recommended that these buildings be immediately adapted for Accommodation for infectious diseases is still insufficient, and it is considered that there should be provision in all the regions for measles cases where there are complications or where the billets are unsuitable for home nursing. It is stated that the Ministry is making every effort to increase the accommodation available and has reserves in view. The District Medical Service should be extended, and the cost of its extension should not fall on local rates; also, where the burden of the treatment of official evacuees falls on the voluntary hospitals it should be chargeable to the evacuation account. Those who subscribe to voluntary hospitals contributory schemes in the sending areas should be able to enjoy the benefits in the reception areas. This last recommendation is said to be under consideration, and as for the District Medical Service, local authorities were asked last November to review their services and extend them as necessary, the additional costs being reimbursed in full by the Exchequer.

The provision of maternity homes is said to be generally sufficient, but more ante-natal and post-natal homes are required. The need for such hostels was impressed on local authorities at the beginning of the war, but shortage of suitable accommodation is again the limiting factor. The number of maternity homes in reception areas is 130. One difficulty is that the burden of billeting the mothers and babies when they leave the maternity home falls on the one district where the home is situated, and the committee considers that arrangements should be made for placing these cases over a wider area. Many authorities have hostels or clearing houses where elder children can be billeted during the mother's confinement, but more temporary residential nurseries are required for children under 5 to serve the same purpose. There are nearly 200 residential nurseries in the reception areas, and the number is being increased as rapidly as suitable premises and trained staff can be found.

A general increase in the scales of allowances for the boarding of unaccompanied children would probably have gone a long way to reconcile the reception areas to the strain which has been put upon them, but the committee does not see its way to make such a recommendation. It does, however, recommend that the allowance of 5s. a week to the householder for the nursing of a sick evacuee child should be increased on a medical certificate that extra comforts or nourishment are needed. The Ministry states that the case for increasing the home nursing allowance is being investigated.

Local News

IRELAND

Honorary Degrees

Dr. Gordon M. Holmes, F.R.S., Dr. F. M. R. Walshe, and Prof. Ernest Hey Groves are the recipients of the Honorary D.Sc. of the National University of Ireland, the two former "in view of their eminence as neurologists and in recognition of their valuable contributions to medical literature," and Prof. Hey Groves "in view of his eminence as an orthopaedic surgeon and an internationally recognized authority on the literature of the subject."

Eire Health Statistics

The public health statistics for Eire for the year 1938-9 show improvements in many directions. Notifications of the principal infectious diseases totalled 8,065, as compared with 8,677 for 1937 and 8,924 for 1936. The figures for diphtheria were, however, disappointing, 2,983 cases being notified as against 2,511 in 1937. The report of the Department of Local Government and Public Health states that diphtheria continues to be "one of the major problems of public health" and that "the spread may in part be accounted for as resulting from the intensive propaganda that has been carried out recently against immunization." Decreases were recorded in the notifications of typhoid fever, scarlet fever, and acute primary and influenzal pneumonia. The death rate from all forms of

tuberculosis was 1.09 per 1,000 of the population, the lowest rate ever recorded. Deaths of infants under 1 year were fewer in 1938 than in 1937 and 1936, the rates being respectively 67, 74, and 73 per 1,000 births. The infant mortality rate for the county borough of Dublin was 96, and it is suggested in the report that a causative factor is the failure of Dublin mothers to breast-feed their infants. Progress is reported in the administration of free-milk schemes, maternity and child welfare approved schemes, and the work of the school medical service.

ENGLAND AND WALES

Mental Health in Wartime

In a Chadwick Lecture with this title given on February 4 at the Royal Society of Tropical Medicine and Hygiene, Sir Walter Langdon-Brown said that the ostensible reason for the outbreak of a war was never the real one. Emotional causes were transformed into alleged rational ones, although deep-seated and hidden causes of antagonism were at work. The fierce fanatical outbreak of nationalism in this century became comprehensible as a frightened response of the nationalist segregating impulse against the demand of the evolutionary process towards internationalism. If a normal healthy impulse was forcibly repressed it came to the surface again in an abnormal pathological form. Thus the collective values which ruled the world up to 1914 had been swept away, and people had become hardened to shameless persecutions, betrayals, and predatory invasions in the name of the deified State. The division that arose was between nations who considered that the individual existed for the State and those who thought the State existed for the individual. The background against which the present war was being waged was a moral and spiritual disease in Europe resulting from attempts to stem the tide of the evolutionary process. Both constructive and destructive impulses were always present in the human mind, and to-day the latter had the upper hand. When war came the gregarious instinct was always interrupted and nations looked for a leader. He might not have the characteristics attributed to him, but he must have an emotional appeal. There was also a tendency to the making of myths and to reliance on rumour. Information was the best antidote, and was the more needed now that wireless had enormously increased the power of the lie. The greatest enemy to be overcome was fear, which was really an exaggeration of a normal protective impulse. For years insidious propaganda had been instilling fear into the nations. The fear of being afraid was particularly distressing, and the best remedy was action as a member of a community. Pessimism and fear were chiefly prevalent among those who were not contributing to the national effort. It was already clear that an exaggerated estimate had been formed as to the liability of air raids to produce nervous breakdowns, and the way the people were facing them was evidence of this. nature of panic fear called for consideration, and certain steps taken by the Government deserved criticism in this respect. The importance of everything designed to maintain physical fitness in the cave-man's existence to which we were now condemned could hardly be overstressed; for to revert also to the cave-man's primitive ideas of sanitation would indeed be treason to Chadwick's memory. Vitamin A had a very real value in promoting adaptation of the eyesight to the blackout. Various other measures were discussed in relation to the maintenance of mental health.

J. Pley (Thèse de Paris, 1940, No. 338), who records three cases in patients aged from 29 to 44, illustrated the rarity of traumatic enophthalmos by the fact that Birch-Hirchfeld in 1930 was able to collect only 164 cases from the literature. It consists of a progressive sinking-in of the eyeball following an injury in the region of the orbit with an interval of varying duration. A lesion of Tenon's capsule appears to be the most logical explanation of the condition. Besides this indispensable lesion are secondary causes such as paralysis of sympathetic origin, atrophy of the intraorbital fatty tissue, and cicatricial retractions.

The Scottish Ploughman's Dietary

SIR.—In the *Journal* of January 11 (p. 63) I mentioned Robert Burns's diet—that of the Scottish ploughman—as a matter of interest merely, not as illustrative of what the diet could do! It would be absurd to measure the value of the particular diet by the years of Burns's life (which, after all, is to be reckoned by what he was and achieved rather than by its length in years).

At the same time, it is known that, although Burns spent his life in hard toil and striving against poverty with its attendant evils, he did not suffer at any time from wrong or insufficient feeding. Energetic he was and of vigorous constitution, being of athletic build and powerful intellect. He was, however, always badly housed, and seemed compelled to live his short life in an environment bad in every respect. It was such adverse influence, along with occasional imprudent and indiscreet conduct-perhaps all too usual in those days-that predisposed him to an early death. Perhaps, too, Burns had to misguide him certain harmful peculiarities of temperament understandable in men of surpassing genius and brilliance, interested in everything and everybody but themselves and their own health and interests. At the last he developed a protracted illness which, from the clinical course it took, can only have been caused by a subacute infective endocarditis, not "rheumatism" or alcoholism, as has so often been said.

But, apart from all this, I believe that Dr. M. Newfield (January 18, p. 101) will agree with me that, if somewhat unappetizing, the ploughman's diet of oatmeal, broths in quantity, potatoes, milk, and the occasional herring, should constitute a sound basic diet for hungry days.—I am, etc.,

Bournemouth, Jan. 19. S. WATSON SMITH.

Perspiration and Flannel Clothing

SIR,—If Mr. R. Kennon (January 25, p. 137) will try the experiment of the flannel and the thermometer he will find it does not work. The temperature remains obstinately at 98.4°.—I am, etc.,

London, W.1, Jan. 31.

C. K. VARTAN.

The Services

DEATHS IN THE SERVICES

Major-General Sir George Bradshaw Stanistreet, K.B.E., C.B., C.M.G., late R.A.M.C., died at Bournemouth on January 26, aged 74. He was born on May 13, 1866, at Malahide, County Dublin, the son of Dr. Richard Stanistreet, and educated at Windermere College and at Trinity College, Dublin, where he graduated M.B., B.Ch., and B.A.O. in 1889, after taking the B.A. in 1887. He entered the Army as Surgeon Captain on July 28, 1891, became Lieutenant-Colonel on September 13, 1913, Colonel on December 26, 1917, Major-General in 1918, and retired on September 16, 1922. He served on the North-West Frontier of India in 1897–8, in the Tirah campaign, receiving the Frontier medal with two clasps, and throughout the war of 1914–18, when he filled the posts of Deputy Assistant Director-General, A.M.S., in 1913–17, Assistant Director-General in 1917–18, and Deputy Director-General in 1918–22. He received the C.M.G. in 1917, the C.B. in 1918, and the K.B.E. in 1922. He had been a member of the British Medical Association for over fifty years.

Colonel Charles James Bamber, M.V.O., I.M.S. (ret.), died at Downpatrick on January 9, aged 86. He was born at Chittagong on July 14, 1855, the son of Mr. Henry Bamber, and was educated at Bedford Grammar School and at St. Bartholomew's Hospital, taking the M.R.C.S., L.R.C.P. in 1878 and the Cambridge D.P.H. in 1892. Entering the I.M.S. as surgeon in 1878, he became colonel in 1910 and retired in 1915. Most of his service was spent in the Punjab in civil employ, which he entered in 1887. He held various civil surgeoncies, including the important one of Rawalpindi, 1893–8, before he was appointed sanitary commissioner to the Punjab Government in 1900, a post he held until 1910. From 1910 to 1915 he was Inspector-General of Civil Hospitals in the Punjab, and held that post until his retirement. He was administrative medical and sanitary officer, Delhi Durbar, 1902–3 (medal), administrative medical and sanitary officer, Coronation Durbar, 1911 (medal), and a member of the Coronation Durbar Committee. He served on the North-West Frontier of India in the Mahsud Waziri campaign of 1881,

in Burma in 1886–7 (medal and clasp), and on the North-West Frontier, Malakand, 1897 (medal); he received the M.V.O. in 1911. Colonel Bamber was the author of a work on *The Plants of the Punjab*, 1917. He had been a member of the British Medical Association for thirty-one years. He leaves a widow.

Obituary

PROF. K. F. WENCKEBACH, M.D. Hon. F.R.C.P.

We much regret to learn of the death of Dr. Karel Frederik Wenckebach, emeritus professor of medicine in the University of Vienna, whose name as a cardiologist is honoured throughout the world. He came of Dutch parentage and was born at The Hague on March 24, 1864. After studying at the University of Utrecht he graduated M.D., and was appointed in 1888 assistant in the Institute of Zoology, and afterwards in the Department of Pathology and Normal Anatomy. In 1901 he was elected professor of internal medicine at Gröningen, and from 1911 to 1914 held the same post at the University of Strasbourg. He was then called to the chair of medicine at Vienna, and was made emeritus professor in 1929. Throughout those years Wenckebach identified himself with progress in the study, pathological and clinical, of diseases of the heart and circulatory system, publishing many important contributions to cardiological knowledge between 1901 and 1932. For some years he edited jointly with Drs. Falta and Jagic the Wiener Archiv für innere

Prof. Wenckebach, apart from his scientific and professional eminence, was a man of personal charm. He spoke English fluently and felt genuine affection for this country, where he had many friends. He was an Honorary Fellow of the Royal College of Physicians and of the Royal Society of Medicine, and a Foreign Corresponding Member of the British Medical Association.

Sir THOMAS LEWIS writes:

Many of us in this country will hear with great regret of the death of Prof. Wenckebach, realizing that a chief link with a period of work of extraordinary productivity has been broken. For Wenckebach was one of that brilliant group, which included Cushny, Mackenzie, Einthoven, who simultaneously engaged, intensively and often in collaboration, in studying irregular action of the heart in man. When as a voung man 1 first met Wenckebach it was at Gröningen. where he then held the chair of medicine. He had already reached fame by his independent analysis of cardiac irregularities, using the radial pulse only; this work, published as a whole in his first book, Die Arhythmie, in 1903, was a brilliant achievement and the foundation of much that followed. He continued for many years to publish important papers and to stimulate thought and work in this same field, in which he will always be recognized as having been a pioneer. In later years, by publishing an instance in which quinine stopped attacks of auricular fibrillation, he made a first observation that led quickly to the successful use of quinidine for chronic fibrillation. His work upon beriberi heart, undertaken in post-war years in the Dutch East Indies, again broke fresh ground and must be regarded as of high importance.

There are those of us who will recognize not only that a leader, but that an old friend, has passed away. "Venky," as he loved to be called by his intimates, was a genial, goodhearted fellow, full of enthusiasm for work, inspiring to others, and a great teacher of students; we remember how his work carried him from Holland to Germany and then to Austria, and how, unhappily, two war periods came to separate him from his British friends. But neither one nor the other could dim our affection or admiration for this great Dutchman.

armistice. His services were highly valued by pre-Fascist Italy, and to the cause of Anglo-Italian co-operation Dr. Dickinson continued to devote himself with great enthusiasm. He was, first, physician, and afterwards consulting physician, to the Italian Hospital in London, and he was the founder of the Anglo-Italian Literary Society. He also gained the medal of the Royal Society of Arts for Italian. After the end of the last war he served for fifteen years, until 1933, as chairman of medical boards under the Ministry of Pensions. He was also medical adviser to the Admiralty Welfare Department. To the end of his life he held the post of visiting apothecary to his old hospital, St. George's. His contributions to medical society life were mostly made to the Chelsea Clinical Society, of which he was at one time president, and to the History of Medicine Section of the Royal Society of Medicine, of which he was a vice-president.

Dr. JOHN JAMES ADAMS of Ashville, Antrim, has died in his ninety-second year. He was appointed coroner for the Antrim district in 1886, and on completion of fifty years' coronership a number of his friends presented him with his portrait in oils. Dr. Adams was educated at Queen's College, Belfast, graduating M.D. of the Royal University of Ireland in 1875, and M.Ch. in 1877. Respected as a man of sterling character and a fearless critic, he was also noted for his practical benevolence; the town and district have many memorials of his public spirit and generosity. At an inquest in the board room of Antrim Union the deputy coroner, Dr. Hall Stewart of Randalstown, paid a high tribute to the work and personality of Dr. Adams, saying that he was beloved not only by his professional colleagues but also by that wide circle of patients and friends with whom he came into contact. Dr. Adams was one of the outstanding figures in the public, social, and charitable life of Northern Ireland, and they were the poorer because of his passing. As a coroner he was most acceptable to everyone concerned, for he was genial, approachable, and thoroughly

Dr. Daniel Christopher Mullally, who died with tragic suddenness on January 27 from pulmonary embolism following an operation, was only 26 years old. He graduated M.B. of Queen's University, Belfast, in 1936, and last year, in spite of the handicap of ill-health, passed the examinations for M.D. and M.R.C.P.Lond. During 1939 he was house-physician in the National Temperance Hospital, and subsequently blood transfusion officer there, under the E.M.S. His work (writes J. B. Y.) was of the best. He had great gifts and qualities of mind and character which seemed to mark him out for future distinction in the profession. Medicine can ill afford to lose one of such promise, and his early death is indeed a tragedy.

Universities and Colleges

UNIVERSITY OF LONDON

The following candidates have been approved at the examinations indicated:

DIPLOMA IN CLINICAL PATHOLOGY.-G. Prasad, J. H. Stritch, Freida Young.

BRITISH POSTGRADUATE MEDICAL SCHOOL

ACADEMIC POSTGRADUATE DIPLOMA IN CLINICAL PATHOLOGY.—A. R. Aidin, J. W. Clegg, J. T. Quinlan.

Diploma in Psychological Medicine

The last date for obtaining the entry form for the examination for the postgraduate diploma in psychological medicine, March-April, 1941, is February 24; entry closes on March 1; and the examination begins on March 25 (Part A) and April 8 (Part B). Entry forms may be obtained from the University Extension Registrar, University of London, Royal Holloway College, Englefield Green, Surrey.

ROYAL COLLEGE OF PHYSICIANS OF LONDON

At the quarterly Comitia of the Royal College of Physicians of London, held on January 30, with the President, Sir Robert Hutchison, in the chair, the following representatives of the College were elected: Sir Charles Wilson, Dr. H. L. Tidy, Prof. J. A. Ryle, and Prof. H. P. Himsworth on the British Medical Association Medical Planning Commission; Dr. A. Feiling on the Council of the Queen's Institute of District Nursing; Dr. A. S. Barnes on the Court of Governors of the University of Birmingham; Dr. P. Hamill on the Advisory Committee of the Ministry of Health to compile a War Emergency Formulary War Emergency Formulary.

Membership

The following candidates, having satisfied the Censors' Board, were admitted Members of the College:

James Brown Arthur, M.B.Ed., John Donald Ball, M.B.Lond., Thomas Edward Dowrick Beavan, M.B.Birm., Aaron Jacob Bernfield, M.B.Lond., Stanford Cade, F.R.C.S., William Edward Clarke, M.B.Lond., Constance Elaine Field, M.D.Lond., Michael Oliver John Gibson, M.B.Camb., Alfred Gordon Heppleston, M.B.Manch., Hugh Martin James, M.B.Camb., Raymond Benedict Magill, M.B.Belf., Robert Hereward Mole, M.B.Oxf., Narayan Vasudeo Nene, M.B.Bomb., Elizabeth Herman Rosenberg, M.B.Lond., Gerard Sanderson, M.B.Liverp., Shital Prasad Sinha, M.B.Patna, Geoffrey Reginald Steed, M.D.Lond., Clive Henry Critchett Upjohn, M.B.Camb., Charles Keith John Vautier, M.B.New Zeal., Celia Kathleen Westropp, M.B.Oxf.

Licences and Diplomas

Licences to practise physic were granted to the following 177 candidates (including 22 women) who had passed the Final Examinations in Medicine, Surgery, and Midwifery of the Conjoint Board, and have complied with the necessary by-laws:

Conjoint Board, and have complied with the necessary by-laws:

J. P. Adlam, B. Alexander, A. J. C. Allen, G. J. Amiel, A. W. Anderson, C. M. Arango, A. Arnstein, M. W. Arthurton, W. Aspinall, Islay C. Barne, J. Barrow, D. H. Bennett, F. A. Binks, A. Bogdanovitch, C. Brun, J. M. Burbury, C. R. K. Carroll, D. I. Chapman, H. R. Claff, L. Cohen, Brenda Collar, C. W. Coplans, J. A. B. Cotsell, W. R. Cyrlas-Williams, J. H. Dadds, E. B. Dawe, J. Denfield, G. D. Denlow, A. G. Doughty, C. E. Drew, Margaret D. D. Dudley-Brown, C. T. F. Ealand, W. K. Earle, H. H. G. Eastcott, Christine Ecroyd, E. M. Ensor, E. G. Essery, Joan Fitzherbert, B. J. Fowler, A. J. Fraser-Simson, S. M. Frazer, F. Freund, P. D. Gange, O. F. Garai, L. Garland-Collins, A. J. Gaskell, J. E. Gilbert, R. A. Gill, B. M. Girgis, G. Godfrey, A. H. F. Gow, C. N. Grainger, J. C. Gray, J. L. Greaves, Barbara J. Greenwood, C. H. Greer, A. G. Gregory, E. W. Guillaume, J. W. P. Gummer, A. W. Hagger, F. A. H. Hall, Winefride M. Hamilton, G. P. Hartigan, P. L. M. Hartley, M. C. Head, E. H. Hemsted, G. G. Henn, M. Hershman, J. H. Hicks, A. C. Higgett, G. de B. Hinde, J. C. Holman, Emily M. Horsfall, E. W. Hyde, N. N. Iovetz-Tereshchenko, J. D. James, H. O. Jones, R. D. Jordan, H. L. Joyce, H. Kanter, Marie D. Kelleher, R. E. Kelly, E. R. Keyworth, J. H. Kirkham, S. H. Kutar, R. U. F. Kynaston, B. Lewis, D. W. Liddell, Isobelle G. Little, R. R. H. Lovell, N. W. R. Lucas, Silvia C. Lucas, W. C. Lyon, G. E. McFall, W. E. Mahon, J. Manhas, F. R. C. Manning, L. W. C. Massey, T. R. Maurice, Joyce B. M. Mayes, F. B. Meade, V. C. Medvei, Joan S. Millett, A. F. Mohun, R. A. R. Montgomery, J. V. Morris, Madeleine B. Morris, J. H. MacL. Munro, S. Muntarbhorn, T. A. Narayanan, L. P. A. Newborne, D. J. O'Brien, W. O'Brien, C. B. O'Carroll, E. E. Oddie, F. H. Packer, R. H. A. Parker, C. N. Partington, A. J. Patenall, G. H. Pearson, Rosa M. Pigot, L. Portelli, F. T. G. Prunty, S. D. Purcell, H. Reeback, H. N. Reed, P. A. Rees, R. L. Rees, R. E. Renaud, G. K. C. Rettie, R. E. Rew

Diplomas were granted, jointly with the Royal College of Surgeons of England, as follows:

DIPLOMA IN PUBLIC HEALTH.—G. P. Charles, Gwendoline M. Edwards, Joan M. Faulkner, S. Leff, I. B. Sen Gupta.

DIPLOMA IN MEDICAL RADIOLOGY.—B. Jolles, J. H. Wilding.

Diplomas in Anaesthetics were granted to the twenty-eight persons whose names were published in the report of the meeting of the Royal College of Surgeons of England in the *Journal* of December 21, 1940 (p. 888), as were the names of the four persons who were granted Diplomas in Laryngology and Otology. Diplomas in Psychological Medicine were granted to the three persons whose names were published in the report of the meeting of the Royal College of Surgeons of England in the Journal of January 18 (p. 101).