

Future of the G.P. Specialist

SIR,—Mr. J. K. B. Waddington's letter (Jan. 20, p. 97) ventilates a most important problem which does not appear to have received any consideration by the Government in the White Paper. There are several hundreds of experienced surgeons, physicians, and anaesthetists attached to hospitals performing splendid work while at the same time engaged in general practice. Their future appears to be nobody's concern. Recently a colleague engaged in general practice operated successfully on an eminent physician and an equally eminent ear, nose, and throat surgeon. Such skill must not be put aside because the possessor of it is also engaged in general practice.

I suggest that all such physicians, surgeons, and anaesthetists should join together to voice their views and state a case to the Government through the Negotiating Committee. I am prepared to organize a united effort to be presented to the British Medical Association if I receive support from members of hospital staffs.—I am, etc.,

New Place, Horsham, Sussex.

GERALD DELACEY.

Death of Robert Burns

SIR,—In reply to Dr. Archibald Ogg's letter to the *Journal* of Jan. 13 (p. 62), may I suggest that the late much-respected Sir James Crichton-Browne viewed the matter of Burns's last illness as a somewhat prejudiced historian working with scant material rather than as a cold clinician doing the same, using other men's unsubstantiated facts?

The words "rheumatic endocarditis" indicate what is only symptomatic of an acute valvulitis in the one case, of cicatrized valves in the other, chronic, case; being simply a label, a part diagnosis recording an incident in the course of the illness and not the disease itself. A fact well known to practising medical men is this: that scarred heart-valve cusps occurring as a sequel to acute articular rheumatism (rheumatic fever) commonly dispose to and determine the site of a bacterial endocarditis many years after. However, we need not "split straws": clearly, Burns died of an actively infective disease of the whole heart, not from alcoholism, which itself could have neither provoked nor excited the disease. Thus far, I dare say, Dr. Ogg would agree with me; then we can forget it, and turn again to enjoy Burns's delightful poetry.

In reply to Dr. Letitia Fairfield's letter (Jan. 20, p. 98), may I point out that she, unreasonably as I think, places the blame for Burns's death on the doctors; meaning, I suppose, Dr. Maxwell, though he without doubt would advise to the best of his ability in conformity with the then medical teaching. Gentle and generous towards the sick poet as he was known to be, the doctor was much liked by Burns, who named his posthumous child after him—a deed which speaks for itself.

Perhaps the "tonic treatment" ordered—crude as it was to include sea-bathing, horseback exercise, iron water and port-wine together—might in some circles be fancied even to-day as being not unorthodox and likely to be helpful, though in Burns's case unsuited to his condition of health at the particular time when he was out of the doctor's sight, away from his professional supervision. Could the doctor be held blameworthy for this? I think not. Though unsuitable in relapse, the prescribed treatment was probably believed suited to his case before Burns left for the Solway. Dr. Fairfield's statement will call to the minds of medical men with long experience of practice instances where they have been wrongly held responsible for causing the patient's disease, let alone his death.—I am, etc.,

Bournemouth.

S. WATSON SMITH.

The latest news bulletin concerning the Friends' Ambulance Unit (4, Gordon Square, London, W.C.1) gives a record of work by the overseas section, whose members now number more than 500. Throughout last year the main increases in overseas personnel were made in response to demands in the field of European relief. Among other items of information from various parts of the world is a first-hand account of conditions in Tengchung, a large city retaken by the Chinese on the Yunnan front, where the F.A.U. is initiating some measures of medical relief. The chairman has returned from a four-months tour of Mediterranean sections and Ethiopia. The annual report of the F.A.U. for 1944 was published on Jan. 23.

Medico-Legal**BUSINESS OR PROFESSION?**

An optician practised in St. Helens. The income-tax authorities said he was carrying on a business, and assessed him for excess profits tax. He appealed to the Inland Revenue Commissioners, and they held that he was carrying on a profession. The department took the case to the High Court, where Mr. Justice Macnaghten said that, although the Commissioners had found as a fact that he was carrying on a profession, the right view of the case was that he was conducting the business of selling spectacles. The learned judge's decision necessarily meant that there was no evidence on which the Commissioners could have found that the optician was carrying on a profession, for if there had been any such evidence his Lordship would not have been entitled to upset their finding. The optician appealed to the Court of Appeal, who said that the Commissioners had evidence before them upon which they could reach their conclusion, and its correctness was therefore not a matter of opinion. The Court accordingly held that the optician had been practising a profession and therefore could not be assessed for excess profits tax.

As their Lordships went fairly fully into the distinction between a business and a profession, their decision has general importance. The essential notion of a business, within the meaning of the Finance (No. 2) Act, 1939, S. 12(3), is that it is commercial in character. Lord Justice Scott said the section left in his mind a strong impression that the primary object of the excess profits tax was to deal with profits which were likely to be greatly augmented by the effect of war upon supply and demand without any relation to the efforts of the owner of the business. That view, he thought, was consistent with the characteristic of the tax that professions, which essentially depended upon skilled but non-commercial individual initiative, should be exempt. Six considerations pointed to this optician's carrying on a profession. There was no advertising, even outside the premises; he had the appropriate waiting-room and two consulting-rooms; no prices were mentioned in connexion with the seven or eight types of frame exhibited in his little windows for the observation of patients. He carried out the functions of examining and testing eyesight and prescribing the suitable glasses and assembling them in their frames—meaning, no doubt, for example, that they were set in the frames at the appropriate angle, which of course was essential. His net earnings were very substantial, particularly in relation to his expenditure on material—what would be called the stock-in-trade of a business; and the proportion between those earnings and the item for stock-in-trade was far larger than it would normally be in any trading business. The Court of Appeal disagreed with the Solicitor-General, who argued for the Crown, that the livelihood of a professional person was attributable to his intellectual qualifications. A professional man, they said, might utilize aesthetic qualifications, and one who dealt with a subject-matter cognate to medicine might use many other qualifications. They therefore disagreed with the judge's finding that as a matter of law an optician is not carrying on a profession.

The Services

Temp. Surg. Lieut. M. J. Brosnan, R.N.V.R., has been appointed M.B.E. (Military Division) for great courage and devotion to duty in organizing rescue parties and in first aid to the injured when H.M.S. *Blackwood* was lost.

Temp. Surg. Lieut. R. C. P. Aldridge, R.N.V.R., has been mentioned in dispatches for good services during operations in Italy.

Col. (Acting) D. P. Levack, R.A.M.C., has been appointed C.B.E. (Military Division) in recognition of gallant and distinguished services in the field.

Major (Temp. Lieut.-Col.) J. A. Chapel, M.B.E., R.A.M.C., has been appointed O.B.E. (Military Division) in recognition of distinguished services.

The Efficiency Decoration of the Territorial Army has been conferred upon the following: Lieut.-Col. E. Walsh; Majors (Temp. Lieut.-Cols.) A. H. Charles, E. J. G. Glass, F. W. A. Warren, and J. F. Wilde, R.A.M.C.; Major H. P. Gabb, M.C.; and Capt. D. Jack and J. H. B. Livingston, T.A.R.O.

CASUALTIES IN THE MEDICAL SERVICES

Major BARNETT FREEDMAN, who died over-seas on Dec. 2, 1944, aged 30, was, at the time of his death, Deputy Assistant Director of Medical Services (Nutrition) at Headquarters, Allied Land Forces,

South-East Asia Command. He studied medicine at the Middlesex Hospital from 1934 until he qualified M.R.C.S., L.R.C.P. in 1939. After working as R.M.O. at the Albert Dock Hospital during the period of intense air raids on the docks area, he joined the R.A.M.C. in Dec., 1940. In the Army he served first in Wales and then went abroad in April, 1942. Arriving in India, he was posted to the North-West Frontier and spent a year there. His special interest in and knowledge of nutrition caused him to be appointed as nutritional adviser, first to Central Command, and latterly to Allied Land Forces. His work to improve the nutritional status of British and Indian troops constituted an important contribution to the war effort and earned for him a considerable local reputation. He travelled continually and examined approximately 40,000 men in the course of nutritional surveys. His personality, especially his modesty and sense of humour, endeared him to those with whom he was associated. His death leaves a gap hard to fill and removes a man of great promise.

Previously reported missing at Arnhem, now officially reported died as prisoner of war.—Capt. John Howard Keesey, R.A.M.C.

Missing, presumed killed.—Temp. Surg. Lieut. Lachlan McLachlan, R.N.V.R.

Prisoner of war.—Lieut.-Col. E. Townsend, M.C., R.A.M.C.

Obituary

SIR HENRY GAUVAIN, M.D., M.Ch., F.R.C.S.

By the death of Sir Henry John Gauvain the medical profession has lost not only a pioneer and eminent authority on surgical tuberculosis and heliotherapy but also a man of remarkable personality and charm.

Gauvain was born in Alderney in 1878. He was the son of William Gauvain, and both his parents were descendants of old Alderney families. He was educated privately and later entered St. John's College, Cambridge, as a scholar. He had a distinguished career at Cambridge and obtained first-class honours in the Natural Sciences Tripos of 1902. He then went to St. Bartholomew's Hospital as a scholar. After qualifying in 1906 as M.B., B.Ch., and M.R.C.S., L.R.C.P. he became house-surgeon to Mr. C. B. Lockwood, and also held intern and extern obstetric appointments.



In 1908 Sir William Treloar founded the Lord Mayor Treloar Cripples' Home at Alton for children suffering from surgical tuberculosis, and offered Gauvain the post of resident medical officer. Many of Gauvain's friends tried to dissuade him from accepting a post

involving treatment of a condition for which practically nothing could be done, but he, being a man of vision, thought otherwise. At that time little was done in this country for children suffering from bone and joint tuberculosis. Gauvain paid a brief visit to Berck-sur-Mer, where the treatment of these cases by conservative methods had been carried on for about 30 years, and he started the treatment at Alton on the same lines, modifying and amplifying it in accordance with his own ideas and experience. In a few years' time Gauvain's work, and the results obtained, proved the words "Cripples' Home" to be a misnomer, and the title of Lord Mayor Treloar Cripples' Hospital was given to the institution, which was acquiring both a national and an international reputation, and Gauvain was appointed medical superintendent.

In view of present-day treatment of bone and joint tuberculosis it is perhaps interesting to refer to some of Gauvain's early troubles. Many of the members of the honorary medical board, which was composed of distinguished consulting surgeons and physicians of the time, were strongly opposed to Gauvain's treatment of tuberculous abscesses by aspiration. They saw no need for an x-ray apparatus, and he also had great difficulty

in obtaining their sanction to buy a sterilizer for dressings, as the medical board did not consider sterile dressings to be necessary in tuberculous conditions.

Gauvain's name has always been associated with heliotherapy, and from the time he first started work at Alton he had been interested in the effects of sunlight on his patients, and had successfully demonstrated its value in suitable cases. For many years he was convinced of the value of sea-bathing in conjunction with heliotherapy in properly selected cases, but it was not until it was found possible to open the marine branch at Sandy Point, Hayling Island, in 1920 that the outstanding benefits of this form of treatment could be demonstrated. A few years before this time Gauvain had recognized the need for children at Alton to have some form of education. At first this was given by one or two nurses chosen for the purpose, but later the then Prime Minister, Mr. Lloyd George, on the occasion of a visit to the hospital, was so impressed by the need for educational facilities that the matter was brought before Parliament, and Alton became the first of the hospital schools in this country.

In 1920 Gauvain received the honour of knighthood for his services to cripple children. In 1925 he opened the Morland Clinics for private patients, where it is hoped that the work he started will continue. In 1927 he was elected Fellow of the Royal College of Surgeons, having proceeded to the degrees of M.D., M.Ch. 9 years earlier. For several years before this there had been further increase in the interest taken in light treatment, more especially in artificial light treatment, and Gauvain was one of the leaders in the movement. He paid several visits to the Finsen Institute, where he was elected an honorary member of the Medical Society of Copenhagen. He was always interested in the treatment of lupus, and a relatively large number of such cases were always under treatment in the Light Department at Alton. He held very definite views on the treatment of adult lupus patients and favoured the colony system, with suitable occupational therapy, as opposed to attendance as an out-patient at a hospital or clinic.

In 1926 he went on a lecture tour in the United States and Canada, and in 1936 he was made the recipient of the Distinguished Service Gold Key of the American Congress of Physical Therapy. In 1935 the British Medical Association Meeting was held in Australia, and Gauvain was president of the Section of Tuberculosis and Public Health. He gave the presidential address on sea-bathing in the treatment of surgical tuberculosis, and received the honorary degree of M.D. Melbourne.

About 15 years ago the rebuilding of the hospital at Alton was begun. This gave full scope to Gauvain's interest in hospital design and organization, and the present hospital with its imposing structure and equipment stands as a monument to his work. Following a generous benefaction in 1938 plans were made to build a hydrotherapeutic centre for the treatment of anterior poliomyelitis at the Hayling Island branch. He had always cherished the hope that this would be used for both adults and children of all classes. In 1940 he took under his care at Morland Clinics 100 Belgian children from an orthopaedic hospital evacuated from Ostend. In gratitude for his kindness to them he received a book from the Belgian Government containing letters from the Prime Minister, the Belgian Ambassador, and the President of the Belgian Red Cross.

Gauvain was consulting surgeon in tuberculosis to three county councils and held numerous other consulting appointments; he was also the author of papers on surgical tuberculosis, hospital design, and heliotherapy. But it was perhaps as medical superintendent of the hospital at Alton that he was best known. He was considered by many to be the ideal medical superintendent. He was beloved by his patients and his staff. He chose his staff with care, and if he was convinced of their competence gave them adequate scope, and remained himself unobtrusively but keenly observant of their work. But to those who had worked longest with him and knew him best it was his great-hearted kindness that so endeared him to them; truly we shall not look upon his like again.

He married in 1913 Louise, daughter of the late William Butler, M.R.C.S., formerly I.M.S., and is survived by her and a daughter who is also a doctor.

there was unknown and unseen. He knew his limitations in surgery and would often refuse to operate when he thought that others had more experience for that particular case. His work was his main and abiding interest, and nothing was allowed to interfere with it; but after his work his love of golf came very close. His loyalty was unquestioned but never blind, and if he saw a fault he tried hard to remedy it. He had a decisive mind and was not easily persuaded by argument against reason. In medical politics he was most conservative and detested the prospect of political interference in medical freedom. A fine partner, a very true and loyal friend and teacher, has passed on." C. G. G.-W. writes: "For over thirty years, in a happy partnership, Dick revelled in his practice at Scarborough and gained the affection of both patients and friends for his lovable qualities and his exceptional gifts in the profession to which he gave his all until sickness cut him down while yet in his prime. I learnt his worth when serving with him in France and Italy in the first world war, and can vouch for the high standard which he set himself and never ceased to maintain. 'Richard,' as his friends in France styled him, was a glutton for work and his relaxation was golf, at which he excelled. To have twice holed out in two at the long 18th hole at Ganton was a remarkable feat, if not unique. It is especially to those lovable qualities, which endeared him to so many, that I wish to pay a grateful tribute. When his light went out so suddenly an aching void was left in the hearts of his many friends. To his wife and three sons serving in the war our sympathy goes out."

News has reached this country from his pupil, Dr. Aldo Muggia, of Quito, Ecuador, of the death of Prof. BENEDETTO MORPURGO. He was born at Trieste on Aug. 15, 1861, and died in Buenos Aires on Aug. 21, 1944. It was in 1903 that he followed his teacher, Prof. Bizzozzero, in the chair of general pathology at the University of Turin. In the words of our correspondent, Prof. Morpurgo was deeply convinced of the morphological orientation of medical science, and he remained firmly loyal to his principles even when new tendencies began to prevail. His earliest work (1888) was a study of the laws which govern the regeneration of organic cells. With Canalis he began in 1890 experimental tests showing that complete fasting caused the loss of natural immunity against infections. He made many important contributions to the physiology of nerve and muscle, to cellular pathology, and on homoplastic and heteroplastic grafts. On the occasion of the 35th anniversary of his professorship a collection of original papers was offered to him by his disciples and by scientists from various parts of the world; this filled two large volumes, and contained treatises on a number of subjects in physiopathology. Prof. Morpurgo was an associate member of many foreign medical academies and often attended international congresses on general pathology, presenting there the results of his own investigations and those of his pupils. From 1925 to 1938 he directed the Cancer Institute of the City of Turin. After the Fascist Government had interrupted this charitable work its racial laws sent Prof. Morpurgo into exile.

Universities and Colleges

UNIVERSITY OF OXFORD

In Congregation on Jan. 23 the title of professor was formally conferred on Miss Ida Mann, D.Sc.Lond., F.R.C.S.Eng., Fellow of St. Hugh's College and Margaret Ogilvie Reader in Ophthalmology in the University. She is the first woman to receive the title of professor at Oxford. Prof. E. H. T. Liddell said in Congregation that hitherto the University had been making up the small stipend attached to the readership in ophthalmology to £1,000, and this would now be doubled; they were confident that the title of professor would assist Dr. Mann to build up a distinguished staff for her new Department of Ophthalmology.

In a Congregation held on Dec. 23, 1944, the following degrees were conferred:

B.M., B.Ch.—P. B. S. Fowler, L. Parker, R. A. Sladden, P. West, A. H. James, A. E. Preston, Mary R. Barker, Margaret K. Wilder. *In absence*—R. G. Howell, A. A. Jefferson, D. Leigh, R. M. T. Walker-Brash, G. M. Colson, R. H. Marten, C. J. H. Stacey, Joan F. Scott.

UNIVERSITY OF EDINBURGH

At a graduation ceremonial on Jan. 20 the following medical degrees and diplomas were conferred:

M.D.—*†M. E. S. Harrison, *A. S. Johnstone, I. F. Mackenzie, †E. G. L. Mark, †J. M. M. Batheson, lieut.-col., R.A.M.C., *†J. B. Pennybacker, †H. G. Triay.

D.Sc.—Department of Pure Science: J. N. Davidson, M.D.
M.B., Ch.B.—D. F. Aitken, M. M. Andrew, C. Austin, A. D. Bethune, C. G. H. Bouhill, Henrietta M. Brand, R. B. Crombie, G. B. Debenham,

T. F. Elias-Jones, I. S. Ferguson, J. C. Foster, M. I. Girdwood, C. G. I. Gordon, Vivian M. Guthrie (*née* Duncan), Jessie H. Ingram, D. M. Johns, F. R. C. Johnstone, J. Lister, R. C. W. Lowe, P. S. Lurie, E. M'Ewen, K. M'LAY, J. M'Lelland, W. W. M'Phail, R. Mendick, A. G. Moffoot, *K. S. Mowatt, J. E. Norman, Joyce M. B. Orr, Patricia M. M. O. Paterson, Barbara Petrovskaja, T. Philp, K. H. S. Pottinger, †R. F. Robertson, J. S. Robson, P. F. Scott, H. A. E. Simpson, Carol M. S. Spence (*née* Walker), J. T. M. Stevenson, J. L. Stewart, B. J. I. S. Sutherland, R. W. Tonkin, J. G. Trimble, J. G. Walker, M. Wiederlight, E. A. M. Wood, A. D. C. Young.

DIPLOMA IN MEDICAL RADIOLOGY.—M. M'Alley, Lesley I. Thomson (*née* Stewart), C. Kelly, Margaret S. King, K. A. Mackenzie.

* Highly commended for thesis. † *In absentia*. ‡ With honours.

ROYAL COLLEGE OF SURGEONS OF ENGLAND

Sir Girling Ball will deliver the Bradshaw Lecture at the College (Lincoln's Inn Fields, W.C.) on Thursday, Feb. 8, at 3 p.m. His subject is "End-results of Treatment of Growths of the Bladder."

The Hunterian Oration on "The Hunterian Museum" will be delivered by Prof. G. Grey Turner at the College on Wednesday, Feb. 14, at 3.30 p.m.

Medical Notes in Parliament

Paper for Medical Books

Major NEVEN-SPENCE asked on Jan. 17 for an increase in the paper quota available to the medical group of publishers in order to counteract the growing decline in the production of medical books. Capt. WATERHOUSE replied that quotas of paper were based on publishers' pre-war usage and did not vary with the types of books they produced. Mr. Dalton, however, had arranged last autumn for a substantial increase in the special reserve for books of particular importance, including medical books, which publishers could not produce from their quotas.

Emergency Medical Service

Mr. LIDDALL suggested on Jan. 18, in view of the fact that throughout the country many people were unaware of the activities of the E.M.S., that Mr. Willink should make a statement on the services that have been and still were being rendered.

Mr. WILLINK answered that aspects of the Emergency Hospital Scheme, commonly known as the Emergency Medical Service, had been described in recent annual reports of his Department, and had also been the subject of many newspaper and magazine articles and broadcasts. The scheme provided treatment not only for the sick and wounded of the Forces and for air-raid casualties but also for many classes of civilian sick and injured. The scheme had also developed such allied services as rehabilitation, blood transfusion, laboratories, and ambulances. There might be an opportunity of reviewing the scheme as a whole on some future occasion such as a debate on the Estimates. He wished to pay tribute now to the hospital authorities and to the medical, nursing, and other staff of the hospitals, who had co-operated so well with his officers in making the scheme a success.

Bethnal Green Shelter Disaster

On Jan. 19 Sir JOHN ANDERSON read in the House of Commons a statement which Mr. Herbert Morrison had prepared about the Bethnal Green shelter disaster. In this Mr. Morrison disclosed that when he directed High Court proceedings to be *in camera* he had before him an opinion, delivered by an experienced metropolitan magistrate after a painstaking inquiry during which 80 witnesses were examined, that the effective cause of the disaster was that a number of people lost their self-control at a particularly unfortunate place and time. He added that the Government decided in April, 1943, that public reference to the psychological cause might be an incitement to the enemy, with the resources then at his disposal, systematically to continue a form of attack which seemed likely to create a considerable disturbance to the life of the Metropolis. There was the added possibility of heavy casualties being caused until structural alterations could be made in the light of experience to many underground shelters.

Foot-and-Mouth Disease

In the House of Commons on Jan. 23 Mr. TURTON raised the question of the continued outbreaks of foot-and-mouth disease. He urged the importance of disinfecting the vehicles which carried imported meat from Argentina before they were used for livestock and feeding stuffs.

Mr. T. WILLIAMS said that if we could concern ourselves with the disease alone, obviously the straightforward method would be to prohibit the import of meat from those countries where foot-and-mouth disease was endemic or outbreaks were