

member of several committees. Fishing and reading were his recreations, and his gift for friendship was known in many a Highland and Western Islands fishing circle. He was very happily married, and the loss of his wife in January of this year appeared to sound the knell of his own departure. To his three sons and to his daughter we extend our affectionate sympathy in their double loss. With them there remains an imperishable memory of unselfish devoted parents. J. O.

HILDRED CARLILL, M.D., F.R.C.P.

Dr. Hildred Bertram Carlill, who retired from the post of physician to the Westminster Hospital in October, 1940, died suddenly at Tavistock, Devon, on April 16, aged 60.

He was educated at Harrow School and went up to St. John's College, Cambridge, in 1899, and having taken his B.A. in the Natural Sciences Tripos entered Guy's Hospital, where after graduating M.B., B.Ch. in 1907 he held house appointments. He was then for a time resident medical officer at the East London Children's Hospital and proceeded M.D. in 1910. Before his election as assistant physician to the Westminster Hospital in 1920 Carlill had joined the visiting staff of the Miller General Hospital, the Belgrave Children's Hospital, and the Seamen's Hospital, Greenwich; he was also for some years physician to the Victoria Park Chest Hospital and to the West End Hospital for Nervous Diseases. During the last war he held a temporary commission as surgeon lieutenant, R.N., and served for eighteen months in the battle cruiser *New Zealand* and for three years at the Royal Naval Hospital, Haslar, as neurologist and psychiatrist. As a Hunterian Professor at the Royal College of Surgeons in 1918 he lectured on syphilis of the nervous system, drawing largely on his extensive experience at Haslar; and as Arris and Gale lecturer in 1927 his subject was simulation of surgical affections by hysteria. He joined the British Medical Association in 1920 and was honorary secretary of the Section of Neurology and Psychological Medicine at the Glasgow Meeting in 1922. The Royal College of Physicians elected him a Fellow in 1939. At the Westminster Hospital he lectured on clinical medicine and on nervous diseases, and was senior physician during the two years before his retirement from the active staff.

News has been received of the death of Dr. ADRIEN LOIR on Dec. 16, 1941, the day after his 79th birthday. Dr. Loir died in Paris, where, 59 years before, he began work as the assistant of his uncle Louis Pasteur. Pasteur's stroke in 1868 left him with a paralysed arm, and the young Loir was trained in laboratory technique by his father, then professor of chemistry in the University of Lyons, to perform the experiments which Pasteur himself directed. For six years—1882-8—Adrien Loir worked each day with Pasteur in the little laboratory in the Rue d'Ulm. It was during these years that Pasteur made his famous investigations on rabies and anthrax. The first mass inoculation for the prevention of hydrophobia was made on 21 Russians from Smolensk in March, 1886. Dr. Loir founded four Pasteur Institutes in different parts of the world. In 1886 he went to Russia to found the first foreign Pasteur Institute in St. Petersburg, and in 1889 he left the newly established Pasteur Institute in Paris to found the Australian Pasteur Institute in Sydney, which he directed for five years. In 1893 he was sent to Tunis, where he was in charge of the Pasteur Institute for nine years. The last Pasteur Institute founded by Dr. Loir was at Bulawayo in 1902. In 1906 he was sent by the French Association for the Advancement of Science to Canada, where he remained for two years. During this time he studied trichiniasis and was given a chair at the University of Montreal. In 1909 he returned to France to take up the appointment of medical officer of health of Le Havre, where he remained for 30 years. He was a prolific writer on medical and scientific subjects; the breadth of his interest is shown by the fact that for many years he was curator of the Natural History Museum at Le Havre and director of the Oceanographical Laboratory of the University of Caen. During the last war the presence of large numbers of British troops at the base camp at Le Havre involved close and always cordial co-operation with the British authorities, and his services to this country were recognized afterwards by the award of the M.B.E. At the time of his retirement in 1939 Dr. Loir was an Officer of the Legion of Honour, member of the Academy of Medicine, member of the Council of Public Health in France, and president of the Society of Medical Officers of Health of France. He received numerous honours and distinctions, including the LL.D. of the University of Glasgow, during a long and valuable lifetime.

The Services

ARMY AWARDS

The King has granted permission to Col. (Temporary Brigadier) D. T. M. Large, late R.A.M.C., to wear the Military Cross (First Class) conferred upon him by the King of the Hellenes in recognition of services to the cause of the Allies.

The M.C. has been awarded to Capts. A. M. Canter and J. McD. Dougan, R.A.M.C., in recognition of gallant and distinguished services in the Middle East, and to Lieut. V. K. Sundaram, I.M.S., in recognition of gallant and distinguished services in Burma.

The King has approved the following awards and mentions in recognition of gallant and distinguished services in the Middle East during the period July to October, 1941:

C.B. (Military Division): Major-Gen. S. R. Burston, C.B.E., D.S.O., V.D., Australian Military Forces. *C.B.E. (Military Division):* Col. J. Steigard, Australian Military Forces. *O.B.E. (Military Division):* Temp. Col. R. P. Cormack, R.A.M.C., Lieut.-Cols. A. L. Dawkins and K. W. Starr, Australian Military Forces, and Lieut.-Col. R. N. Khosla, I.M.S. *M.B.E. (Military Division):* Capt. (Temp. Major) M. M. Medine and Capt. A. D. Picton, M.C., R.A.M.C., and Major (Temp. Lieut.-Col.) J. O. Smith and Major I. J. Wood, Australian Military Forces. *Military Cross:* Capt. (Acting Major) R. J. Niven, R.A.M.C. *Mentions:* Capt. (Temp. Major) G. A. H. Buttie, R.A.M.C., and Cols. K. B. Fraser and H. G. Furnell, D.S.O., and Lieut.-Col. D. W. McCredie, M.C., Australian Military Forces.

CASUALTIES IN THE MEDICAL SERVICES

Surg. Lieut.-Cmdr. ROBERT CHALMERS ANDERSON, R.N.V.R. (H.M.S. *Hermes*) is reported missing, believed killed on active service on April 9. He was 34 years of age, and was the youngest son of the late W. Anderson and Mrs. Anderson of Glasgow, and was educated at the University of Glasgow, where he graduated M.B., Ch.B. in 1933. He held the post of house-surgeon at the Royal Alexandra Infirmary, Paisley, before settling in general practice. In 1940 he entered the R.N.V.R. as surg. lieut., and was promoted surg. lieut.-cmdr. a year later. He had been a member of the B.M.A. since qualification. He leaves a widow.

Captain PETER GORRIE, R.A.M.C., was killed by enemy action in the Pacific early this year. He was educated at the University of Edinburgh, where he graduated M.B., Ch.B. in 1908, proceeding M.D. in 1910. After filling the post of house-surgeon at the Cancer Hospital he went to Australia and practised in Adelaide. He served in the war of 1914-18. His younger son, Pilot Officer Peter Gorrie of the R.A.A.F., was killed flying in the Far East last January.

Among the seventeen officers killed in the accident during Combined Operations near Warminster on April 13 was Lieut. JOHN CHRISTOPHER HAWKS, R.A.M.C., whose home was in Liverpool. He was the son of Dr. and Mrs. F. Swanson Hawks, was born on June 1, 1913, and graduated B.M., B.Ch. of the University of Oxford in 1940. He entered the R.A.M.C. as temp. lieut. in October last year, and was attached to the London Scottish.

Missing.—Capt. A. Barber, R.A.M.C., Capt. J. E. A. Bartlet, R.A.M.C., Lieut. G. Blair, R.A.M.C., Capt. C. D. Chilton, R.A.M.C., Major G. H. Garlick, R.A.M.C., Capt. W. R. Grant, R.A.M.C., Major W. J. E. Phillips, R.A.M.C., Major J. A. Reid, R.A.M.C., Capt. L. D. Stone, R.A.M.C.

The Sarawak Government offices announce that they have been informed that Mrs. Elizabeth Josephine Le Sueur, M.B., B.Ch., and Dr. Eslyn Marcar Marjoribanks are missing, believed prisoners.

Universities and Colleges

ROYAL COLLEGE OF SURGEONS OF ENGLAND

Gifts for Restoration of the Museum

In addition to the many offers of help towards the restoration of the Museum of the Royal College of Surgeons which have already been announced, some notable gifts and promises have recently been gratefully received.

The Council of the University of Manchester, on the suggestion of Prof. Wood Jones, has presented the specimens assembled and prepared by the late Prof. Morrison Watson to illustrate Hunterian ideals. It was felt by the University authorities that the collection would be more generally useful to students and research workers if housed in the museum of the headquarters of British surgery.

The Medical Committees of the Royal Cancer Hospital and of St. Mark's Hospital have presented specimens illustrating different forms of malignant disease. These gifts will form a valuable section of the pathological museum.

The Royal Australasian College of Surgeons is arranging for hospitals throughout Australia and New Zealand to collect specimens illustrating pathological conditions commonly seen in those countries and seldom met with in the British Isles. The specimens will be stored in the different hospitals and presented to the English College after the war.

Further generous help has been given by Australia. The authorities of the Institute of Anatomy at Canberra have earmarked a considerable number of duplicate specimens for transfer to England, and have promised that after the war they will organize expeditions to collect specimens of those rare marsupials and monotremes of which they do not possess duplicates.

The High Commissioner for New Zealand has interested his Prime Minister in the restoration of the Museum, and has received a message assuring him that the Minister of Health for the Dominion is enlisting the help of New Zealand surgeons in the collection of specimens.

The Rector of the Egyptian University, Sir Ali Ibrahim Pasha, and the Dean of the Faculty of Medicine, Prof. S. Azmi Pasha, have also sent assurances that Egyptian surgeons will give every assistance and will arrange for the collection of specimens illustrating diseases not met with in Great Britain. The specimens will be presented to the Royal College of Surgeons after the war as a token of gratitude for benefits received and for the hearty co-operation which has existed for many years between British surgeons and their colleagues in Egypt, most of whom are Fellows of the English College.

UNIVERSITY OF MANCHESTER

The following candidates have been approved at the examinations indicated:

THIRD M.B., CH.B.—*Pathology and Bacteriology*: D. J. Atherton, Margaret A. Barber, Alice I. Burke, Margaret R. Burke, W. Clegg, L. Erin, F. Fletcher, J. W. Fletcher, E. Isherwood, R. M. Laslett, T. Moss, A. Ramsden, P. H. Renton, M. M. Rose, B. Samuels, P. Vulfsen, Margaret Wardie. *Pharmacology*: Margaret A. Barber, R. B. Broughton, S. Epstein, G. V. Feldman, Margaret Hedley, E. V. Mellor, Nancy B. Penney.

UNIVERSITY OF GLASGOW

A graduation ceremony was held on April 18, when the following medical degrees were conferred:

M.D.—*†W. F. Anderson, G. L. Brown, I. Campbell, I. MacK. Davidson, R. Gibson, J. B. Macdonald.

M.B., CH.B.—A. S. Anderson, T. Anderson, W. Anderson, W. L. Anderson, R. V. Bannister, P. Beattie, E. Bebbington, B. Bernard, R. H. Bowie, R. Burns, R. M. Calman, M. M. Campbell, H. O. Chisholm, T. A. Cockburn, W. Craw, W. M. B. Davidson, Marion Ferguson, A. Finlayson, M. Fogell, A. Forrest, Esther M. Forsyth, Marion H. Fraser, W. D. Fraser, T. B. Gardiner, R. S. Gibson, R. D. Glaister, J. S. T. Goldie, A. M. Greenshields, D. Gregory, J. R. G. Grice, W. G. Harrington, A. H. D. Hunter, F. W. B. Iveson, W. Jack, I. J. MacCannond, I. F. McCaw, H. McK. McDonald, A. J. McKendrick, P. McKillop, J. McKimmie, A. A. McKirdy, S. C. Macmillan, A. T. McNeil, J. Macpherson, D. Martin, Jane H. Merry, D. Mitchell, J. E. Morton, T. M. Park, I. S. Phillips, Normana R. Plews, J. S. McK. Pollock, J. S. S. Pollock, T. M. Pollock, J. M. Rosie, Maeve Rusk, J. W. Sandler, I. Shenkin, M. Sluglett, A. Starritt, T. Stevenson, I. H. Stewart, S. D. Thomson, Elizabeth P. Wade-Evans, J. F. H. Wood.

The following prizes among others were awarded:

University Prizes.—Bellahouston Medals: R. M. Calder, Margaret D. Crawford, A. C. Lendrum. Capt. H. S. Ranken, V.C., Memorial Prize: May B. Paterson. *Special Class Prize*.—Surgery, Macleod Medal: F. Finlayson. *With honours. †*In absentia*.

CONJOINT BOARD IN SCOTLAND

The following candidates, having passed the final examination, have been admitted L.R.C.P.Ed., L.R.C.S.Ed., and L.R.F.P.&S. Glasg.:

A. Bernstein, H. B. Bieber, Lois C. Burgh, A. W. Chambers, P. Cherico, H. C. Denis, G. Fahmy, Elizabeth H. C. Geach, W. Gibson, S. W. Grant, R. I. Greenblatt, I. V. Hankins, N. M. Jaret, S. M. Kahn, J. H. Kelly, N. Margolis, R. Meek, L. Naftalin, R. A. Ramsay, R. M. Rizkalla, Gurdeep Singh, A. U. Somerville, T. A. Spitz, L. Stone, K. T. Sweeney, G. N. Tyler, P. Weyman.

A week-end course in industrial medicine will be held in the Algernon Firth Institute of Pathology, University of Leeds, on Saturday and Sunday, May 30 and 31. It is intended for medical practitioners, and especially for those concerned with factory medical services. On Saturday at 2.30 p.m. Dr. J. C. Bridge will lecture on some medical aspects of factory legislation, followed by Dr. R. E. Lane on the nature and prevention of toxic risks in industry. On Sunday at 10.30 a.m. Dr. S. A. Underwood will lecture on the doctor's place in industrial organization, followed by Dr. J. T. Ingram on industrial dermatology; and at 2.15 p.m. His Honour Judge Frankland will speak on some medico-legal aspects of industrial injuries, followed by Mr. J. Foster on industrial eye injuries. The fee for the course is one guinea, and forms of application may be had from the Dean, School of Medicine, Leeds, 2.

Medical Notes in Parliament

FUTURE OF HOSPITALS

In the House of Commons on April 21 Mr. MCNEIL initiated a debate on hospital administration. He moved a resolution declaring that the House recognized the need for regional planning of hospital services and was of opinion that the utmost efficiency with maintenance of democratic control could only be secured by full recognition of the status and responsibilities of local authorities; that throughout the country there should be no lack of accommodation, with the requisite staff, for all persons requiring treatment; and that, especially in areas already amply served, independent schemes for the future building of hospitals should be discouraged as being inimical to a proper co-ordinated post-war plan. He contended that the present hospital system lacked the necessary extension and elasticity that the country needed to cope with the enormous development of tuberculosis. The weapon we must use to tackle these deficiencies was regionalization.

During the debate which followed, Mr. STOREY said there were good features about both the voluntary and the local authority hospital systems, and already there had been much fruitful co-operation between the two. It was necessary to take what was best in both and to build up a comprehensive hospital service through which appropriate treatment would be readily available to every person in need of it. The service must be based on considerable areas. Equipment and accommodation were expensive to provide, and specialist skill was limited in supply. We must, therefore, try to co-ordinate the two in economic units. Through the Emergency Medical Services and the work of the Nuffield Trust, the local authority and the voluntary hospital systems were learning to know each other and work together.

Regionalization through Co-operation

Sir FRANCIS FREMANTLE said that what was required was that the voluntary hospitals, the municipal hospitals, separate clinics, general practitioners, clinics that had grown up to deal with special diseases, the dispensary system, and a very large number of different schemes or arrangements should be cemented together, not that they should be swept away and replaced by a single system. They had grown up out of natural needs, with natural help around them, and we wanted to use those needs and that help in a natural way. In Hertfordshire there were two voluntary hospitals working with a large amount of municipal finance and a good deal of municipal responsibility for their management, and the combination worked very well. That was a kind of ideal more likely to prove acceptable throughout the country than the ideal of one single service. The teaching hospital was the university of the medical profession. The lesson that the teaching hospital should be the basis of the scheme of reorganization was brought home by the committee under Lord Dawson which reported in 1920. That report suggested that the hospitals should be arranged in three categories—the casualty hospital, the provincial town hospital, and the base hospital—and that they should be in proper proportion to each other. He hoped that the regional proposal might lead in that direction, but we must beware of having a cut-and-dried system laid down for the whole country. The system of regionalization must grow up naturally, but it must be given opportunities for growth.

There must be a regional advisory committee that would cover the region, but the matter could not be taken out of the hands of the local authorities so far as they were concerned. The local authorities must be the larger areas, the counties and county boroughs. The regional advisory committees should be statutory bodies and given the necessary powers. A similar body to the University Grants Committee should have responsibility for the distribution of the money that would be provided by the Government. It would not be sufficient for the Government to give the subsidies to the local authorities.

Health Centres

One scheme that was being suggested, continued Sir Francis, was for health centres outside the hospitals to bring together the different clinics of the local authorities, the general practitioners, the hospital services, and also the nursing services. The question would arise whether they were to be run by the local authorities, the general practitioners, or the hospital authorities. It was too big a matter for the Medical Planning Commission to decide easily, but he threw out the suggestion.

Dr. W. RUSSELL THOMAS said that instead of setting out to plan for the future for disease we should consider good health and not ill-health as being the natural heritage of man. People were disease-conscious. If people were well housed, had good