

prevention, and finally on laboratory aids to the direction of treatment, the necessity of which is strongly emphasized. The authors provide an extensive classified bibliography, which includes references to papers on meningitis caused by no less than 17 species other than the common ones already mentioned. This monograph contains a mass of information of great practical value, and will be read appreciatively by everyone interested in its subject.

L. P. GARROD.

## PRIVATE AND STATE MEDICINE

*Private Enterprise or Government in Medicine.* By Louis Hope-well Bauer, A.B., M.D., F.A.C.P. (Pp. 201. 25s.) Springfield, Illinois: Charles C. Thomas. Oxford: Blackwell Scientific Publications.

The title of this book makes an instant appeal to members of a profession which in Britain has been trying to solve the problem raised since the publication of the Report of the Royal Commission on the Poor Law in 1909. Here, as in the U.S.A., it is a fact that a considerable section of the population is unable to pay for complete medical care by private fees. Here, as in all democratic countries, our profession would agree with Abraham Lincoln's dictum quoted on the jacket of Dr. Bauer's book, "In all that the people can individually do as well for themselves, the Government should not interfere." But how shall we find some method of supplying what is needed short of compulsory insurance or socialization of medicine? There is no answer to this yet. Since the end of the first world war the medical profession in the U.S.A. has been fighting attempts to increase Government control, and on the whole successfully. Of these proposals Dr. Bauer gives full details. It is evident that the fight is still on. The book makes no pretence of being impartial. My criticism is that the author makes no attempt to show that there is another side to the argument, and exception can fairly be taken to the biased and exaggerated accounts given of the effects of compulsory sickness insurance in those countries which have tried it.

In his anxiety to show that there is no need for other than voluntary effort in the States Dr. Bauer says that "the proportion of medical men to population is greater here, that no other country has obtained a better distribution of doctors in the rural areas, and that preventive medicine is more effective in the U.S.A. than in countries with compulsory insurance." Yet the book contains much evidence that the rural distribution is deplorable, and Dr. Bauer has apparently never heard of our Highlands and Islands scheme. On one page he tells us that in half the counties of the States there are no whole-time medical officers of health and in some of them there is no continuity of service and they are subject to political control. The British system of N.H.I., he says, "encourage mass therapy, and medication is controlled by the Government," and "it is often stated that the British system is far better than the system which prevailed before 1911. This is undoubtedly true, because the system then in vogue [which by the way was private enterprise] was so intolerably bad that any change was bound to be an improvement." This is only one, but a typical, example of the author's judgment of the conditions in other countries, and it is in my opinion sufficient to justify one who knows better in being cautious in accepting his conclusions.

Dr. Bauer frankly recognizes the existence in the U.S.A. of large sections of the people who are either "indigent" or "medically indigent" and that it is up to the medical profession to find a way to satisfy their needs. He strongly advocates voluntary local schemes, and shows that already many such schemes favoured by the A.M.A. are in operation. The payments are to be made by employers and workmen and for the indigent by the Government. But nothing in the book seems to me to justify the belief that this method is likely to solve the national problem. And Dr. Bauer never faces the situation which would arise in a time of prolonged unemployment, or what is to be done with improvident people who refuse to join the schemes. Far from being unsympathetic to the author's desire to avoid Government control, I believe most doctors in Britain would rejoice if our brethren in the U.S.A. could evolve a solution of the problem on voluntary lines. But this book gives little encouragement to this hope.

ALFRED COX.

## BOOKS RECEIVED

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

*Man, the Unknown.* By A. Carrel. (Pp. 312. 1s. 6d.) W. Drayton, Middlesex: Penguin Books. 1948.

The author comments on man's place in the world and suggests remedies for our excessive industrialization.

*Neuroanatomy.* By F. A. Mettler, A.M., M.D., Ph.D. 2nd ed. (Pp. 536. 50s.) London: Kimpton. 1948.

A textbook for medical students.

*Theory and Problems of Social Psychology.* By D. Krech and R. S. Crutchfield. (Pp. 639. 27s.) London: McGraw-Hill. 1948.

A textbook for teachers and students of social psychology.

*Síndrome Anémico do Kala-Azar.* By C. Trincão. (Pp. 68. No price.) Lisbon: Sociedade Industrial de Tipografia. 1948.

A research monograph with extensive bibliographies.

*Sex Variants.* By G. W. Henry, M.D., and others. (Pp. 1,128. 40s.) London: Hamish Hamilton. 1948.

The personal histories of homosexual men and women, with notes on them.

*Physiology.* By A. D. Le Vay, M.S., F.R.C.S. (Pp. 209. 4s. 6d.) London: English Universities Press. 1948

A short account for the layman.

*Ulcer.* By D. Cook, B.A., M.D. (Pp. 187. \$5.) Chicago: Medical Center Foundation and Fund. 1946.

The author elaborates his thesis that gastric ulcer is due to ischaemia of the mucosa caused by pressure from structures adjacent to the stomach.

*Transplantation von Mensch auf Mensch aus dem Lebenden und aus der Leiche.* By E. Kubányi. (Pp. 120. 12.80 Swiss francs.) Berne: Hans Huber. 1948.

A monograph on the transplantation of endocrine and other tissues from man to man or cadaver to man.

*An Elementary Atlas of Cardiography.* By H. Wallace-Jones, M.D., M.Sc., F.R.C.P., and others. (Pp. 108. 12s. 6d.) Bristol: John Wright. 1948.

Illustrations of electrocardiograms and skiagraphs, with annotations.

*Die Indikationen zur Röntgen- und Radium-Bestrahlung.* By H. R. Glauner. (Pp. 124. M. 7.20.) Stuttgart: Georg Thieme. 1948.

A short review of the conditions for which x-ray or radium therapy is indicated.

*L'Indirizzo Psicologico nello Studio della Personalità del Reo.* By P. Manunza. (Pp. 138. No price.) Cagliari: Società Editoriale Italiana. 1948.

An account of researches into the psychology of delinquents.

*Cardiology.* By W. Evans, M.D., D.Sc., F.R.C.P. (Pp. 310. 35s.) London: Butterworth. 1948.

A textbook for medical students.

*Médecine Pratique.* Edited by C. Lian. (Pp. 191. 700 francs.) Paris: L'Expansion Scientifique. 1948.

Lectures on a variety of medical topics delivered to students.

*World of All of Us.* Issued by the Church Missionary Society. (Pp. 58. 2s. 6d.) London: Church Missionary Society. 1948.

News from the letters of medical missionaries abroad.

*A Surgeon's Guide to Local Anaesthesia.* By C. E. Corlette, M.D., Ch.M., F.R.A.C.S. (Pp. 355. 35s.) Bristol: John Wright. 1948.

A practical guide intended for surgeons, not for physician-anaesthetists.

*Atemregelung als Heilmittel.* By L. Hofbauer. (Pp. 99. Sch. 25.) Vienna: Wilhelm Maudrich. 1948.

A short account of the treatment of chest disorders.

that the anaesthetic exploded. Mr. R. H. F. Brain, surgeon at the hospital, said that the risks of this method were appreciated, but it was considered that they were outweighed by the advantages. Death was due to blast, and a verdict of misadventure was recorded.

## Universities and Colleges

### UNIVERSITY OF DURHAM

The following medical degrees were conferred at a Congregation held on Dec. 17, 1948:

M.B., B.S.—G. L. Anderson, Anne R. Boon, P. G. Buck, Maureen T. Cunningham, June Dickson, Irene N. Dodd, Mildred C. Gardner, Sheila L. Harrison, Elizabeth J. Hunter, Alix P. M. Hurst, Eileen Hutton, Hazel E. Jopling, R. N. C. Lockey, J. McManners, J. G. Noble, Edith M. Robertson, D. Smith, J. D. R. Smith, Joan Stephens, A. E. Wright.

### UNIVERSITY OF LONDON

A Special University Lecture on "Surgical Aspects of Meningitis" will be given by Sir Hugh Cairns at Westminster Medical School, Horseferry Road, London, S.W., on Thursday, Feb. 10, at 5 p.m.

Professor B. G. Macgregor will give a Special University Lecture on "Malaria as a World Problem" at Westminster Medical School, Horseferry Road, London, S.W., on Thursday, Feb. 24, at 5 p.m.

The above lectures are addressed to students of the University and to others interested in the subject. Admission is free, without ticket.

### UNIVERSITY COLLEGE

The following lectures will be delivered at the College (Gower Street, W.C.): Jan. 18 and 25 and Feb. 1 and 8, 5.15 p.m., Dr. E. Ashworth Underwood, "The Development of Modern Physiology, 1700-1900"; Jan. 24 and 31 and Feb. 7 and 14, 4.45 p.m., Mr. P. Johnson, Ph.D., "The Ultracentrifuge and Electrophoresis Apparatus in Protein Research"; Jan. 27, 1.15 p.m., Professor J. B. S. Haldane, F.R.S., "Some Modern Views on Evolution"; Jan. 28 and Feb. 4 and 11, 5.15 p.m., Mr. F. Bergel, Ph.D., "Some Aspects of Pharmacological Chemistry"; Feb. 2, 5 p.m., Mr. D. Abercrombie, "Speech and Society"; Feb. 15 and 22 and March 1, 8, and 15, 5.15 p.m., Dr. A. Schweitzer, "Reflexogenic Areas of the Vascular System"; Feb. 17, 1.15 p.m., Mr. G. Burniston Brown, Ph.D., "The New Philosophy of Science"; Feb. 28 and March 7, 4.45 p.m., Professor C. Rimington, "Haem Pigments in Nature." Admission to all lectures is free, without ticket.

Cedric Keith Simpson, M.D., has been appointed to the part-time University Readership in Forensic Medicine tenable at Guy's Hospital Medical School, from Oct. 1, 1948.

The title of Reader in Applied Pharmacology in the University has been conferred on Andrew Wilson, M.D., Ph.D., Ph.C., in respect of the post held by him at University College and University College Hospital Medical School.

The following candidates have been approved at the examination indicated:

M.S.—Branch I (Surgery): D. T. A. Brown, S. I. Green, H. O. Jones, D. W. Williams.

### ROYAL FACULTY OF PHYSICIANS AND SURGEONS OF GLASGOW

At a meeting of the Royal Faculty of Physicians and Surgeons of Glasgow held on Dec. 6, 1948, with Dr. W. R. Snodgrass, President, in the chair, the following were admitted Fellows of Faculty *qua* Physician: J. D. Aitchison, M.B., R. D. C. Brackenridge, M.B., J. H. Haldane, L.R.C.P.&S.Ed., G. Johnston, M.B., W. P. Kennedy, Ph.D., L.R.C.P.&S.Ed., H. R. F. Macdonald, M.B., J. Rankin, M.D.

The following were admitted Fellows of Faculty *qua* Surgeon: H. A. Benjamin, M.B., J. Cohen, M.B., W. Y. Cornock, M.B., J. M. McBride, M.B., J. D. McCardel, M.B., D. M. Macdonald, L.R.C.P.&S.Ed., W. Macintyre, M.B., N. McLean, M.B., R. G. MacLeod, M.B., R. G. Main, M.B., A. J. M. Mathieson, M.B., A. B. May, M.B., K. M. Mayall, M.B., I. P. Munro, M.B., T. A. Ramsay, M.B., R. P. Schach, M.B., J. M. Scott, M.B., D. M. Sinclair, M.B., R. B. Watson, M.B., T. M. Welsh, M.B., W. F. White, M.B.

## The Services

The Efficiency Decoration of the Territorial Army has been conferred upon Lieutenant-Colonel W. H. Wolstenholme, O.B.E., Major (Acting Lieutenant-Colonel) A. Cowie, D.S.O., Major (Honorary Lieutenant-Colonel) G. Tudhope, and Majors E. C. Ellis and E. M. Wright, R.A.M.C., T.A.

No. 52

## 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. 25.

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	1948					1947 (Corresponding Week)				
	(a)	(b)	(c)	(d)	(e)	(a)	(b)	(c)	(d)	(e)
Cerebrospinal fever ..	22	—	13	—	1	26	4	16	1	—
Deaths .. ..	—	1	1	—	—	—	1	1	—	—
Diphtheria .. ..	100	6	32	7	11	157	18	65	8	5
Deaths .. ..	3	—	—	—	1	6	—	—	—	—
Dysentery .. ..	30	5	28	—	3	53	6	27	—	—
Deaths .. ..	—	—	—	—	—	—	—	—	—	—
Encephalitis lethargica, acute .. ..	—	—	1	—	—	—	—	—	—	—
Deaths .. ..	—	—	—	—	—	1	—	—	—	—
Erysipelas .. ..	—	—	54	6	1	—	—	33	6	1
Deaths .. ..	—	—	—	—	—	—	—	—	—	—
Infective enteritis or diarrhoea under 2 years .. ..	—	—	—	28	—	—	—	—	13	—
Deaths .. ..	28	2	8	—	2	52	5	6	1	1
Measles* .. ..	8,959	110	86	29	50	2,583	115	278	93	7
Deaths† .. ..	—	—	1	—	1	2	—	2	1	—
Ophthalmia neonatorum .. ..	18	1	3	—	—	30	2	13	—	1
Deaths .. ..	—	—	—	—	—	—	—	—	—	—
Paratyphoid fever .. ..	3	—	—	—	—	22	1 (A)	—	—	—
Deaths .. ..	—	—	—	—	—	—	—	—	—	—
Pneumonia, influenzal .. ..	792	35	2	9	1	690	38	13	3	14
Deaths (from influenza)‡ .. ..	25	2	2	—	—	20	4	—	—	—
Pneumonia, primary .. ..	—	—	337	23	—	—	—	372	11	—
Deaths .. ..	258	51	—	7	10	—	37	—	8	4
Polio-encephalitis, acute .. ..	2	—	—	—	—	4	—	—	—	—
Deaths .. ..	—	—	—	—	—	—	—	—	—	—
Poliomyelitis, acute .. ..	17	2	1	1	—	44	2	3	1	2
Deaths§ .. ..	2	—	—	—	—	—	—	—	—	—
Puerperal fever .. ..	—	3	—	—	—	—	—	7	—	—
Deaths .. ..	—	—	—	—	—	—	—	—	—	—
Puerperal pyrexia   .. ..	78	7	5	1	1	68	6	10	—	—
Deaths .. ..	—	—	—	—	—	—	—	—	—	—
Relapsing fever .. ..	—	—	—	—	—	—	—	—	—	—
Deaths .. ..	—	—	—	—	—	—	—	—	—	—
Scarlet fever .. ..	1,154	42	246	120	40	1,469	104	297	18	21
Deaths† .. ..	—	—	—	—	—	3	—	—	—	—
Smallpox .. ..	—	—	—	—	—	—	—	—	—	—
Deaths .. ..	—	—	—	—	—	—	—	—	—	—
Typhoid fever .. ..	4	1	1	2	1	2	—	2	1	1
Deaths .. ..	—	—	—	—	—	—	1	—	—	—
Typhus fever .. ..	—	—	—	—	—	—	—	—	—	—
Deaths .. ..	—	—	—	—	—	—	—	—	—	—
Whooping-cough* .. ..	1,791	100	130	66	8	1,141	67	14	27	5
Deaths .. ..	16	1	—	1	1	5	1	—	—	—
Deaths (0-1 year) .. ..	315	42	47	16	8	336	38	77	15	12
Infant mortality rate (per 1,000 live births) .. ..	—	—	—	—	—	—	—	—	—	—
Deaths (excluding stillbirths) .. ..	4,854	738	551	158	110	4,577	706	650	150	111
Annual death rate (per 1,000 persons living) .. ..	—	—	11.1	9.9	—	—	13.5	9.5	—	—
Live births .. ..	6,263	992	766	239	200	5,351	751	880	156	184
Annual rate per 1,000 persons living .. ..	—	—	15.5	15.0	—	—	17.7	9.8	—	—
Stillbirths .. ..	175	28	18	—	—	145	18	26	—	—
Rate per 1,000 total births (including stillborn) .. ..	—	—	23	—	—	—	29	—	—	—

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

† Deaths from measles and scarlet fever for England and Wales, London (administrative county), will no longer be published.

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

§ The number of deaths from poliomyelitis and polio-encephalitis for England and Wales, London (administrative county), are combined.

|| Includes puerperal fever for England and Wales and Eire.

EDINBURGH CLINICAL CLUB.—At B.M.A. Scottish House, 7, Drumsheugh Gardens, Edinburgh, Jan. 20, 8 p.m. "Stricture of the Oesophagus," by Mr. A. Logan.

INSTITUTE OF UROLOGY.—At St. Paul's Hospital, Endell Street, London, W.C., Jan. 20, 11 a.m. "Infestations due to *Trichomonas vaginalis*," by Dr. W. N. Mascall.

MIDDLESEX COUNTY MEDICAL SOCIETY.—At Park Lane Health Centre, Tottenham, N., Jan. 20, 3 p.m. Meeting.

ROYAL PHOTOGRAPHIC SOCIETY OF GREAT BRITAIN: SCIENTIFIC AND TECHNICAL GROUP, 16, Prince's Gate, London, S.W.—Jan. 20, 7 p.m. "The Kinephotomicrography of the Living Cell," by Dr. A. Hughes.

ROYAL SOCIETY OF TROPICAL MEDICINE AND HYGIENE.—At 26, Portland Place, London, W., Jan. 20, 7.30 p.m. "A Critical Review of Malignant Malnutrition (Kwashiorkor)," by Dr. H. C. Trowell. A discussion will follow.

ST. GEORGE'S HOSPITAL MEDICAL SCHOOL, Hyde Park Corner, London, S.W.—At Large Lecture Theatre, Jan. 20, 4.30 p.m. Lecture-demonstration: Psychiatry.

### Friday

BRITISH INSTITUTE OF RADIOLOGY, 32, Welbeck Street, London, W.—Jan. 21, 8.15 p.m. "Intracranial Aneurysms—a Correlation of Their Pathology with the Radiological Appearances," by Dr. R. G. Reid and Mr. R. Johnson.

FACULTY OF RADIOLOGISTS.—At Royal College of Surgeons, Lincoln's Inn Fields, London, W.C., Jan. 21, 2.15 p.m. Diagnosis Section meeting. "Radiological Investigation of Pancreatic Disease," by Dr. R. A. Kemp Harper. "The Vascularization of the Human Stomach and the Shunting Effect of Trauma," by Dr. A. E. Barclay and Professor F. H. Bentley.

LONDON CHEST HOSPITAL, Victoria Park, E.—Jan. 21, 5 p.m. "Pain in the Chest," by Dr. N. S. Plummer.

ROYAL INSTITUTE OF PHILOSOPHY.—At University Hall, 14, Gordon Square, London, W.C., Jan. 21, 5.15 p.m. "The Ethics of Liberalism and the Ethics of Socialism," by W. B. Gallie, M.A.

ROYAL MEDICAL SOCIETY, 7, Melbourne Place, Edinburgh.—Jan. 21, 8 p.m. "Medical Research as an Aim in Life," by Sir Henry Dale.

WEST LONDON MEDICO-CHIRURGICAL SOCIETY.—At South Kensington Hotel, 41, Queen's Gate Terrace, London, S.W., Jan. 21, 7.15 p.m. for 7.30 p.m. Dinner meeting. 8.30 p.m. "American Medicine," by Professor John McMichael.

### Saturday

BIOCHEMICAL SOCIETY.—At British Postgraduate Medical School, Ducane Road, Hammersmith, London, W., Jan. 22, 11 a.m. 272nd Meeting.

BRITISH ASSOCIATION OF ALLERGISTS.—At University College Hospital Medical School, University Street, London, W.C., Jan. 22, 11.30 a.m. and 2.15 p.m. Annual general meeting. "Some Biochemical Investigations on the Allergens of Household Dust," by Professor C. Rimington. "Some Immunological Aspects of Desensitization with Allergens of Household Dust," by Dr. Kate Maunsell.

## BIRTHS, MARRIAGES, AND DEATHS

### BIRTHS

**Benison.**—On Dec. 30, 1948, to Eileen (née Arthur), wife of Ronald Benison, F.R.C.S., a daughter.

**Powell.**—On Jan. 3, 1949, at Milland Vicarage, Liphook, Hants, to Leonore (née Trench) and Denis Powell, M.A., M.B., Ch.B., a second daughter.

**Prentice.**—On Dec. 17, 1948, at Colchester, the wife of Ian Prentice, M.C., M.B., twins, a son and daughter.

### MARRIAGES

**Crowell-Gunderson.**—On Dec. 24, 1948, in London, Patrick L. Crowell to Eileen M. Gunderson.

**McGhee-Copeland.**—On Dec. 4, 1948, at Caxton Hall, Westminster, London, S.W., David McGhee, M.B., Ch.B., Ph.C., to Victoria Eugénie Copeland, of Bollington, Cheshire.

**Purdie-Roberts.**—On Dec. 18, 1948, in London, Anthony W. Purdie, M.B., Ch.B., F.R.F.P.S., M.R.C.O.G., to Erica M. G. H. Roberts, B.Sc., M.B., B.Ch., D.Obst.R.C.O.G.

### DEATHS

**Addison.**—On Jan. 5, 1949, at St. Mary's, Isles of Scilly, William Bragg Addison, M.B., B.Ch., aged 85.

**Alexander.**—On Jan. 4, 1949, at Killarney Hospital, John Cassels Alexander, M.B., Ch.B., formerly missionary at Itu, Calabar, Nigeria.

**Bullen.**—On Dec. 31, 1948, at Yelverton, John Welply Bullen, M.D., Colonel A.M.S., retired, aged 88.

**Falkner.**—On Jan. 7, 1949, at a Bournemouth nursing home, after a short illness, Berkeley Foote Falkner, L.R.C.P.&S.I. and L.M., much loved husband of Annie Elizabeth, late of Woodleigh, Vivian Park, Swanage, aged 81.

**Gibson.**—On Jan. 5, 1949, as the result of an air crash, Anne Gibson, M.D.Ed.

**Passmore.**—On Dec. 31, 1948, William Henry Passmore, M.R.C.S., L.R.C.P., of Mornacott, Carshalton, Surrey, aged 76.

**Phillips.**—On Dec. 25, 1948, at Bwlch Glas, Nevin, North Wales, George Phillips, M.D.Ed., aged 79.

**Pullin.**—On Dec. 25, 1948, at Rahere, Honiton, Devon, Bingley Gibbs Pullin, M.R.C.S.

**Raw.**—On Dec. 26, 1948, at Alnmouth, Northumberland, Stanley Raw, M.D., F.R.C.S.Ed., aged 70.

**Susman.**—On Dec. 23, 1948, William Susman, M.D., of the Department of Pathology, Manchester University, aged 53.

**Wilson.**—On Dec. 28, 1948, at Riverside, 9, Trowlock Avenue, Teddington, Middlesex, Graham Lionel John Wilson, M.R.C.S., L.R.C.P., aged 84.

**Young.**—On Dec. 28, 1948, at Bedford, William John Young, M.R.C.S., L.R.C.P., of Bath House, Harston, Cambridge, aged 79.

## 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.

### "Rapid" Rat Test for Pregnancy

**Q.**—A request for the Aschheim-Zondek reaction of a patient complaining of 7½ weeks' amenorrhoea, and whose physical signs were compatible with early pregnancy, has been answered by this report: "Rat test weakly positive." What is the breed of rat used, how is the test carried out, and what is the percentage reliability?

**A.**—Many biological tests for pregnancy in which the rat is used as a test object are available, but that most likely to have given rise to this question is one introduced in recent years, often called the "rapid" rat test. Here again several techniques are described. Tame female albino rats 21 to 30 days old are injected either subcutaneously or intraperitoneally with 1 ml. of a first morning specimen of the urine under test. The animal is killed two hours later and the ovaries are immediately exposed and examined. If they are pale or pale pink the reaction is negative, but if one or both are light to dark red it is positive. In other words, the criterion is the degree of vascularity of the ovaries, and it will be appreciated that the accuracy of the test depends a good deal on the experience of the observer. It is stated that it is more reliable if two or three rats are used for each test, but with only one rat many workers still claim 95% accuracy. Further details of this type of test are given by U. J. Salmon and others (*J. clin. Endocrinol.*, 1942, 2, 167), H. S. Kupperman and R. B. Greenblatt (*Sth. med. J.*, Nashville, 1946, 39, 158), and P. H. Fried (*Amer. J. Obstet. Gynec.*, 1947, 54, 689).

### Testosterone for Prostatic Enlargement

**Q.**—(a) Is there reasonable evidence that benign enlargement of the prostate is reduced by administration of testosterone propionate? (b) Has prolonged administration of this drug any harmful effect? (c) If so, what is the safe maximum dose and over what period should it be given?

**A.**—Testosterone was originally suggested as a method of treatment for benign enlargement of the prostate, on the ground that such enlargement occurs in later life when the testicular secretion of testosterone is beginning to fail. There have been many clinical reports of symptomatic improvement. However, a subcommittee of the Medical Research Council was unable to produce convincing evidence—at least in so far as objective data were concerned—that testosterone had such a beneficial effect. There is no evidence of any harmful effects of this substance given in therapeutic dosage over a long period in adults.

### Pressure-cooker as Sterilizer

**Q.**—Can a pressure-cooker be used for sterilizing small dressings? The working pressure is given as 15 lb. What would the method be?

**A.**—The answer to both parts of this question depends on the design of the cooker. A pressure of 15 lb. (6.8 kg.) of steam will not ensure absolute sterility—although, of course, it will in any case destroy all pyogenic cocci and other non-sporogenous bacteria—if the steam is mixed with the whole of the air contained in the cooker when it is closed. For efficient operation there should therefore be a tap through which the contained air can be expelled by steam before the pressure is allowed to rise; alternatively, the cooker could be closed when the water is already boiling in it, but this might be difficult and liable to produce scalded fingers. Dressings so treated would be damp. Presumably it is not suggested that this proceeding should be resorted to except in an emergency. Apart from being possibly unsatisfactory for the reasons given, it is a waste of time when sterile dressings can so easily be obtained commercially.