

although the dettol had been used continuously. It seemed clear that a number of the earlier apparent successes had been due to spontaneous remissions. It seems reasonable to suggest, therefore, that until adequate trials have shown that recurrence does not also take place when using 1 in 4,000 perchloride of mercury for the final rinse of the napkins it is unwise to distribute so dangerous a drug widely in working-class homes.—I am, etc.,

Assistant Medical Officer of Health,  
Oxford, April 8.

MARY FISHER.

### Sterilization of Syringes and Needles

SIR,—I would like to make what I hope is a real contribution to the sterilizing of syringes. Surely the central bone of contention is the disinclination of many to use the ordinary boiling water or steam methods which are in use for practically every other instrument without further question. I am inclined to think that a great factor against boiling syringes is the heavy casualty rate among these instruments unless unusual care is taken to let them warm up gradually, and so avoid disasters resulting from the difference in the coefficients of expansion of glass and brass. This is easily overcome by using all-glass syringes, which are not only cheaper but mechanically more efficient in construction. In my experience their useful life is as long as any make of glass-and-metal syringe.—I am, etc.,

Shrewsbury, April 10.

J. G. C. SPENCER.

### Defence of Research

SIR,—In view of the renewal of the great efforts made by "antivivisection" societies in the war of 1914-18 to deprive our military forces of the protective inoculations considered necessary for the success of our arms by all military medical experts, may I mention that the Research Defence Society will be glad to forward to any member of the medical profession who applies to them a recently published pamphlet, *Protective Inoculation of the British Military Forces*. It would be of special interest to those engaged in the examination of recruits.

We can also send reprints of articles, "Twelve Truths about Animal Experiments," "Antivivisection 'Ethics,'" and "Prophylactic Inoculations against Animal Diseases in the British Empire." These leaflets will enable medical practitioners to reassure any of their patients whose feelings may have been harassed by the habitual disparagement by the opponents of medical research of all the great advances of the past century due to the experimental methods, so essential to the progress of a biological science such as medicine.—I am, etc.,

LEONARD ROGERS,

Treasurer, Defence Research Society.  
11, Chandos Street, W.1, April 10.

### The Services

#### CASUALTIES IN THE MEDICAL SERVICES ROYAL NAVY

Among the officers of H.M.S. *Gurkha*, which was sunk in action off the Norwegian coast on April 10, was Temporary Surgeon Lieutenant DAVID NATHAN BUNCE MORGAN, R.N.V.R., and his name appears in the Admiralty list of five officers who are "Missing, Believed Killed." Dr. Morgan lived in London, and took the M.R.C.S., L.R.C.P. in 1938.

#### DEATHS IN THE SERVICES

Two young naval medical officers were killed in a motor accident near Capetown on March 24. Surgeon Lieutenant-Commander GEORGE ARTHUR LAWSON, R.N., graduated M.B., Ch.B. at the University of Edinburgh in 1932, entered the Royal Navy as surgeon lieutenant on November 22, 1932, and had recently received his first step in rank. Surgeon Lieutenant PHILIP GEOFFREY STAINTON, R.N., was the elder son of Mr. Philip Stainton of Blackheath. He took the M.R.C.S., L.R.C.P. in 1933, and entered the Royal Navy on January 8, 1936. He was 31 years old.

## Obituary

### A. N. COX, M.D., M.R.C.P.

Dr. Arthur Neville Cox, whose death at Brighton on April 9 we regret to record, received his medical education at Guy's Hospital. After a distinguished career as a student, during which he obtained a junior science scholarship, and the Golding-Bird gold medal and scholarship in bacteriology, he took his M.B., B.S.Lond. in 1910, later becoming M.D. and M.R.C.P. At Guy's he was house-surgeon and obstetric resident, and for some time edited the *Guy's Hospital Gazette*. Leaving Guy's with the intention of entering the then newly formed tuberculosis service, he held the post of house-physician at the Brompton Hospital, and was afterwards appointed tuberculosis officer for Brighton, a post in which he remained for the rest of his life. Bringing to his work an ability and a keenness well above average, Neville Cox was generally recognized as one of the best tuberculosis officers in the country, and his opinion and advice were greatly valued by his fellow practitioners. During the war he served as a temporary captain R.A.M.C., and afterwards was an active member of the Tuberculosis Society, and of the Brighton and Sussex Medico-Chirurgical Society, of which he was an excellent president in 1933 and 1934. Always interested in his special branch, he had visited Swiss and Canadian sanatoria, and he contributed to the medical journals on the subject of tuberculosis.

A life-long asthmatic, Neville Cox was greatly handicapped by much ill-health, but his unfailing sense of humour and the happiness which he had in his family enabled him to maintain an optimistic outlook which was the admiration of his friends. His remark to the writer, during a particularly wet week-end at Brighton, that "even the weather is largely what you make it," summed up his philosophy of life, and he contrived to make of it a happy affair, both for himself and for those around him. His favourite hobby was the carving and playing of reed flutes, and even during his last illness he usually had one tucked under his pillow. To enjoy Neville Cox's friendship was a great privilege. His dry wit, his wide reading, and his unfailing appreciation of others made him a charming companion, and he will be greatly missed by a large circle of friends. He leaves a widow, three sons, and a daughter, whose sorrow will be lightened by the love he bore them.

### J. D. C. WHITE, M.D.

John Douglas Campbell White, who died very suddenly of cerebral haemorrhage at his house in Harrow on March 25, was born in Scotland but had lived all his life in England. A brilliant career at Charterhouse preceded five years at Trinity College, Cambridge, during which time he collected notable awards, including first-classes in both the Classical and the Theological Tripos. From Cambridge he went to the London Hospital, qualifying in 1904 and taking the Cambridge M.D. the following year. At the London he served as house-physician to Dr. Francis Warner and Dr. (now Lord) Dawson. He never went into practice, but took up research work at the Lister Institute, which gave him freedom for many sociological and civic interests. He was an active member of the British Social Hygiene Council, and did much committee work and lecturing under its auspices. In 1911 he published

## Medical News

Mr. Morris Datnow will deliver the third William Blair-Bell Memorial Lecture, entitled "Blair-Bell—His Contributions to Science, with Special References to Cancer Research," before the Royal College of Obstetricians and Gynaecologists (52, Queen Anne Street, W.) on Saturday, April 27, at 3 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.

Dr. Bethel Solomons will deliver his presidential address on "Conservatism in Obstetrics and Gynaecology" before the London Jewish Hospital Medical Society at the Jewish Communal Centre, Upper Woburn Place, W.C., on Sunday, April 21, at 3 p.m. Members of the medical profession are invited to attend.

The one hundred and fourth annual general meeting of the Royal Medical Benevolent Fund will be held at the Royal Society of Medicine (1, Wimpole Street, W.) on Monday, April 22, at 4.30 p.m., with the president, Sir Thomas Barlow, in the chair.

The annual meeting of the Westminster Hospital Ladies' Association will be held in the Medical School on Wednesday, April 24, at 3.30 p.m., when Sir Bernard Docker, chairman of the hospital, will speak on "The Work of the Hospital in Wartime."

A meeting of the Nutrition Panel (Food Group) of the Society of Chemical Industry will be held at 2.30 p.m. on April 24, in the hall of the Institution of Civil Engineers, Great George Street, S.W.1, when Lord Iveagh will be in the chair. "The Egg as Food" is the subject for discussion, in which Dr. Joseph Needham, Dr. Ethel M. Cruikshank, Dr. S. K. Kon, Dr. R. B. Haines, and Miss Mary Andross will take part. Non-members of the Society may secure invitations on application to the general secretary at Clifton House, Euston Road, N.W.1.

A meeting of the Medical Society for the Study of Venereal Diseases will be held at 11, Chandos Street, W., on Saturday, April 27, at 2.30 p.m., when there will be a discussion on "Trichomonas vaginalis Infestation." The speakers will be Colonel W. Glen Liston (Protozoology) and Dr. P. A. Clements (Clinical Aspects).

A joint meeting of the Royal Sanitary Institute, the Yorkshire Branch of the Society of Medical Officers of Health, and the North-Eastern Centre of the Sanitary Inspectors Association will be held at Leeds City Museum on Saturday, April 27, at 10 a.m., when a discussion on "The Garchey System of Refuse Disposal" will be opened by Professor J. Johnstone Jervis, and Mr. R. A. H. Livett will introduce the subject of "Modern Flat Building."

A meeting of the Medico-Legal Society will be held at 26, Portland Place, W., on Thursday, April 25, at 5 p.m., when Mr. C. E. A. Bedwell will read a paper on "The Custody and Preservation of Patients' Records."

The Ministry of Food announces that a series of lectures under the general title of "The Nation's Larder" will be given at the Royal Institution, 21, Albemarle Street, W., on Tuesdays at 5.15 p.m. from April 23 to June 4, both dates inclusive. Details will be published in the diary column of the *Supplement* week by week.

The National Hospital for Nervous Diseases (Queen Square, W.C.) announces that, beginning on Monday, April 29, out-patient clinics for medical men will begin at 1.30 p.m., owing to the out-patient time being changed from the mornings to the afternoons as from the above date.

Dr. T. H. Sanderson-Wells has accepted the chairmanship of the Food Education Society in succession to the late Dr. Harry Campbell. Lord Horder, Sir Albert Howard, Dame Louise McIlroy, and Captain G. S. Elliston, M.P., have been elected vice-presidents.

On April 10 Temporary Surgeon Lieutenant Arthur P. B. Waind, R.N.V.R., of H.M.S. *Hardy*, was seriously wounded in the action off Narvik. Dr. Waind's home is at York, and he qualified M.B., Ch.B. of the University of Leeds in 1938. He is a member of the British Medical Association, which he joined in February, 1939.

Five £60 scholarships to Port Regis Preparatory School are being offered by Sir Milsom Rees to sons of medical practitioners. Candidates must be under 9 years of age on June 11, 1940, the date of the examination. Reduced fees are offered to prospective candidates who enter the school in May. Applications should be made to the Headmaster, Port Regis School, Broadstairs, Kent.

The Senate of the University of London at their meeting on March 20 agreed that the Tavistock Clinic be approved for a period of five years as an institution at which teachers may be recognized for the instruction of students pursuing courses of advanced study and research. Under present conditions the relevant courses taken by internal students of the University are postgraduate courses for the higher degrees and the course for the academic postgraduate diploma in psychology. The clinic continues its regular course of post-graduate medical instruction.

Dr. Mocquot, vice-president for 1939, has been elected president of the Académie de Chirurgie of Paris for 1940, and Dr. Mathieu vice-president.

Owing to the war the International Union against Tuberculosis has decided to adjourn competitions for six fellowships at the Carlo Forlanini Institute.

Sir Buckston Browne was 90 years of age on April 13.

## Universities and Colleges

### UNIVERSITY OF LONDON LONDON HOSPITAL MEDICAL COLLEGE

The subject of the Liddle Triennial Prize for 1941-2 (value £120) is the clinical manifestations of disorders of the pituitary gland. Essays should be addressed to the Dean of the London Hospital Medical College, Turner Street, London, E.1, and must reach him by March 31, 1942.

### UNIVERSITY OF ABERDEEN

On April 4 the honorary degree of LL.D. was conferred on Sir Wilson Jameson, dean and director of the Division of Public Health of the London School of Hygiene and Tropical Medicine.

### ROYAL COLLEGE OF SURGEONS OF ENGLAND

A quarterly meeting of the Council was held on April 11, with the President, Mr. Hugh Lett, in the chair.

The John Hunter Medal and Triennial Prize were presented to Colonel L. E. H. Whitby, M.D., M.R.C.S.

The Jacksonian Prize for 1939 was awarded to Mr. F. F. Rundle, F.R.C.S., for his essay on "The Pathology and Treatment of Thyrotoxicosis," and a Certificate of Honourable Mention was awarded to Mr. N. M. Harry, F.R.C.S., of Melbourne, for his essay on the same subject. "Injuries to Peripheral Nerves, with Especial Reference to the Late After-results," was approved as the subject for the Jacksonian Prize for 1941.

Sir Percival Thomas Nicholls and Sir Richard Arthur Needham were elected Fellows under the Charter which permits the Council to elect annually to the Fellowship, without examination, two Members of the College of twenty years' standing.

A diploma of Membership was granted to F. V. A. Bosc of University College Hospital.

Diplomas in Child Health were granted, jointly with the Royal College of Physicians of London, to the following twenty-one candidates:

Mary R. Anderson, H. Angelman, J. B. Atkins, J. L. Bates, F. Besser, V. L. Collins, G. Comay, Janet F. Cormick, C. F. Cumings, Marjorie B. Curties, E. W. Dunkley, Joan I. Franklin-

Adams, Esther Hendry, F. P. Hudson, Elizabeth Jacobs, D. de la C. MacCarthy, B. Roditi, A. W. Uloth, P. C. S. Unwin, Freny P. Wadia, Ailsa M. L. Whitehouse.

Professor R. J. S. McDowall will deliver a lecture on "The Circulation in Relation to Shock" in the Theatre of the College in Lincoln's Inn Fields on Thursday, May 2, at 4 p.m. The lecture will be open to medical practitioners and advanced students.

### ROYAL COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS

The following candidates have been awarded the diploma of the College:

S. K. Christie, Annie M. Dawson, Bessie Dodd, A. G. Edwards, K. A. Evans, J. Griffith, A. Herstein, Mary Kane, B. G. Kearon, Elizabeth G. Keith, E. J. Lace, A. M. Lester, D. Malloch, Mabel A. Masih, Elizabeth V. Newlands, Marjorie A. Powys, D. A. F. Shaw, J. R. Sides, C. J. Stewart, Violet E. A. Sykes, Mary R. Thompson, Agnes E. Towers, J. P. Watson, Eluned Woodford-Williams, Elizabeth M. Wright.

### EPIDEMIOLOGICAL NOTES

#### Infectious Diseases for the Week

With the exception of pneumonia (primary and influenzal) the incidence of the principal infectious diseases has increased in England and Wales compared with last week, in which low levels were reached. The incidence of the enteric fevers rose in England and Wales by 1 case; of the fifteen administrative areas which recorded cases, only in four were there more than 2 cases—namely: Lancaster 6 (Liverpool 1, Manchester 1, Salford 1, Tyldesley U.D. 1, Walton-le-Dale U.D. 1, Preston R.D. 1); Chester 4 (Wallasey C.B. 1, Bebington M.B. 1, Macclesfield M.B. 1, Tarvin R.D. 1); Yorks West Riding 4 (Barnsley 2, Sheffield and Wakefield 1 each); Derby 3 (Derby C.B. 2, Long Eaton U.D. 1). In Scotland notifications dropped from 189 to 89. Of these, 8 were due to typhoid fever, compared with 14 in the previous week: 4 in Fife county, 1 each in the counties of Dumbarton and Selkirk, and 2 in Glasgow. Of the paratyphoid fever notifications 18 were in the county of Lanark, and 51 in Glasgow and 1 in Hamilton, both in the county; 2 in Renfrew county, 3 in the burgh of Paisley, and 2 in Greenock. Midlothian county and Edinburgh reported 1 each, and there was 1 case of paratyphoid A fever in Dumbarton county.

The increased prevalence of cerebrospinal fever is disappointing after a steady fall in the course of the three weeks immediately preceding. In London and in Scotland there were appreciable decreases, but in Northern Ireland and Eire slight increases were recorded. In England and Wales fifty-one administrative areas were affected compared with fifty in the previous week, and in nine counties more than 20 cases were recorded—namely: Lancaster 47 (Liverpool 8, Manchester 14, Salford 5); London 34 (Wandsworth 7, Camberwell and Lambeth 3 each, Hammersmith 2); Glamorgan 33 (Cardiff 5, Swansea 4, Rhondda U.D. 5, Penybont R.D. 4, Pontardawe R.D. 3); Yorks West Riding 31 (Leeds 8, Sheffield 7, Halifax 5); Kent 26 (Margate 4, Canterbury 3, Broadstairs and St. Peter's U.D. 3); Warwick 25 (Birmingham 16, Coventry 7); Essex 24 (Hornchurch U.D. 4, West Ham C.B. 3, Colchester 3); Durham 22 (Sunderland 7, West Hartlepool 4); Southampton 22 (Southampton 7, Bournemouth 4). In Scotland twenty-nine areas (fifteen counties and fourteen burghs) were affected, compared with thirty-one in the previous week. Among counties the following reported more than 2 cases: Ayr 7, Dumfries 4, Aberdeen, Angus, Banff, Fife, and Lanark 3 each; and among burghs, Glasgow 16 (2), Edinburgh 14 (1), Dumfries and Maxwelltown 6, Dundee 5, Aberdeen 4, Motherwell and Wishaw 3. Both Dunfermline and Falkirk burghs each recorded 1 death.

Among European countries, in March there was no abnormal rise in the Scandinavian countries, Belgium, or Holland, while the epidemic in Germany was arrested, as in this country. The disease continued to advance in Hungary, Switzerland, and Yugoslavia during the second fortnight, especially in the last-named country.

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### INFECTIOUS DISEASES AND VITAL STATISTICS

We print below a summary of Infectious Diseases and Vital Statistics in the British Isles during the week ended March 30, 1940.

Figures of Principal Notifiable Diseases for the week and those for the corresponding week last year, for: (a) England and Wales (London included). (b) London (administrative county). (c) Scotland. (d) Eire. (e) Northern Ireland.

Figures of Births and Deaths, and of Deaths recorded under each infectious disease, are for: (a) The 126 great towns in England and Wales (including London). (b) London (administrative county). (c) The 16 principal towns in Scotland. (d) The 13 principal towns in Eire. (e) The 10 principal towns in Northern Ireland.

A dash — denotes no cases; a blank space denotes disease not notifiable or no return available.

Disease	1940					1939 (Corresponding Week)				
	(a)	(b)	(c)	(d)	(e)	(a)	(b)	(c)	(d)	(e)
Cerebrospinal fever..	521	34	95	4	10	38	6	5	3	—
Deaths .. ..	7	5	—	—	—	—	—	—	—	—
Diphtheria .. ..	705	26	248	41	37	922	88	224	54	18
Deaths .. ..	17	—	5	—	2	22	—	6	2	—
Dysentery .. ..	33	—	46	—	—	32	5	36	—	—
Deaths .. ..	—	—	2	—	—	—	—	1	—	—
Encephalitis lethargica, acute .. ..	7	—	—	—	—	2	—	—	—	—
Deaths .. ..	1	1	—	—	—	—	—	—	—	—
Enteric (typhoid and paratyphoid) fever	30	2	89	6	2	12	1	6	—	—
Deaths .. ..	—	—	2	1	—	—	—	—	—	—
Erysipelas .. ..	—	—	70	6	9	—	—	61	3	2
Deaths .. ..	—	—	1	—	—	—	—	—	—	—
Infective enteritis or diarrhoea under 2 years .. ..	37	5	7	7	14	50	14	8	3	1
Deaths .. ..	—	—	—	—	—	—	—	—	—	—
Measles* .. ..	4,750	53	36	—	205	6	5	31	184	7
Deaths .. ..	3	—	2	—	—	—	—	—	—	—
Ophthalmia neonatorum .. ..	84	9	23	—	2	100	14	38	—	1
Deaths .. ..	—	—	—	—	—	—	—	—	—	—
Pneumonia, influenzal† Deaths (from influenza) ..	1,195	58	32	15	8	1,175	118	16	7	11
Deaths .. ..	114	6	10	8	7	153	32	5	1	1
Pneumonia, primary..	—	—	291	15	23	—	—	2	163	10
Deaths‡ .. ..	42	—	16	—	—	—	—	13	9	9
Polio-encephalitis, acute .. ..	3	1	—	—	—	—	—	—	—	—
Deaths .. ..	—	—	—	—	—	—	—	—	—	—
Poliomyelitis, acute ..	4	—	—	—	—	2	—	1	—	—
Deaths .. ..	1	—	—	—	—	—	—	—	—	—
Puerperal fever .. ..	7	7	7	1	1	5	5	12	—	—
Deaths .. ..	—	—	—	—	—	—	—	—	—	—
Puerperal pyrexia ..	150	9	17	—	—	152	11	21	—	4
Deaths .. ..	—	—	—	—	—	—	—	—	—	—
Relapsing fever .. ..	—	—	—	—	—	—	—	—	—	—
Deaths .. ..	—	—	—	—	—	—	—	—	—	—
Scarlet fever .. ..	817	47	126	67	61	1,675	152	248	50	66
Deaths .. ..	—	—	—	1	—	—	—	—	—	—
Small-pox .. ..	—	—	—	—	—	—	—	—	—	—
Deaths .. ..	—	—	—	—	—	—	—	—	—	—
Typhus fever .. ..	—	—	—	—	—	—	—	—	—	—
Deaths .. ..	—	—	—	—	—	—	—	—	—	—
Whooping-cough* ..	452	17	15	15	15	322	502	47	—	—
Deaths .. ..	2	—	2	—	1	16	2	10	3	2
Deaths (0-1 year) ..	472	59	78	32	42	398	59	69	25	18
Infant mortality rate (per 1,000 live births) .. ..	—	—	—	—	—	62	50	—	—	—
Deaths (excluding stillbirths) .. ..	5,657	879	747	246	202	5,770	1,180	637	207	128
Annual death rate (per 1,000 persons living) .. ..	—	—	—	14.1	16.4	17.7	14.2	15.0	12.9	13.9
Live births .. ..	5,833	863	960	343	233	5,957	1,039	983	393	225
Annual rate per 1,000 persons living .. ..	—	—	—	19.4	22.9	20.5	14.6	13.2	19.9	26.4
Stillbirths .. ..	274	31	48	—	—	266	43	48	—	—
Rate per 1,000 total births (including stillborn) .. ..	—	—	48	—	—	43	40	—	—	—

\* Made notifiable generally on November 1, 1939.

† Includes primary form in figures for England and Wales, London (administrative county), and Northern Ireland.

‡ Since January 1, 1940, figures for London (b) have been for deaths from all forms of pneumonia; the corresponding figures for 1939 relate to deaths from lobar pneumonia only.