinic at Stoke Park includes a large biochemical laboratory, an electrophysiological laboratory, and an endocrinological laboratory with animal house. In addition, there are four small research laboratories, with the usual other facilities—workshop, photographic rooms, etc. There are two wards accommodating ten beds each. The staff, under the direction of Professor Golla, includes Mr. W. Grey Walter (electrophysiology) and Mr. N. S. L. MacLeod and Mr. A. Tingey (biochemistry). Dr. Max Reiss, who holds a research grant, will be responsible for the endocrinological work. The programme of work contemplated includes researches on cortical excitability, and the electro-encephalography and cortical potential of cases of epilepsy and cerebral tumour. It is proposed if possible to utilize these diagnostic methods in operative treatment of such cases, for which the institute possesses admirable surgical facilities. Research will also be undertaken into nervous metabolism and endocrinology of schizophrenia and allied conditions. The clinic includes an admirable operating theatre and sterilizing room, and the question of affording facilities for the development of neurosurgery in Bristol is under consideration.

#### Need for a Safe Milk Supply

The Minister of Health, Dr. Walter Elliot, and the Parliamentary Secretary to the Ministry of Agriculture, the Earl of Feversham, on February 24 received a large and influential deputation from the People's League of Health. The deputation, which included Miss Olga Nethersole, founder of the League, was introduced by Dr. C. O. Hawthorne. In welcoming the deputation the Minister announced that he had received apologies for unavoidable absence from Viscount Dawson of Penn and Lord Horder, regretting their inability to accompany the deputation, as they had arranged to do. Lord Dawson wrote that he had always supported the principle that all milk intended for human consumption should either be pasteurized or come from certified tuberculin-tested cattle. Lord Horder wrote that his sympathies were entirely with his colleagues of the People's League of Health. Sir Henry Gauvain said that he considered it incredible that milk, the nation's most precious food, might be supplied without restrictions as to its safety. No other food was thus exempt, and in the interests of both the community and the farmers we should set our house in order and ensure the safety of all who consumed it. Sir Walter Langdon-Brown said that the economic difficulties in the way of safe milk legislation might be considerable, but they would not be overcome by raising false issues. It was misleading to allege that the medical profession was divided on this subject. Why should the views of an inconspicuous minority against pasteurization be so frequently quoted against the weight of opinion of the profession as a whole? Sir John Ledingham said that elaborate investigations had shown that pasteurization in no way materially affected the nutritional value of milk. Dr. Veitch Clark, Dr. A. S. M. Macgregor, and Dr. Maule Horne, medical officers of health respectively for Manchester, Glasgow, and Poole, supported the views put forward and said that their local authorities were prepared to take advantage of permissive powers to control the milk sold in their areas other than milk coming from

## Local News

### ENGLAND AND WALES

#### The Burden Neurological Clinic

The need for more research into the causes of mental defects and abnormalities, and borderline conditions, is so widely recognized that there will be general satisfaction at the establishment of a neurological research centre at Stoke Park, near Bristol. Mrs. R. G. Burden, the administrator of the Stoke Park Colony, who has already provided a centre for the investigation of these problems on genetical lines, has now, with the consent of her co-trustees, decided to establish a centre for clinical research, which will be formally inaugurated in the spring of this year. The new centre, to be known as the Burden Neurological Clinic, will be housed within the grounds of Stoke Park, but fenced off from the colony and provided with a separate entrance. In addition to the unusually wide range of cases available for study at Stoke Park itself, it is hoped to secure the co-operation of the other mental deficiency institutions, as well as of the mental hospitals, in the district. It is to be noted that the beds in the new research unit will be under the sole control of the medical director. Sir Laurence Brock (Chairman of the Board of Control) has, at the invitation of the founder and with the consent of the Minister of Health, agreed to join the committee and to be its chairman, and Dr. F. L. Golla, professor of the pathology of mental diseases in the University of London, has consented to act as director. Other members of the committee will be Dr. Charles Visger, Dr. H. H. Carleton of Bristol University, Professor E. D. Adrian, F.R.S., of Cambridge, and Dr. G. W. T. H. Fleming. Simultaneously with the opening of this new neurological clinic the buildings and

tubercle-free herds or milk treated by pasteurization or other officially recognized heat methods. Major Brennan De Vine, President of the National Medical Veterinary Association, said that the percentage of milk samples in large towns showed from 6 to 13 per cent. infected to some degree with tubercle bacilli. The deputation urged the value of milk as a food and the importance of legislation to ensure that consumers might rely on the cleanliness and purity of the milk supply. The People's League of Health had continuously urged that safety—meaning by this freedom from risk of tuberculosis and other communicable diseases—was, not less than cleanliness and purity, an essential quality of the milk supply if unnecessary deaths, illness, and disability were to be avoided.

In reply to the deputation the Minister said that not only he but the Government as a whole were convinced that the objective that the League put forward—that of a safe and pure supply of milk—was right and just. They would not, of course, expect him to anticipate the scope of any new legislation on the subject of milk, but it seemed to him to be clear that there was a need for further education of public and Parliamentary opinion. He had been considering what part the Government could play in this, and he had asked one of the more prominent of the younger medical men in this country to undertake the collation and review of the existing evidence on the whole subject of pasteurization and the safety of milk supplies. When this task had been completed he proposed to publish the result.

#### The New St. George's Hospital, London

When a schism among the governors of the Westminster Hospital in 1733 resulted in the foundation of St. George's Hospital, Lanesborough House facing the park at Hyde Park Corner was selected for its domicile. The next (still existing) building, completed in 1834, was reorientated altogether with the main entrance facing the Green Park and Constitution Hill. Now that rebuilding is once more to be undertaken the architects of the successful plan, Messrs. W. H. Watkins and Partners, have reverted to the Lanesborough idea of a main façade looking northward over Hyde Park. They have adopted neither the X form of building, well exemplified in London by University College Hospital, nor the H plan of several other hospitals (and incidentally of one of the designs "placed" by the assessors of the competition): the site is, of course, far too restricted for anything in the nature of separate or linked pavilions. Indeed the limitations thus imposed must have been a severe handicap on all the architects: the successful design overcomes them with great ingenuity, while maintaining a dignity and poise worthy both of London and of a great hospital. The approach is by a road leading southwards from Knightsbridge under a large archway tunnelling the centre of the whole mass. On the left (east) side of this road is the access to the administrative centres, on the right (west) side to the casualty departments, which are sited facing Grosvenor Crescent Mews. The board room, which in the Lanesborough days was at the back of the house looking southwards over the garden, and in the existing hospital is lighted from the interior courtyard, will be placed where the front entrance is now, occupying the height of two floors. On the lower ground floor in the north-west corner are the medical school common rooms, luncheon rooms, etc.; in the south-west angle are the out-patient departments, with the dispensary just north of them, almost in the centre of the pile. The lower basement houses machinery and power sources of various sorts; the basement itself is devoted to stores, treatment rooms, gymnasium, post-mortem department, a squash court, and the sisters' and nurses' dining and changing rooms (at the south-east corner). On the ground floor itself the north-west portion houses the medical school's lecture theatres and library; at the south end of this floor are the surgical clinics. The wards, eight

to the floor, are planned for surgical cases on the third floor, orthopaedic and psychiatric on the fourth, medical on the fifth, obstetric on the sixth, and pay wards on the seventh; the operating theatres and isolation wards are on the eighth floor. The architect's plans provide accommodation for 500 in-patients. The central approach road leads near its southern extremity into an underground garage; with the exception of an access for stores at the western extremity of the Knightsbridge frontage this central arch is the only entrance. The framework of the new building will be of steel faced with Portland stone; the cost is estimated at £700,000; and if it is built in one piece it is thought that eighteen months would suffice for completion of it—this is mainly, it may be supposed, a question of finance. The inclusion of a complete medical school, administrative and residential quarters, and a fully equipped clinical hospital in one and the same building will make the new St. George's unique among institutions for the healing of the sick.

#### Society of Apothecaries Dinner

A livery dinner of the Society of Apothecaries of London was given in the hall of the Society on February 21. After the loyal toasts had been honoured the Master, Dr. Reginald Hayes, proposed "The Royal College of Physicians of London and the Royal College of Surgeons of England." He traced the association of the Society of Apothecaries with the two Royal Colleges from the seventeenth century, and pointed out that the Society had worked in co-operation with the Royal College of Surgeons before it was "Royal" and, indeed, before it was a "College." With the toast he coupled the name of Mr. Hugh Lett, P.R.C.S., who himself had been Master of the Apothecaries only last year. Mr. Hugh Lett, in replying, recalled the "Battle of the Dispensaries" and the incidents which led up to it, and said that the Society of Apothecaries was the only licensing body in existence that was a city company and the only city company that was a "society." The Senior Warden, Mr. L. Vernon Cargill, proposed the toast of "The Guests," and welcomed particularly the Master of the Barbers Company, which still retained many of the treasures of the old Barber-Surgeons' Company, and particularly Holbein's painting of Henry VIII presenting the Act of incorporation to the barbers and surgeons. He paid tribute to the Royal College of Obstetricians and Gynaecologists, saying that though the College was only founded in 1929 it had already some 800 fellows, members, and diplomats. It had, too, played an important part in connexion with the Midwives Act of 1936. Professor W. Fletcher Shaw, President of the Royal College of Obstetricians and Gynaecologists, in replying for the guests gave a dream-like prospect of the future of the new Royal College and hoped that it would build up traditions as honourable as those of the senior Colleges. Mr. J. L. P. Denny, Master of the Barbers Company, congratulated the Society of Apothecaries on being the only guild practising in the full sense but still retaining its connexion with the city. The Royal College of Surgeons, he said, was merely "a lineal descendant of a Siamese twin tacked on to the Barbers Company by Henry VIII."

#### Royal Sussex County Hospital: A Fellowship in Anaesthetics

At a recent meeting of the Board of Management of the Royal Sussex County Hospital, presided over by the chairman, Dr. Donald Hall, an offer of £300 per annum for a period of seven years to meet the salary of a resident anaesthetist was announced. Since that meeting Dr. Hall has had an interview with Professor R. R. Macintosh of Oxford, and on February 14 the Board was in a position to approve in principle regulations governing this new and full-time post, which is to be known as the Mayo Fellowship in Anaesthetics. The Nuffield Professor of Anaesthetics (Professor Macintosh) will act in conjunction with the Royal Sussex County

Hospital in all matters concerned with the fellowship, which will be administered by trustees. Further matters connected with this appointment have been placed in the hands of a special committee with power to invite candidates for the vacancy, and an announcement appears in our advertisement pages this week. The holder will be granted facilities for research work in the hospital and in the Stephen Ralli Memorial Laboratory. This interesting appointment, made possible by the generosity of a Sussex resident, is not financially one of Lord Nuffield's many benefactions, though the Board is fortunate in having the co-operation of the Nuffield Professor of Anaesthetics, who has volunteered to help in the choice of a candidate and also to keep the person appointed under his direction for research. At the Royal Sussex County Hospital 9,836 anaesthetics have been given in the operating theatres alone during the past three years, so there is abundance of material, and the Stephen Ralli pathologist, Dr. L. R. Janes, will give the Mayo anaesthetist every facility for work in his laboratory. Thus the new departure is not merely for routine administration of anaesthetics but for the initiation of original work. There are already on the staff three honorary anaesthetists, with two assistants, and the Mayo anaesthetist, with ample time for research, will be on duty outside their routine hours for the purpose particularly of giving anaesthetics for acute surgical emergencies.

## SCOTLAND

### Health of Scotland

A preliminary statement of vital statistics for the year 1938 has been issued by the Registrar-General. The principal feature for 1938 was the low death rate of 12.6 per 1,000, which was the lowest ever recorded for Scotland and 1.3 lower than the rate for the previous year. The decrease was largely due to a decline in the number of deaths from influenza and from diseases of the respiratory system. The birth rate of 17.7 per 1,000 was 0.1 higher than the figure for the previous year, although it was 0.1 below the average for the preceding five years. Deaths from all causes numbered 62,952, and of children under 1 year 6,161. The infant mortality rate was 70 per 1,000 living births, which is the lowest recorded for Scotland, the previous lowest being 77 in 1935. The death rate from bronchitis was the lowest ever recorded, while that from pneumonia was 15 lower than that recorded in 1934, which was the lowest for any recent year. All forms of tuberculosis accounted for 3,431 deaths, of which 2,580 were from the respiratory form. Compared with the previous year there were 211 fewer deaths from pulmonary tuberculosis and 21 fewer deaths from non-pulmonary forms of the disease. Deaths from malignant disease again increased, being 8,073 in 1938, as compared with 7,810 in the previous year.

### Lister and his Edinburgh Contemporaries

In a short and particularly well-written paper recently contributed to the *Edinburgh Medical Journal* (1938, 45, 805) Dr. C. E. Douglas tells of Lister and his contemporaries at Edinburgh as he knew them. He shows how Lister, driven by the Fates, went to Scotland for a month before settling in London after a postgraduate course in France and Germany. The month became a quarter of a century, and when he returned to England he brought an international reputation, had become an Episcopalian, and had married a Scottish lady. Dr. Douglas tells of Syme and of Simpson; of Mackenzie and of Spence; of Joe Bell and of Patrick Heron Watson—all great operating surgeons who added lustre to the Edinburgh school of medicine. Of Watson, trained in

the Crimea, he says: "A man is brought in anaesthetized into the theatre on a mattress. 'Pat' strolls in, one hand in his pocket, stoops and examines the hip, gives a short description of a dislocation. He then takes the foot, sweeps the limb round in a wide circle, flexes the knee, and with another circular movement the head slips into place with consummate ease." Such a light is illuminating, for we think of Patrick Heron Watson as a physician and an authority on dietetics rather than of the period when he practised as a surgeon. Of "Joe" Bell's foresight Dr. Douglas gives an excellent example. The nattiest of men in regard to his dress, "Bell's preparation for an operation was to turn back his coat sleeves, displaying a vast expanse of immaculate cuff. Once he had carried out a delicate operation involving the removal of a parotid tumour. A small vessel had been cut and had spotted his cuff. 'This is the only serious point,' says Bell, indicating with his scalpel the spots of blood. The usual laughter from the benches followed, few noticing what the teacher meant—to wit, the pale complexion of the droplets, indicating the marked degree of anaemia. This in a day when haematology as a science did not exist was an important observation." Such reminiscences by actual witnesses are of great value to the historian of medicine. They recall the personality of the individual rather than the broader characteristics by which he is apt to be remembered.

### Chiropody in Scotland

At a conference luncheon held in Edinburgh on February 18 by the Scottish branches of the Incorporated Society of Chiropodists, Lieutenant-Colonel A. D. Stewart, F.R.C.S., superintendent of the Edinburgh Royal Infirmary, said that he was proud of the association of chiropody with the infirmary and looked forward to an extension of the work in relation to hospitals. Dr. R. W. Craig, Scottish Secretary of the British Medical Association, said that the public generally had a very imperfect realization of the far-reaching effects which foot discomfort could produce on other parts of the body. Many nervous disorders owed their beginnings to this, and the Society of Chiropodists was therefore doing much to promote the physical well-being and fitness of the people and thus rendering a service of national importance. At the present time there was still a large number of so-called chiropodists who were "mistreating" the public, and this was a matter which must receive attention from the Incorporated Society, who stood for an exceedingly high standard. Mr. Hanby, who replied, said that within the short space of two months the Group Council had drawn up a set of by-laws covering the standard of education and examination for chiropodists, which would affect the whole profession of chiropody in the British Isles.

### Relief of Incurables

At the annual meeting on February 24 of the Association for the Relief of Incurables in Glasgow and the West of Scotland Sir James Macfarlane said that the association existed for the maintenance of Broomhill House for Incurables and the Lanfine Home for Consumptives. The latter had come into existence in 1904, and during the first five years of its work 24 per cent. of the patients under care had been discharged improved, while 64 per cent. had died. In the five years ending with 1938 19 per cent. of the patients had died and 32 per cent. had returned home improved in health, while 30 per cent. had been transferred to other hospitals for specialized treatment. These changed conditions had brought a new problem, and a scheme of extension had been approved by the directors for the treatment of patients "out of bed." At Broomhill Home eleven patients had been in continuous residence for over thirty years, while the general average residence was over ten years.

constant medical supervision until a definite diagnosis has been made. In most cases this period of investigation need not entail any absence from school providing that games and physical exercises are suitably restricted. I wish to thank Dr. V. T. Thierens, medical officer of Health, County Borough of Blackburn, for his permission to give the figures quoted in this letter.—I am, etc.,

J. F. WARIN,

Birmingham, Feb. 22. Assistant Medical Officer of Health.

### Vaginal Cysts: Persistent Vesiculæ Seminales?

SIR,—I was recently consulted by a primipara, aged 29, at the beginning of her fourth month of pregnancy. She complained of a feeling of swelling and discomfort in the posterior part of the "forebody," which symptoms had been present since the beginning of her pregnancy and had been steadily increasing in severity. On examination I discovered what I took to be a cyst about the size of a hen's egg low down on the posterior vaginal wall. As this threatened to prove a serious complication at parturition I advised immediate operation. The patient was admitted to Newcastle General Hospital, where the cystic condition was dealt with radically by Mr. J. Collingwood-Stewart. His report is of particular interest: "At the operation two distinct cysts were found, one on either side of the mid-line between the posterior vaginal wall and the rectum, and they contained glairy fluid. These cysts were considered to be Gärtner duct cysts."

Cysts of Gärtner's duct are described as occupying an antero-lateral position in the vagina in close proximity to the urethra. Cysts of the posterior vaginal wall are described as single and due to trauma. According to embryological precept, the Wolffian ducts in the female usually fail for some obscure reason to complete their full course and come to an untimely end just lateral to the upper part of the uterus or of the cervix. When they do occasionally, so to speak, make the distance, they traverse the walls of the vagina laterally and are there known as the ducts of Gärtner; and these are the ducts which give rise to the Gärtner duct cysts. I have never seen any reference in the literature to the possible presence in the female of rudimentary vesiculæ seminales, which as offshoots of the ducts of Gärtner should be located low down between the vaginal and rectal walls; but it is surely as reasonable to expect to find homologues of the vesiculæ seminales in the female as it is to find nipples in the male and a penis (clitoris) in the female. I therefore suggest that the case I have quoted is one of "cysts of the seminal vesicles," and, as a corollary, that some of the cysts of the posterior vaginal wall usually described as traumatic may be found to be of that nature.—I am, etc.,

Newcastle-upon-Tyne, Feb. 24.

J. A. L. MAGEE.

### Vitamin D in Dietetics

SIR,—We thoroughly agree with the points of view put forward by your correspondent Dr. Chalmers Watson (February 18, p. 357). Unfortunately, the available methods for estimating the vitamin content of food are subject to very wide margins of error, and, further than this, all foods that are rich in vitamins vary quite widely in their vitamin content. This has led to extreme confusion both as to the richness of normal foods and as to the actual human requirements for the various vitamins. Within our own experience it takes five years or longer to arrive at a reasonably accurate quantitative figure for the richness in vitamin value of any food.

Butter and cod-liver oil may be cited as two examples, and the work, besides being tedious, is very expensive. The dictum that we should rely on the proved value of fresh foods until the quantitative situation has been clarified is certainly appropriate. Our efforts, so far as cod-liver oil is concerned, have always been concentrated on conserving the full fresh food value of this oil and making it available in an absolutely unspoiled condition both to the medical profession and to the user.

Your correspondent Dr. Eva McCall (February 11, p. 300) directed attention to the fact that the prejudice against cod-liver oil mentioned by Miss Lindsay and Professor Mottram (January 7, p. 14) was probably exaggerated. The truth of the matter is that cod-liver oil is much more perishable in its quality as a food oil than in its vitamin value, which can remain intact long after the oil has, by mishandling, become unthinkable as a food or even as a medicine. Another factor in operation with her has probably been the lower intake of oil itself, since the *British Pharmacopoeia* malt and oil has only 10 per cent. by weight of oil present in it. It is nowadays unnecessary to swallow damaged, repellent oil or excessive quantities of oil to get all the vitamins A and D necessary.—I am, etc.,

K. MACLENNAN,

Hull, Feb. 24.

General Manager, British Cod Liver  
Oil Producers (Hull) Ltd.

## Universities and Colleges

### UNIVERSITY OF OXFORD

On February 25 the honorary degree of D.Sc. was conferred on Dr. del Rio Hortega, formerly director of the National Institute of Cancer, Madrid.

P. E. H. Adams, B.M. (Exeter College), has been re-elected to the Margaret Ogilvie's Readership in Ophthalmology until September 30, 1941.

At a Congregation held on February 25 the following medical degrees were conferred:

B.M.—B. A. M. Brown, R. W. Parnell, J. M. Almond.

### UNIVERSITY OF CAMBRIDGE

At a Congregation held on February 25 the following medical degrees were conferred:

M.D.—A. Willcox.

M.B., B.CHIR.—\*M. J. Ingram, \*C. G. Rob, \*P. C. Conran, \*G. Bourne, J. I. H. Laurie, A. Leese, E. W. O. Adkins, J. Arnott, K. G. Bergin.

\* By proxy.

### UNIVERSITY OF LONDON

At a meeting of the Senate, held on February 22, H. P. Himsworth, M.D., F.R.C.P., was appointed, as from April 1, to the University Chair of Medicine, tenable at University College Hospital Medical School.

Mr. Lionel V. Cargill, F.R.C.S., was appointed a Fellow of King's College.

The title of Professor of Physics in the University was conferred on Mr. Gilbert Stead, M.A., in respect of the post held by him at Guy's Hospital Medical School.

### ROYAL COLLEGE OF SURGEONS OF ENGLAND

#### Museum Demonstrations

A course of museum demonstrations in the theatre of the College began on February 27, when Mr. R. St. Leger Brockman demonstrated some inflammatory lesions of the alimentary canal. To-day (Friday, March 3) Dr. A. J. E. Cave will speak on the anatomy of the salivary glands; on March 10 he will discuss the anatomy of the pharynx and oesophagus; and on March 17 the anatomy of the stomach. On March 6 and 13 Mr. L. W. Proger will show new specimens. All the demonstrations commence at 5 p.m., and are open to advanced students and medical practitioners.

1,850 cases. Of these cases about 220 had subsequently been certified as having died from silicosis. It is not possible to give any figure for the average period between the issue of the disablement and death certificates.

*London Voluntary Hospitals and the L.C.C.*—Mr. DAVID ADAMS asked Dr. Elliot on February 16 whether the conference about to be held under his aegis between the London County Council and the voluntary hospitals of London was to work on the basis of preparing recommendations applicable to hospital systems throughout the country. He also asked what progress had been made in the carrying out of Lord Sankey's recommendation that the voluntary hospitals of the country should form themselves into an association, regionally organized, for the purposes of joint action. Dr. ELLIOT replied that the conference which was held recently between representatives of the King Edward VII Hospital Fund, the Voluntary Hospitals Committee for the County of London, and the London County Council was of an exploratory character and no decisions were taken. It did not cover hospitals outside London. A committee of the British Hospitals Association was engaged in formulating a scheme of regional organization which was meeting with general approval. The committee hoped to issue a statement in about six months.

*Medical Inspection Arrangements at Croydon.*—Dr. ELLIOT, in an answer to Sir Henry Morris-Jones on February 16, said the duties of medical officer at the Croydon Airport were carried out by members of the medical staff of the town council under the general control of the medical officer of health. The services of a medical officer were available for the airport at all times. The measures to be taken to prevent the introduction of infectious diseases were prescribed in the Public Health (Aircraft) Regulations, 1938, the responsibility for the administration of which rested with the town council.

*Medical Referees in Scotland.*—Mr. ROBERT GIBSON asked on February 20 how many medical referees in Scotland under the Workmen's Compensation Act had been dismissed from office or had not had their appointments renewed during the last few years. Mr. GEOFFREY LLOYD replied that during the past five years four appointments which expired had not been renewed. No referee had been dismissed.

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## Medical News

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The first Suckling Memorial Lecture will be delivered by Sir Walter Langdon-Brown in the lecture theatre of University College Hospital Medical School, University Street, Gower Street, W.C., on Tuesday, March 7, at 5 p.m. His subject is "Visceral Symptoms in Emotional States," and the chair will be taken by Dr. F. M. R. Walshe. The lecture is open to all qualified practitioners and medical students.

Professor E. D. Adrian, F.R.S., will deliver an address on "The Development of the Sense of Hearing" at the Royal Institution, 21, Albemarle Street, W., on Friday, March 10, at 9 p.m.

The Very Rev. W. R. Matthews, D.D., will give an address entitled "Ethics and the Supernatural" before the British Institute of Philosophy on Tuesday, March 14, at 8.15 p.m., at University College, Gower Street, W.C. Cards of admission can be had from the Director of Studies at University Hall, 14, Gordon Street, W.C.1.

The annual address to senior students and newly qualified practitioners, arranged by the Metropolitan Counties Branch of the British Medical Association, will be given on Tuesday, March 14, in the Great Hall of B.M.A. House, Tavistock Square, W.C.1, at 5.30 p.m., by Mr. McAdam Eccles, whose subject will be "Pitfalls in the Final Examination and the First Year of Practice." The address will be preceded by a reception at 5 p.m.

In our advertisement columns this week the University of London invites applications for the University Chair of the Pathology of Mental Disease, tenable at Maudsley Hospital. The Professor also will be appointed by the London County Council to the office of director of the Central Pathological Laboratory at Maudsley Hospital and pathologist to the Council's Mental Services.

The ninth Sir Robert Jones Lecture was given by Dr. A. Bruce Gill, professor of orthopaedic surgery, University of Pennsylvania School of Medicine, on the subject of "Treatment of Congenital Dislocation of the Hip," on February 23 at the Hospital for Joint Diseases, Madison Avenue, New York City.

An important series of papers on dangerous gases in the petroleum and allied industries will be discussed at a whole-day meeting of the Institute of Petroleum on Tuesday, March 14, at the Royal Society of Arts, John Street, W.C., beginning at 10 a.m. The Council of the Institute extends an invitation to this meeting to all persons interested, both members and non-members. Among the many contributions will be papers on the physiological effect of toxic vapours and on the detection of toxic gases in industry, and on the safety of electrical apparatus for use in inflammable gases and vapours.

Discussions on "The Future of the Public Health Services," opened by Councillor W. Asbury, and on "The Use of Stainless Steel in Food Industries," opened by Mr. C. C. Hall, will take place at a sessional meeting of the Royal Sanitary Institute at Sheffield Town Hall on Friday, March 10, at 5 p.m.

The Society of German neurologists and psychiatrists will hold its fifth annual meeting at Wiesbaden from March 26 to March 28, when the following subjects will be discussed: (1) Psychical disturbances of old age. (2) Circulation and the nervous system (in conjunction with the German Society for Internal Medicine). Further information can be obtained from Dr. Nitsche, Pirma, Bez, Dresden.

A tropical medicine week will be held at Athens in April. Further information can be obtained from the Institut für Tropische Krankheiten, Hamburg.

The twenty-fifth anniversary of the founding of the British Psycho-Analytical Society is being celebrated by a dinner in London on Wednesday, March 8.

The French liner *Champlain* will leave Havre on April 2 on a French medical cruise which will include Lisbon, Tangier, Casablanca, Agadir or Port-Etienne, Dakar, and Madeira before returning to Havre on April 16. For further information apply to: Croisières Médicales Françaises, 9, Rue Soufflot, Paris Ve.

The Nobel prize in physics for 1938 has been awarded to Professor Enrico Fermi for his research on the radio-activity of the atomic nuclei.

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## The Services

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### HEALTH OF THE NAVY

The report on the Health of the Navy for 1936 (H.M. Stationery Office, 2s. 6d.) records a diminution in the incidence of disease and injury from the figure of the previous year. Both the invaliding and the death ratios, however, show a slight increase. The total number of persons finally invalided was 1,078, giving a ratio of 11.68 per 1,000, an increase of 0.83 per 1,000 compared with 1935, and an increase of 1.09 in relation to the five years' average. Eleven men were invalided on account of having refused surgical operations for various conditions.

#### Remarks on Diseases

Among diseases of the digestive system duodenal ulcer caused the greatest number of invalidings. There were 113 cases, with twenty-two invalidings and three deaths. An epidemic of a mild type of gastro-enteritis occurred among the boys of H.M.S. *St. Vincent* Training Establishment, involving fifty-six cases. Food, water, and milk were excluded as possible sources

of infection, and, since no organism of a group likely to cause the symptoms was isolated from blood or faeces, it was thought probable that the epidemic was attributable to an ultra-microscopic virus. Of eighty-three cases of dysentery twenty-one occurred on the China station. The personnel of the Fleet was not, however, affected by the outbreak, traced to milk, which appeared in Hong Kong in the autumn of 1936. During this epidemic all supplies of fresh milk to ships and naval establishments were stopped. On the Mediterranean station forty-one cases were recorded, the greater number from Alexandria, a town with a high incidence of this disease among the civil population, where large numbers of men were concentrated during part of the year. With regard to malaria, 207 cases are recorded. Increase in incidence was marked in the China station, with ninety cases as compared with thirty-six in 1935. Of these, sixty-four were primary infections, twenty-one occurring in the Hong Kong area and twenty-one at the Yangtse ports. Ten cases of undulant fever were returned, including one invaliding and one death. The majority were infected on the Mediterranean station, and among them were three Maltese ratings and two British ratings, who admitted to drinking goats' milk while on leave ashore.

With regard to venereal diseases, a very satisfactory decline is reported in the incidence of syphilis, the number of cases falling from 424 in 1935 to 341 in 1936. On the other hand the figures for gonorrhoea rose from 2,842 to 3,085. The increase occurred chiefly on the China and Mediterranean stations, especially the latter, where abnormal conditions prevailed.

#### Injuries

One hundred and seventy-one persons sustained general injuries, a considerable decrease from the figure of the previous year. There were sixteen deaths due to multiple injuries, of which nearly half were caused by motor-cycle accidents. Among the causes of the remaining fatal cases were the explosion of a depth charge, a torpedo slipping from its strop, and crushing between boat and buoy during mooring operations. There were 6,021 entries for local injuries and wounds, in addition to 340 for local burns and scalds. These local injuries resulted in seventeen deaths and ninety-five invalidings. Twelve of the deaths were caused by fracture of the skull, which occurred in eight motor-car or motor-cycle accidents, one road accident, a "roundabout" accident at a fair, a fall from a bastion on shore, and a fall down an open air-trunk. Other causes of death included a fractured spine through a fall from a hammock, laceration of intestines through a fall from a ship's bridge, and a wound of the throat through an accidental fall on to a glass tumbler. A case of unusual interest was one in which a blow from an aeroplane propeller had removed most of the frontal bones and shaved off a considerable part of the front lobes of the brain. It is recorded that the patient suffered little shock or inconvenience, recovered, and returned to duty.\*

\* Case described in *Royal Naval Medical Journal*, July, 1936, p. 242.

## EPIDEMIOLOGICAL NOTES

### Typhoid Fever at Birkenhead and Nottingham

Typhoid fever broke out in Birkenhead at the beginning of February, and so far 22 cases have been notified—2, 10, 9, and 1 (week ended February 25) respectively in the last four weeks—with 1 death in a man aged 46. Although the outbreak appears to be subsiding the situation still calls for anxiety, as the cases have come from different parts of the town and bacteriological examinations of water, milk, and foodstuffs have till now proved negative for typhoid organisms.

According to a statement issued by the Medical Officer of Health for Nottingham a case of typhoid was notified at mid-day on February 24, and by the morning of February 26 21 persons were taken to hospital. One more case has since been admitted. The 22 cases come from ten houses in the Wells Road district, and not far apart. The source of infection is believed to be contaminated food.

### Acute Poliomyelitis

The epidemic of acute poliomyelitis in England and Wales appears to have completely subsided; the weekly numbers notified in February were 8, 14, and 6 respectively, compared with 6, 9, and 6 respectively for the corresponding weeks of 1938. The disease appears to have died out in the principal epidemic foci of 1938, and, except for the county of London, none of the cases notified in the week under review came from these areas.

In the *Annual Report* of the Surgeon General to the Public Health Service of the United States attention is directed to the fact that acute poliomyelitis has in recent years shown a shift in incidence and fatality from infants and children to older subjects. A survey of the death rates at different ages for the principal acute infectious diseases over the last twenty-five years revealed that although there was a decline for measles and whooping-cough at all ages there was little or no alteration in its preference for children. On the other hand, in respect of cerebrospinal fever, diphtheria, scarlet fever, and acute poliomyelitis, especially of the two last-named diseases, a definite trend was observed in the direction of an increasing preference for the higher age group. Due allowance was made for the alteration in the age distribution of the population during the period covered by the review. In certain recent outbreaks considerable variations have been recorded in respect of seasonal incidence, rate of spread, and fatality rate. At the same time differences in clinical manifestations have been observed, especially in respect of increasing incidence in the distribution of paralysis. The 1937 outbreak in Texas was cited, in which there were involvements of the muscles of speech, swallowing, and breathing in 87 per cent. of the cases, compared with the incidence of less than 10 per cent. On the experimental side viruses have been isolated in certain of the outbreaks which showed distinct immunological differences as between different strains.

### Influenza

In England and Wales during the week notifications of pneumonia (influenzal and primary) rose from 1,435 to 1,919, and in London from 125 to 197; on the other hand, in Scotland, Eire, and Northern Ireland small decreases were reported. Deaths from influenza rose in sympathy, chiefly in London—37 (26 last week); in Manchester there were 13 deaths (the same as last week). The peak of influenza mortality for 1939 is so far lower than the seasonal maximal incidence observed during most of the years since 1917 (thirteen years out of twenty-one), and is considerably below the figures reported during the influenzal epidemics of 1918, 1919, 1922, 1924, 1927, 1929, 1933, and 1937.

In Germany, during the week ended February 4, deaths from influenza in the 57 towns with a population of over 100,000 rose from 108 to 159, but the number of deaths attributed to pneumonia declined from 501 to 459; the general death rate was the same as in the previous week (13.2 per thousand).

In Switzerland in the week ended February 11 there were 11,753 cases of influenza, compared with 8,762 in the previous week. In ten towns, each with a population of over 30,000, there were 23 deaths from influenza during the week ended January 28, compared with 26 in the previous week. In Denmark, in the three weeks ended February 11, notifications of influenza at Copenhagen were 2,433, 4,423, and 6,672 respectively, but only 12 deaths attributed to influenza were recorded during the whole period. It is probable that the large numbers of cases reported from Denmark and Switzerland, compared with other European countries, should be attributed to the more extensive and systematic administrative arrangements for notification in these countries.

In the U.S.A. notifications of influenzal cases for the first three weeks of the new year were 3,255, 3,018, and 3,097 respectively, compared with the median values for the corresponding weeks of the years 1935–8 of 2,423, 2,805, and 3,144 respectively.