

Medico-Legal

ANTI-VIVISECTION SOCIETIES AND INCOME TAX

For over fifty years anti-vivisection societies have been granted exemption from income tax on interest on their very large investments, as the result of a finding by Mr. Justice Chitty in 1895, although in 1929 Mr. Justice Russell (now Lord Russell of Killowen) threw doubt on that decision in his judgment in the Grove-Grady will case. In 1942 Sir Leonard Rogers drew up a memorandum on "Are Anti-vivisection Societies Good Charities?" and this, by direction of the committee of the Research Defence Society, was sent to the Treasury with the request that the grounds on which anti-vivisection societies were exempted from income tax as "charities" should be reconsidered in the light of the immense advances in curative and preventive medicine due to animal experiments during the last half-century. The Inland Revenue authorities asked for evidence in support of the statements in the memorandum, and on receipt of this from nine medical and veterinary scientists a test case was heard in December, 1943, by the Special Commissioners of Income Tax. The findings of the Commissioners were cited in an article in the *British Medical Journal* of Sept. 1, 1945 (p. 291), after an appeal in the King's Bench Division of the High Court before Mr. Justice Macnaghten at the close of July. The Commissioners found that, on balance, the object of the National Anti-vivisection Society, "so far from being for the public benefit, was gravely injurious thereto, with the result that the society could not be regarded as a charity. . . . But, upon the authorities, we regard ourselves as precluded from so holding," and they therefore felt bound to allow the society's claim. Mr. Justice Macnaghten, after hearing legal arguments for two days, reversed that decision, allowed the appeal, and revoked the order granting exemption from income tax, with costs against the society.

At the close of December this case (*Inland Revenue v. The National Anti-vivisection Society*) came before the Court of Appeal, consisting of the Master of the Rolls (Lord Greene), Lord Justice MacKinnon, and Lord Justice Tucker. The Crown contended that if experiments on animals were abolished medical science and research would be retarded, and benefit to the health of the community would be frustrated. The Court, by a majority, dismissed the appeal against Mr. Justice Macnaghten's judgment, but gave leave to appeal to the House of Lords.

The Master of the Rolls in his dissenting judgment said there was nothing to be gained by pretending that vivisection did not cause pain to animals. The objects of the society, to prevent infliction of pain on animals, were clearly good in themselves and were not prevented from being so by the fact that experiments on animals might lead to benefits for mankind. Lord Justice MacKinnon, on the other hand, held that whether the objects of a trust were beneficial to the community was a question of fact to be established by evidence. Here he was satisfied that the achievement of the society's purposes would not only not be beneficial to the community but would inflict injury on all mankind. The motives of well-meaning subscribers were not material; it was for the Court to decide whether in fact the purposes of the society were of benefit to the community. Lord Justice Tucker, in his judgment agreeing that the appeal should be dismissed, said that the practice of vivisection had been legalized under safeguards, and he could not see how a trust to abolish vivisection could be a benefit to the community.

The twenty-sixth annual report of the James Mackenzie Institute for Clinical Research, St. Andrews, covers the year ending July 31, 1945. As war conditions still prevailed the activities had to be continued on the restricted lines of the past few years; but 63 new cases and 521 additional notes were added to the files: 397 films were exposed in the x-ray department, and 399 examinations were carried out in the laboratories. As in former years, the voluntary medical inspection of university students was again carried out at the Institute by Dr. R. V. C. Ash. The council is now faced with the need to plan for the future and is giving close attention to the task that lies ahead, so that the resources at its command may be used to the best advantage.

Universities and Colleges

UNIVERSITY OF LONDON

A course of five public lectures on "Pharmacological Chemistry" will be given by Mr. F. Bergel, Ph.D., in the Department of Pharmacology, University College, Gower Street, W.C., on Tuesdays, at 5.15 p.m.:—Jan. 15: Survey of the fields of pharmacotherapeutics. Jan. 22: Prosthetic compounds: vitamins, hormones, and other active substances occurring in the body. Jan. 29 and Feb. 5: Symptomatic drugs: synthetic analgesics and antispasmodics. Feb. 12: Etiotropic compounds: antimicrobials. The lectures are open without fee or ticket to students of the University and others interested in the subject.

UNIVERSITY OF BIRMINGHAM

The following candidates have been approved at the examinations indicated:

M.B., Ch.B.—*†J. K. Baird, *†D. H. Barnbrook, K. D. Roberts, R. J. Bennett, D. L. Crombie, J. C. Foster, †J. C. Haworth, Rachel M. Hickinbotham, G. Jacobs, R. F. Martin, W. I. Murdoch, T. A. W. Parkes, F. C. S. Pearson, H. M. Rodger, Dorothy M. Tidmas, P. T. Walker. *Part I (Midwifery and Diseases of Women and Paediatrics)*: E. J. Allaway, A. C. Allin, P. G. Bevan, W. I. H. Bourne, J. Butler, B. O. Clements, Pamela J. Chappell, Fay P. S. Cull, S. P. Dawson, Rosemary Dearden, W. B. L. Downing, Jeah M. MacN. Dunn, Margaret J. Dutton, Jeanette G. Eveson, Barbara M. Finch, D. P. Fitzgerald, Frances A. Fouracres, D. M. Garratt, Joan E. Garside, N. L. Gleiberman, F. R. Goodwin, P. H. T. Hall, Norah K. S. Howkins, Jose V. Keats, H. M. Kent, D. E. T. Laird, Sylvia E. Leather, Rosemary T. Mitton, G. C. Richards, Jeannie E. Roulston, Patricia E. Smith, J. E. Tremlett, F. E. Webb, J. T. H. Wise, C. Wood.

*With second-class honours. †Distinction in surgery. ‡Distinction in paediatrics.

The following scholarships, exhibitions, and prizes have been awarded in the Faculty of Medicine:

Queen's Scholarship (Final Year): D. H. Barnbrook. *Ingleby Scholarships*: D. H. Barnbrook, J. C. Haworth. *Arthur Foxwell Memorial Medal*: J. C. Haworth. *Sampson Gamgee Memorial Medal and Priestley Smith Prize in Ophthalmology*: J. K. Baird. *Lawrence Barnard Carlton Scholarship*: E. A. Marsland. *Alexander Youngson Prize*: Dyls A. Owen, P. Goodwin.

UNIVERSITY OF BRISTOL

Mr. R. Milnes Walker has been appointed professor of surgery in succession to Prof. A. Rendle Short, who is retiring. The announcement last week stated erroneously that this is a newly established chair. The University of Bristol, since it first received its Charter in 1909, has had a chair of surgery, which has been filled in succession by Prof. James Swain, the late C. A. Morton, the late E. W. Hey Groves, and Prof. Rendle Short.

UNIVERSITY OF DURHAM

Richard Charles Browne, B.M., B.Ch., M.R.C.P., has been appointed to the Nuffield Chair of Industrial Health at Newcastle-upon-Tyne.

At a Congregation held on Dec. 21 the following medical degrees were conferred:

M.S.—R. J. Rutherford, W. K. Yeates.
M.B., B.S.—Isabel Aitchison, Lilian Alexander, Jean E. Arkle, J. Arkless, R. J. Belas, Eileen E. Cameron, Rachel Cameron, E. S. Clarke, Barbara E. Corlett, G. R. Cottrell, J. D. K. Dawes, R. J. Dias, Joyce Dixon, R. H. Etherington, V. Franks, G. D. Fullerton, G. S. Graham, Jean A. Grant, V. F. Harrison, Joyce C. Harvey, Rita Hedley, G. L. Hindson, P. J. Hogg, A. S. Hughes, Patricia M. Hutchinson, A. C. Jenkins, C. Johnson, V. Latimer, Elizabeth Lawson, S. Levy, Mary Meikle, F. R. G. Mellor, M. Mencer, Jean H. Mitchell, J. S. Noble, J. Oldfield, A. C. Parry, Jean Mc.M. Paterson, B. E. Roebuck, W. M. Ross, C. B. S. Schofield, H. L. Simon, Jean D. Smedley, E. R. Smith, F. J. Spencer, N. B. Sprague, Kathleen M. Stevens, Mary Storrer, S. M. Szpiro, C. P. Tanner, T. C. Taylor, D. S. Thomson, J. N. Walton, D. D. Webster, A. E. White, Joan Williams, M. Wood, W. Wood, K. D. Woolas, W. F. M. Hudson (in absentia).

UNIVERSITY OF WALES

The following candidates for the degrees of M.B., B.Ch. at the Welsh National School of Medicine have been approved at the examinations indicated:

SURGERY.—J. W. Bowen, Gwenllian M. Griffith, D. B. Harries, K. I. Roberts, D. L. Stone (with distinction), D. R. Thomas, W. D. C. Thomas.
PATHOLOGY AND BACTERIOLOGY.—Beryl H. Jones, B. F. Richards, T. M. Warren.
PHARMACOLOGY.—S. I. Cohen, Anne Guy, Constance A. M. Llewellyn, Mary C. Sumption.
MEDICINE.—Jane W. Anderson, D. Anthony, A. J. Barry, L. A. J. Evans, I. D. Jacobs, P. G. Jagger, D. G. Jones, Enid A. Reed.
OBSTETRICS AND GYNAECOLOGY.—A. H. Beynon, Nora C. Curran, Gareth E. Davies, Margaret E. Davies, Clare G. M. Dillon, E. D. Edwards, J. M. Hughes, M. G. Jones, N. E. H. Jones, Mary Lawrence, R. Medlicott, Goronwy Owen, Barbara M. Parker, Beryl P. Roberts, K. I. Roberts, D. M. Rowlands, Jean T. Smith, D. M. Watkins.

ROYAL COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS

The William Blair-Bell Memorial Lecture, 1946, will be delivered by Dr. Leonard Colebrook, F.R.C.O.G., on Friday, Jan. 25, at 5 p.m., at the College House, 58, Queen Anne Street, W. His subject is "Looking Backwards and Forwards: Control of Infection in Obstetrics."

New regulations have been made increasing the special and general training required of candidates for admission to membership of the Royal College of Obstetricians and Gynaecologists. The regula-

tions will apply to all who sit for the membership examination for the first time in January, 1947, except those who have served in a medical capacity in the Forces during the war, who may apply for permission to take the examination at any time under the provisions of the regulations of March, 1944. Details may be obtained from the Secretary of the College, 58, Queen Anne Street, W.1. It is also the intention of the College, when facilities are available, to increase the period of training for the membership examination from the present minimum of three years to five years. Sufficient notice of this will be given to enable intending candidates to plan their courses of training.

ROYAL COLLEGE OF SURGEONS OF ENGLAND

The following letter has been received by Sir Alfred Webb-Johnson, Bt., President of the Royal College of Surgeons, from Dr. Donald Balfour, Director of the Mayo Foundation, accompanying a gift of \$5,000 to the Restoration and Development Fund:

My dear Sir Alfred,

At the meeting to-day of the Medical Graduate Committee of the Mayo Foundation it was recommended to the Board of Trustees of the Mayo Properties Association that a gift be made to the Royal College of Surgeons of England on behalf of the staff of the Mayo Clinic and the faculty of the Mayo Foundation.

We hope that this gift will be received as it is given—namely, as evidence of the desire of the staff of the Clinic, particularly the surgical staff, to aid in the plans for the reconstruction of the buildings and facilities of the Royal College of Surgeons so that in this restoration the great influence of the College in elevating surgery and the surgical specialties will be continued in the future not only in the British Empire but throughout the world.—Yours sincerely,

DONALD C. BALFOUR.

ROYAL FACULTY OF PHYSICIANS AND SURGEONS OF GLASGOW

Prof. Harry Platt, M.S., F.R.C.S., will deliver the James Watson Lecture in the hall of the Royal Faculty of Physicians and Surgeons, 242, St. Vincent Street, Glasgow, on Wednesday, Jan. 23, at 4 p.m. His subject is "Localized Cystic Lesions of Bone."

The American College of Surgeons has conferred (*in absentia*) its Fellowship (F.A.C.S.) on Mr. E. R. Garnett Passe, F.R.C.S., at the meeting of the Regents in November, 1945.

EPIDEMIOLOGICAL NOTES

Discussion of Table

In *England and Wales* during the week the incidence of whooping-cough and of scarlet fever continued to fall, notifications being 95 and 35 fewer, respectively. Dysentery was less prevalent, with 83 fewer cases. The only disease with a greater incidence was acute pneumonia, of which there were 197 more notifications than in the preceding week.

No further cases of dysentery were reported from the large outbreak of the preceding week in Hertfordshire, Hatfield R.D. The one fresh outbreak during the week involved 10 cases in Rutland, Oakham U.D. and R.D. A large rise occurred in Surrey, from 9 to 33. The other large returns were Lancashire 52, London 20, Essex 15, Warwickshire 12, Yorks West Riding 11, and Middlesex 10.

The decrease in whooping-cough was mainly confined to the northern section of the country. The only large fluctuation in the trend of scarlet fever was a fall of 29 in London. The main changes of any size in the returns of diphtheria were decreases of 13 in both Suffolk and Yorks West Riding. The most notable of the local increases in pneumonia was in Herefordshire, Hereford R.D., where the cases rose from 1 to 51. There were rises in the notifications of measles in Norfolk 40, and Lancashire 26.

In *Scotland* infectious diseases were less prevalent, notifications all showing a decrease, except those for diphtheria, which rose by 2. During the past six weeks dysentery has been at the lowest level since last July. The recent outbreak of paratyphoid fever in the East Fife coast area has been traced to a girl who sold ice-cream.

Infantile Paralysis in Malta

In the last fortnight of December 33 cases were reported in the island. Among those affected were a sailor and a member of the W.R.N.S.

Week Ending December 29

The notifications of infectious diseases in *England and Wales* during the week included: scarlet fever 1,376, whooping-cough 724, diphtheria 514, measles 565, acute pneumonia 1,118, cerebrospinal fever 38, acute poliomyelitis 25, dysentery 265, paratyphoid 5, typhoid 9.

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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 Dec. 22.

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	1945					1944 (Corresponding Week)				
	(a)	(b)	(c)	(d)*	(e)	(a)	(b)	(c)	(d)*	(e)
Cerebrospinal fever ..	43	4	13	1	2	33	2	12	1	—
Deaths	—	—	—	—	—	—	—	—	—	—
Diphtheria	569	50	155	—	21	456	23	117	—	20
Deaths	12	1	4	2	1	5	—	1	—	—
Dysentery	230	20	43	—	—	173	44	133	—	—
Deaths	—	—	—	—	—	—	—	—	—	—
Encephalitis lethargica, acute	1	—	2	—	—	1	—	—	—	—
Deaths	—	—	—	—	—	—	—	—	—	—
Erysipelas	—	—	30	—	3	—	—	52	—	2
Deaths	—	—	—	—	—	—	—	—	—	—
Infective enteritis or diarrhoea under 2 years	58	4	9	21	1	52	3	6	12	2
Deaths	—	—	—	—	—	—	—	—	—	—
Measles†	623	52	92	—	3	8,433	163	339	—	248
Deaths	—	—	—	1	—	13	—	1	—	—
Ophthalmia neonatorum	46	2	10	—	2	53	4	13	—	—
Deaths	—	—	—	—	—	—	—	—	—	—
Paratyphoid fever	4	—	—	—	—	3	—	1(B)	—	—
Deaths	—	—	—	—	—	—	—	—	—	—
Pneumonia, influenza‡	1,166	92	6	—	5	715	28	10	—	13
Deaths (from influenza)	76	6	4	—	—	28	4	3	—	—
Pneumonia, primary	—	81	192	18	7	—	41	338	18	18
Deaths	—	—	—	—	—	—	—	—	—	—
Polio-encephalitis, acute	1	—	—	—	—	—	—	—	—	—
Deaths	—	—	—	—	—	—	—	—	—	—
Poliomyelitis, acute	23	—	3	—	—	5	1	—	—	—
Deaths	—	—	—	—	—	—	—	—	—	—
Puerperal fever	—	2	11	—	—	—	1	15	—	1
Deaths	—	—	—	—	—	—	—	—	—	—
Puerperal pyrexia§	136	19	10	—	2	130	4	11	—	—
Deaths	—	—	—	—	—	—	—	—	—	—
Relapsing fever	1	—	—	—	—	—	—	—	—	—
Deaths	—	—	—	—	—	—	—	—	—	—
Scarlet fever	1,718	139	251	—	45	1,906	52	216	—	44
Deaths	1	—	1	—	—	3	1	—	—	—
Smallpox	—	—	—	—	—	—	—	—	—	—
Deaths	—	—	—	—	—	—	—	—	—	—
Typhoid fever	5	1	1	—	1	5	—	2	—	3
Deaths	—	—	—	—	—	—	—	—	—	—
Typhus fever	—	—	—	—	—	—	—	—	—	—
Deaths	—	—	—	—	—	—	—	—	—	—
Whooping-cough†	1,100	92	50	—	6	1,317	53	117	—	10
Deaths	12	—	1	—	—	10	—	4	1	—
Deaths (0-1 year)	454	62	52	49	12	420	37	75	45	31
Infant mortality rate (per 1,000 live births)	—	—	—	—	—	—	—	—	—	—
Deaths (excluding stillbirths)	6,088	979	665	234	141	5,354	785	717	223	164
Annual death rate (per 1,000 persons living)	—	—	15.1	15.1	¶	—	—	16.5	14.5	¶
Live births	6,890	956	841	332	239	6,857	605	889	279	257
Annual rate per 1,000 persons living	—	—	16.8	21.4	¶	—	—	18.1	18.1	¶
Stillbirths	227	14	31	—	—	202	20	27	—	—
Rate per 1,000 total births (including stillborn)	—	—	36	—	—	—	—	29	—	—

* Returns for infectious diseases for *Eire* are included in with those for the following week.

† Measles and whooping-cough are not notifiable in *Scotland*, and the returns are therefore an approximation only.

‡ Includes primary form for *England and Wales*, *London* (administrative county), and *Northern Ireland*.

§ Includes puerperal fever for *England and Wales* and *Eire*.

¶ Owing to evacuation schemes and other movements of population, birth and death rates for *Northern Ireland* are no longer available.

Lieut. J. O. E. Aphorpe has relinquished his commission on account of disability, and has been granted the honorary rank of Lieut. (Substituted for the notification in a *Supplement* to the *London Gazette* dated Nov. 13, 1945.)

To be Lieuts.: I. Aitchison, P. E. Anderson, I. Ansell, I. R. H. Berrie, H. Binysh, C. G. H. Bourhill, E. Cameron, T. Cartmill, W. J. Connelly, M. S. Crawford, J. W. Davidson, V. W. De Lorey, A. S. Douglas, E. M. Edwards, R. E. Evans, F. W. Fordyce, S. Freedlander, C. E. Gabriel, R. U. Gillan, A. J. H. Grant, I. R. Gray, C. R. H. Green, G. C. Hadden, P. Harris, F. R. Hood, R. E. Irvine, W. H. Jeffrey, E. D. Jones, J. N. Macbeth, R. M. Mill, A. R. Murison, M. J. Murphy, W. Napier, T. Norman, G. P. Oxborrow, G. Paterson, D. Peebles, E. J. R. Primrose, J. S. Robson, F. D. Schofield, R. W. Simmons, J. Simpson, J. E. T. Sobey, J. B. Stevenson, L. Strang, A. E. Thomas, P. H. Vernon, A. S. Wallace, E. A. M. Wood, and K. H. S. Pottinger.

Association Notices

Branch and Division Meetings to be Held

AYRSHIRE DIVISION.—At Ballochmyle Hospital, Mauchline, Sunday, Jan. 13, 7 p.m., Clinical meeting.

EAST HERTS DIVISION.—At Mayflower Hotel, Hertford, Thursday, Jan. 24, 8.15 p.m. Mr. A. J. Wrigley: The Significance and Treatment of Vaginal Discharge.

ISLE OF WIGHT DIVISION.—At Town Hall, Ryde, Thursday, Jan. 17, 8.15 p.m., Annual Dinner. Dr. P. S. Selwyn-Clarke: Experiences under Japanese Occupation.

SHROPSHIRE AND MID-WALES BRANCH.—At Royal Salop Infirmary, Shrewsbury, Sunday, Jan. 13, 3.30 p.m., General meeting. Agenda: Consideration of the Minister of Health's statement on Exchange of Practices and Compensation on Dec. 6, 1945, etc.

Meetings of Branches and Divisions

COVENTRY DIVISION

Mr. Philip Mitchiner gave a B.M.A. Lecture on the treatment of burns at a meeting of the Coventry Division on Dec. 11, when more than thirty members were present. He discussed the importance of initial cleansing of the burns under anaesthesia, the anaesthetic of choice being morphine (pentothal he regarded as mortally dangerous); and he stressed the need for replacing fluid loss with serum and not with whole blood. On the subject of dressings he first recalled that many of the present-day fashionable dressings were those used in his student days 40 years ago, and then described the greasy dressing—tulle—with or without local penicillin or sulph-anilamide, the Bunyan bag, saline packs, and pressure bandages. He thought that tannic acid treatment would come into its own again in peacetime.

The lecture was most informative and useful, and many questions were asked. An enthusiastic vote of thanks, proposed by Mr. T. Berrill and seconded by Mr. J. Vaughan-Bradley, was carried with acclamation.

DARTFORD DIVISION

At a meeting of the Dartford Division held at Erith on Dec. 12 the following resolution was passed unanimously: "That the Dartford Division are gravely concerned at the Minister of Health's pronouncement recently regarding the abolition of the sale and purchase of practices and all the implications arising therefrom."

EXETER DIVISION

Lady Florey was the speaker at a B.M.A. Lecture arranged by the Exeter Division on Nov. 10, and her subject was the clinical application of penicillin in common conditions. Dr. F. A. Roper presided, the audience of about 75 including B.M.A. members from the Plymouth, Torquay, N. Devon, and W. Somerset Divisions, as well as medical visitors from the Services and from the U.S. Navy.

Lady Florey said that the successful use of penicillin depended on the application of its known characteristics to clinical work. These briefly were that it was a chemotherapeutic agent, was selective in its action, and was unstable. Once these characteristics were made use of, or circumvented, it was necessary to ensure two conditions in the body—full access to the infected part, either through the blood stream or by local means, and removal of any dead infected tissue in the shape of slough, sequestrum, blood clot, or foreign body. The basic dosage found to be generally effective was 120,000 units in 24 hours for systemic effect, and 500 units per c.cm. or gramme for local effect. Insufflations, where only a small fraction of a gramme was likely to be delivered on to a surface, were better made up as 5,000 units per gramme. Local administration produced a very much higher concentration at the site of application than could be reached by administration via the blood stream. It was painless and did not require to be repeated so often. Final results from treatment with penicillin when compared with controls showed the rapid reduction in pain and toxicity, improvement in healing time, and very much better functional result.

After Dr. W. A. Robb, pathologist to the Royal Devon and Exeter Hospital, who is in charge of the local distribution of penicillin, had explained where and when it was available, many questions were asked of Lady Florey. A vote of thanks was then proposed by Dr. C. J. Fuller and enthusiastically endorsed by the meeting.

PERTH BRANCH

Twenty-six members attended a special meeting of the Perth Branch held on Dec. 14 to discuss the announcement made in the House of Commons on Dec. 6 by the Minister of Health. After discussion the following resolution was unanimously approved: "This Branch has read the Minister of Health's statement to the House of Commons on Dec. 6 with grave misgiving. As no valid reason can be seen for discontinuing the purchase and sale of the goodwill of practices, and as such a prohibition would inevitably lead to direction of medical personnel and a salaried service, this Branch is agreed that any attempt to impose this embargo should be resisted to the utmost. This Branch therefore suggests that B.M.A. Council take immediate steps to obtain the views of all Branches, with a view to terminating all our agreements under any State-organized service."

SHEFFIELD DIVISION

The subject of Dr. G. Scott Williamson's B.M.A. Lecture to the Sheffield Division at Sheffield University on Dec. 9 was the organization, aims, and objects of the Peckham Health Centre. He said the centre was established for the study of susceptibility. It was felt that something more than animal experiments was required, and therefore this scheme was devised which made possible direct observation and experiment on human beings. The centre was organized as a "family club," the family being the smallest complete unit which could be studied biologically. A mixed community was essential, and 2,000 families proved to be the optimum number. Indoor social amenities of different kinds were provided and the members of the families were observed while they took part. It was usually found that children of 9 to 12 were the first to join, and they then recruited the rest of the family. A periodic health overhaul of individuals followed by a family consultation was one of the conditions of membership, and health surveys of the families in membership showed that only 10% of them were free from any defect. These health assessments consisted of a complete physical examination, histories being dispensed with. At the consultation the family were told the findings of the examination but were not given any medical advice, for which they were told to go to their own doctor. The scheme as a whole was planned by biologists who were looking for what was right and only incidentally for what was wrong. Dr. Scott Williamson concluded his lecture with lantern slides of the Peckham Health Centre.

DIARY OF SOCIETIES AND LECTURES

ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, W.C.—*Thurs.*, 5 p.m., Hunterian Lecture by Prof. P. W. Clarkson: Treatment of Face and Jaw Casualties in the British Army.

ROYAL SOCIETY OF MEDICINE.—*Tues.*, 5.30 p.m., General meeting of Fellows. *Thurs.*, 4 p.m., Section of Dermatology. *Fri.*, 8 p.m., Section of Obstetrics and Gynaecology; 8 p.m., Section of Radiology.

MEDICAL SOCIETY OF LONDON, 11, Chandos Street, W.—*Mon.*, 8 p.m., Pathological Meeting.

ROYAL SOCIETY OF TROPICAL MEDICINE AND HYGIENE.—At Manson House, 26, Portland Place, W. *Thurs.*, 8 p.m., Dr. E. R. Cullinan: Medical Disorders in East Africa. To be followed by a discussion.

BIRTHS, MARRIAGES, AND DEATHS

The charge for an insertion under this head is 10s. 6d. for 18 words or less. Extra words 3s. 6d. for each six or less. Payment should be forwarded with the notice, authenticated by the name and permanent address of the sender, and should reach the Advertisement Manager not later than first post Monday morning.

BIRTH

ROBERTS.—On Dec. 21, 1945, at Rossall Nursing Home, Inverness, to Dr. Maureen (McWilliam), wife of Surg. Lieut.-Cmdr. Richard Howell Roberts, R.N.V.R., a daughter.

MARRIAGE

GORROD-ASPINALL.—On Dec. 25, 1945, at Aberdeen, Charles Elgar Gorrod, M.B., Ch.B., D.P.H., Major, R.A.M.C., to Margery Aspinall, of "Hillcrest," Middle Gate, Oldham, Lancs.

The voluntary hospitals of the country have received from Mr. Aneurin Bevan, Minister of Health, an assurance that he intends to invite their representatives to meet him, in the same way as he has promised the medical profession, before the Government finally decide what proposals will be submitted to Parliament so far as they relate to voluntary hospitals and the National Health Service scheme.