

prevalence in some and a low prevalence in others. Although attack rates in rural districts are often higher than in towns, the reverse has been true in some countries, and Swedish figures show several indications that the attack rate is not inversely related to population density. In Sweden also the case fatality rate is higher in towns than in country districts and highest among people aged 20 to 60 years. These findings lead the author to conclude that immunization by subclinical infections plays no part in determining the incidence of poliomyelitis. He refers to experiments by other workers showing that deficiencies of diet increase the resistance of monkeys and mice to poliomyelitis virus and suggests as a working hypothesis that a predisposition of the individual human being, probably produced by social factors, is a necessary antecedent to acquiring poliomyelitis.

A. M. McFARLAN.

DIGESTIVE TRACT

An Introduction to Gastro-Enterology. A Clinical Study of the Structure and Functions of the Human Alimentary Tube. By James Dunlop Lickley, M.D. (Pp. 143; 21 illustrations. 8s. 6d.) Bristol: John Wright and Sons, Ltd. 1947.

The author's aim is to present a simplified account of the structure and functions of the gastro-intestinal tract which senior students or recently qualified practitioners may use as an introduction to the study of digestive disorders. He first carefully describes the salient features of the anatomy of the intestines. He then gives a chapter on physiology, though, as he says, this is simplified by the selection of certain details for description and the omission of many others. The author then proceeds to describe and elaborate his main thesis, which is that the signs and symptoms of disease of the digestive tract are mainly produced by the actions of the defence mechanisms by which the intestines deal with abnormal situations. Such a conception takes us from the realm of facts to that of hypothesis. For instance, he considers that the increased resting juice found in pyloric stenosis is necessary "to fill the dilated stomach and so enable the impaired gastric muscles to adjust their grip on the stomach content."

It is, however, by his account of the practical clinical applications of his theory that the author is likely to lead the senior student furthest astray. He classifies diseases of the stomach into acute or chronic, generalized or circumscribed mucositis, myositis, or serositis. Such a division is surely an oversimplification, and he is wise not to keep too closely to this nomenclature. Nevertheless, he succeeds in describing and explaining the pathogenesis of the symptoms of peptic ulcer (chronic circumscribed mucositis) in a very few pages.

The author attempts too much and achieves too little. As a manual of gastro-enterology his book contains too little fact and too much theory; as an exposition of the author's particular thesis it suffers from being too simplified and from an absence of verifiable evidence to support an original conception.

CHRISTOPHER HARDWICK.

FAR AND WIDE

Nothing New Under the Sun. By J. P. Lockhart-Mummery, M.A., F.R.C.S. Illustrations by William Wood. (Pp. 178. 12s. 6d.) London: Andrew Melrose, Ltd. 1947.

Mr. Lockhart-Mummery has drawn on his experience, his travels, and his reading, scientific and otherwise, to produce this attractive little book of essays, which are linked by having in common a scientific or historical background. A random selection from the titles—"Fighting Fish of Siam," "How was Man Evolved?", "Why do Dogs like Bones?", "Hormones," "Quacks and Charlatans," "D.D.T.," "What was the Biggest Explosion?"—gives some indication of the range he covers. The author has an attractive eager style that takes the reader with him in his enthusiasms. He is at his best when considering historical subjects like "The Good Old Days," least satisfactory as an exponent of evolution. The proof reader has missed a few mistakes, such as automatically for anatomically on p. 39, and Chiseldon for Cheselden on p. 124. The book is eminently readable. It is attractively produced, and the woodcuts by William Wood are a delight to look at.

HENEAGE OGILVIE.

BOOKS RECEIVED

[Review is not precluded by notice here of books recently received]

Méthodes Statistiques en Médecine et en Biologie. By E. Morice et al. (Pp. 177. 480 francs.) Paris: Masson and Cie. 1947.
Textbook of statistics for medical workers

Die Prophylaxe des Verbrechens. By Heinrich Meng et al. (Pp. 568. 34 Swiss francs.) Basle: Benno Schwabe and Co. 1948.
A study of the aetiology and prevention of crime

Psychotherapy in Child Guidance. By Gordon Hamilton. (Pp. 340. 22s.) London: Geoffrey Cumberlege. 1947.
A study of the social worker's role in psychotherapy.

Let's Talk About Your Baby. By H. Kent Tenney, Jr., M.D., F.A.A.P. 3rd ed. (Pp. 115. 8s. 6d.) London: Geoffrey Cumberlege. 1947.
Medical advice in plain language for mothers.

Traité de Médecine. Vol. I. Edited by Prof. A. Lemierre et al. (Pp. 1,096. 2,200 francs.) Paris: Masson and Cie. 1948.
Textbook of medicine: this volume is first part on infectious diseases.

Traité de Médecine. Vol. V. Edited by Prof. A. Lemierre et al. (Pp. 1,163. No price.) Paris: Masson and Cie. 1948.
Textbook of medicine: respiratory diseases

Guide to Marriage. By Leslie J. Tizard. (Pp. 173. 7s. 6d.) London: George Allen and Unwin. 1948.
A manual for the layman.

Doctors, Drugs and Steel. By Edward Podolsky, M.D. (Pp. 382. 16s.) London: Medical Publications Limited. 1947.
Some recent medical discoveries described for the layman

Lehrbuch der Inneren Sekretion. By F. Verzar. (Pp. 609. 52 Swiss francs.) Liestal: Verlag Ars Medici Lüdlin AG. 1948.
A textbook of endocrinology.

Women and Men. By Amram Scheinfeld. (Pp. 394. 15s.) London: Chatto and Windus. 1947.
An account of sex differences for the layman.

Fatigue and Impairment in Man. By S. Howard Bartley, Ph.D., and Eloise Chute, M.A. (Pp. 429. \$5.50.) New York and London: McGraw-Hill Book Company, Inc. 1947.
An investigation into the bodily and mental aspects of fatigue.

Practical Psychiatry and Mental Hygiene. By Samuel W. Hartwell, M.D. (Pp. 438. \$3.75.) New York and London: McGraw-Hill Book Company, Inc. 1947.
A textbook for the student of psychiatry.

Local Government. By Sir Arthur MacNalty, K.C.B. (Pp. 218. 4s. 6d.) London: Methuen. 1948.
A general account of local government in Britain.

Introduction to Carbohydrate Biochemistry. By D. J. Bell, B.Sc., M.A., Ph.D., F.R.I.C. 2nd ed. (Pp. 107. 6s.) London: University Tutorial Press. 1948.
Intended primarily for students of biochemistry.

Endocrine Therapy in General Practice. By E. L. Sevringhaus, M.D., F.A.C.P. 6th ed. (Pp. 264. No price.) London: H. K. Lewis. 1948.
A practical introduction to endocrinology.

A Century of Medical Service. By B. Darwin. (Pp. 47. No price.) Swindon: Great Western Railway Medical Fund Society. 1947.
A history of the G.W.R. Medical Fund Society.

The Oculorotary Muscles. By R. G. Scobee, B.A., M.D. (Pp. 359. 40s.) London: Henry Kimpton. 1947.
An approach to the diagnosis of dysfunction of the external muscles of the eye.

APPOINTMENTS

The Committee of Privy Council for Medical Research have appointed Harold Percival Himsworth, M.D., F.R.C.P. (Professor of Medicine in the University of London), to be a member of the Medical Research Council.

After being educated at King James's Grammar School, Huddersfield, Prof. Himsworth studied medicine at University College Hospital, where he qualified in 1928, obtaining the University Gold Medal. He proceeded M.D., again with Gold Medal, in 1930, and was elected F.R.C.P. in 1938. He gave the Goulstonian lectures for 1939 and has published numerous papers including many on diabetes mellitus.

John Cecil Wilson Methven, M.R.C.S., L.R.C.P., has been appointed deputy chairman of the Prison Commission.

Dr. J. F. Fraser has been appointed the first full-time medical officer of health for Pontefract, Knottingley, Featherstone, and the Osgoldcross Rural District.

Michael Kremer, M.D., B.Sc., F.R.C.P., has been appointed honorary assistant physician to the National Hospital, Queen Square.

DELANEY, PATRICK J., M.B., B.Ch., D.P.H., Medical and Organizing Secretary of the Medical Association of Eire.

ESHER, F. J. S., M.B., Ch.B., D.P.M., Psychiatrist, Sheffield Regional Hospital Board.

FRASER, A. M., M.D., D.P.H., Senior Administrative Medical Officer and Secretary, Scottish Northern Regional Hospital Board.

GARLAND, HUGH G., T.D., M.D., F.R.C.P., Physician in Charge, Department of Neurology, General Infirmary at Leeds.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, London, W.C.—*Part-time Out-patient Medical Registrars*: Dorothy W. Wells, M.B., Ch.B., M.R.C.P., D.T.M.&H.; J. J. Kempton, M.D., M.R.C.P., D.C.H.

LENNOX, MARY, M.B., B.Ch., D.P.H., Port Medical Officer, Barry, Glam.

NOTTINGHAM GENERAL HOSPITAL.—*Honorary Assistant Consultant Psychiatrists*: I. J. Davies, M.D., D.P.M., and H. Fisher, M.D., D.P.M. *Medical Specialist*: R. Gwyn Evans, M.B.E., M.D., M.R.C.P.

RAEBURN, H. A., M.D., F.R.C.P.Ed., Senior Administrative Medical Officer, Scottish South-Eastern Regional Hospital Board.

ROGERS, K. B., M.D., Clinical Pathologist, Children's Hospital, Ladywood Road, Birmingham.

BIRTHS, MARRIAGES, AND DEATHS

BIRTHS

Armin.—On Feb. 29, 1948, at Bath, to Dr. Margaret Armin, wife of Dr. Richard Armin, a daughter.

Davies.—On March 4, 1948, at Woking, to Betty (*née* Benjamin), wife of Lieutenant A. Michael Davies, R.A.M.C., a son.

Milton.—On Feb. 24, 1948, at Walbrook, Banbury, Kincardineshire, to Dr. Jane Crystyan (*née* Salkeld), wife of Dr. David Milton, a daughter.

Ronchetti.—On Feb. 28, 1948, at Nuffield House, Guy's Hospital, London, S.E., to Sylvia (*née* Helme), wife of Dr. John Ronchetti, a son—John Kirkland.

Scott.—On March 3, 1948, at Nuffield House, Guy's Hospital, London, S.E., to Esmé (*née* Pascal), wife of Dr. Leslie Scott, a daughter.

DEATHS

Amdor.—On Feb. 22, 1948, at Royal Infirmary, Cardiff, Alfred Amdor, M.B., Ch.B., D.P.H., aged 40.

Badenoch.—On Feb. 22, 1948, at Hermon Hill Hospital, Wanstead, William Minty Badenoch, M.B., Ch.B.

Bowes.—On Feb. 25, 1948, at "Winhill," Manchester Road, Wilmslow, Cheshire, Paul Bowes, M.D.Ed.

Burton.—On Feb. 25, 1948, at Horsebrook House, Calne, Wilts, James Cecil Burton, M.R.C.S., L.R.C.P.

Cahalane.—On Feb. 20, 1948, Michael John Cahalane, M.B., Ch.B.Glas., Squadron Leader, R.A.F.V.R., aged 55.

Clarke.—On Feb. 24, 1948, at Hove, Joseph John Clarke, L.R.C.P.I., D.P.H., aged 86.

Dawes.—On Feb. 21, 1948, at Edenbridge, Kent, Christopher Dering Dawes, M.R.C.S., L.R.C.P., Lieutenant-Colonel, late I.M.S., aged 75.

Durrant.—On Feb. 22, 1948, at Edinburgh, Donald Edward Durrant, M.B., Ch.B.Ed.

Gardner.—On Feb. 27, 1948, at "Coombehurst," Church Stretton, Shropshire, Henry Willoughby Gardner, M.B.E., M.D., F.R.C.P., aged 86.

Hunter.—On Feb. 24, 1948, at Hutton House, Chilton, Ferry Hill, Co. Durham, Matthew Hunter, M.B., Ch.B.Glas.

Laing.—On Feb. 27, 1948, at 5, Princes Street, Arbroath, David Laing, T.D., M.D., aged 86.

McLean.—On Nov. 30, 1947, at Sydney, N.S.W., Leonard Allen Windsor McLean, M.B., Ch.B.

McVean.—On Feb. 26, 1948, at 24, Forest Road, Bournemouth, W. John Duncan McVean, M.B., C.M.Glas., aged 88.

Martin.—Recently, at 11, Waterloo Avenue, North Strand Road, Dublin, Conor Martin, M.B., B.Ch.

Mathias.—At Burry Port, Idwal James Mathias, M.B., B.S., aged 33.

Pilliet.—On Feb. 14, 1948, at a Nursing Home, Folkestone, Mary Amelia Pilliet, M.B., Ch.B., of Wingate Villa, 210, Canterbury Road, Folkestone, Formerly Assistant Medical Officer, London County Council.

Pollard.—On Feb. 25, 1948, at Royal Halifax Infirmary, Percy Lund Pollard, M.B., Ch.B., of East Lea, Lea Avenue, Halifax, aged 66.

Rivers.—On Feb. 28, 1948, at Redruth, Cornwall, Charles Henry Rivers, M.D., M.R.C.P., aged 76.

Rogers.—On Feb. 25, 1948, Alford Rogers, L.R.C.P.&S.Ed., of Montrose, Sewardstonebury, E., and late of Highams Park, Chingford, E.

Smith.—On Feb. 28, 1948, at Ashfield Park, Clogher, Co. Tyrone, N. Ireland, Henry Smith, C.I.E., M.D., M.Ch., M.A.O., Lieutenant-Colonel, late I.M.S., retired, aged 90.

Tavendale.—On Feb. 28, 1948, killed in a car crash, William John Tavendale, M.B., Ch.B., aged 32.

Any Questions?

Correspondents should give their names and addresses (not for publication) and include all relevant details in their questions, which should be typed. We publish here a selection of those questions and answers which seem to be of general interest.

Killing Habits of Leopards

Q.—*In this area (Nigeria) a leopard society is active, and I often have to decide at post-mortem examination whether death was due to human or animal killing. I should therefore like to know: (a) How does a leopard usually kill, and what marks would be expected? (b) What part of the body is a leopard likely to eat first? (c) Will leopards eat intestines when muscle (of leg, etc.) is present? (d) Is it possible for a leopard to sever skin to simulate an incised wound?*

A.—The leopard, like the lion, hunts by night, but, whereas the lion usually hunts in company and only when hungry, the leopard hunts alone and displays a greater inclination towards hunting and killing for their own sake. He is likely to lie in wait, probably in a tree, from which he springs down on his victim. At the moment of impact the claws sink in to establish a grip, from which there is little or no chance of release, and the teeth are plunged into the neck, either at the back or front, depending on the readiness of access. Possibly the victim's throat will be torn out, and the blood drunk as it flows from the wound. Thereafter the leopard, like the lion and a number of other animals, will show a preference for the entrails of the victim, to which access is obtained by tearing open the abdomen with claws and teeth. The muscular portions of the body are likely to be ignored. The body will be dragged into cover for the latter part of the leopard's activities. This summary of the killing habits of the leopard is based on opinions expressed by Mr. T. H. Gillespie, F.R.S.Ed., F.Z.S. It supplies most of the details requested and also goes a long way towards answering the basic question, which may be paraphrased as follows: How is one to form an opinion on whether a killing has resulted from a genuine attack by a leopard or from an attack by men endeavouring to simulate the work of a leopard?

As in a variety of other medico-legal problems, it seems probable that the answer may depend at times not only on the post-mortem findings but on the fullest possible investigation of all the available evidence, including the identity of the victim, the presence or absence of motive, the time and place of the killing, signs of disturbance or human activity at the locus, signs of dragging, etc. No doubt the men of a leopard society may at times be extremely sedulous in their efforts, and for this reason such seemingly important details as the presence of claw-fragments or leopard's hair might not be conclusive evidence. The demonstration of specific saliva stains would probably be impossible or impracticable. Certain of the wounds produced by a leopard might undoubtedly resemble incised wounds, but the presence of true incised wounds would be strongly suggestive of some other agency. It is improbable that "leopard men" can avoid all inconsistencies and discrepancies which are detectable if looked for carefully. The opinion of the doctor may be an important factor in assisting the investigating authorities in coming to a decision, but it is unlikely to be the only one. Conversely, the doctor should acquaint himself with all possible information on the case before making his examination and forming an opinion.

In an interesting book entitled *Human Leopards*, by K. J. Beatty (Hugh Rees, Ltd., London, 1915, now out of print), the activities of leopard societies in Sierra Leone are discussed, and accounts given of a number of trials which took place there in 1912 and 1913. Apparently a three-pronged knife was sometimes used to simulate the claws of a leopard, but in spite of this and of the fact that the murderer(s) might wear a leopard skin, it does not seem that the methods employed ever bore any very baffling resemblance to a true leopard killing.