producing this useful book. The discovery, isolation, synthesis, biological value, and metabolism of each amino-acid are described in some detail, and in the last chapter the assay of amino-acids by micro-organisms is discussed. The book therefore covers this subject fairly comprehensively, but the space allotted to proteins is disappointingly small. Theories of protein structure, and modern physical methods of protein investigation—e.g., ultracentrifuging, electrophoresis, x-ray analysis, and electron microscopy—are mentioned but not described. Nor is there a discussion on the problems of protein denaturation and of antibody formation in animals.

The editor recognizes these and other omissions, but states that the purpose of the book is to give a simple, accurate, and readable outline of the chemistry and biochemistry of the amino-acids and proteins, and suggests that the reader interested in theoretical and argumentative aspects should consult larger works or refer to some of the many articles cited. Many readers will nevertheless wish that more space had been given to these controversial subjects, even at the risk of including one or two speculative theories. This would have introduced some of the most important conceptions in modern biochemical research.

Subjects of special interest to the medical reader are not particularly stressed, for the book is written primarily for chemists and biochemists. The changes in plasma protein levels in disease and the analytical methods for determining them are compressed into a few pages. The work of Cohn and his colleagues on the fractionation of plasma proteins is merely mentioned in a footnote, and there are only a few pages on the use of amino-acids and protein hydrolysates in intravenous therapy. The few diagrams present are too small, particularly the electrophoresis curve on page 140.

This simple and accurate book should prove of considerable interest to chemists and biochemists, especially those commencing work with amino-acids, to whom the references should be very useful.

W. G. DANGERFIELD.

# DERMATOLOGY

Dermatologie. By J. Darier, A. Civatte, and A. Tzanck. (Pp. 922; 269 illustrations. 90 Swiss francs.) Bern: Medizinischer Verlag Hans Huber. 1949.

Skin Diseases in General Practice. By F. Ray Bettley, T.D., F.R.C.P. The Practitioner Handbooks. (Pp. 260; 96 illustrations. £1 1s.) London: Eyre and Spottiswoode. 1949.

Dermatologie is a German translation of the fifth edition of the Précis de Dermatologie by Dr. A. Civatte (formerly by Professor Darier), which has been reviewed in these columns (January 17, 1948, p. 102). It has been translated and published in Bern with a foreword by Professor Robert and is the first edition in German to appear since 1936, when Vohwinkel's translation was published in Leipzig. It is handsomely bound and printed in larger and clearer type than the French edition and the illustrations are from the German-reading dermatologists will enjoy same blocks. the lack of verbosity of this book, which retains the individual character of the original and is faithfully translated by Dr. Eva Schwartz. They will be grateful for this new edition of one of the most widely read textbooks on diseases of the skin and for the opportunity to follow the logical and lucid exposition of the views of the French school.

Dr. Bettley is to be commended on producing a book on dermatology for the particular requirements of the practitioner. It is excellently illustrated in black and white and is concerned only with common diseases. Treatment is thoroughly reviewed and the presentation well balanced, but the author very properly emphasizes his own particular opinions. Some common affections which have been omitted should find a place in the next edition, particularly leg ulcers, chilblains, and urticaria. The eczematous reaction is most important, but to allot about 100 pages out of a total of 260 to the various aspects of this subject is perhaps out of proportion. Nevertheless, student and practitioner will appreciate this useful textbook.

JOHN INGRAM.

Introduction to Physical Biochemistry, by Professor J. M. Johlin (second edition; pp. 246; 27s. 6d.; London: Cassell, 1949), was first published in 1941. This edition has been extensively revised, but the general plan is unaltered. After a discussion of the problems that arise from investigations into the composition and function of blood—a liquid that "lends itself almost to any desired study within the fields of physical and colloidal chemistry," the author discusses in separate chapters the physical and chemical properties of water; haemoglobin; the gas laws; colligative properties of solutions; colloids; chemical equilibrium; buffer systems; indicators; oxidation-reduction potentials; respiratory functions of blood; acidbase balance; and oxidation-reduction systems. The exposition is clear, unhurried, and unencumbered by advanced mathematics; it provides a useful introductory survey for students of biochemistry. In the new edition an attempt has been made to rationalize the concept of acid-base balance in terms of anion-cation nomenclature, and the chapter on oxidation-reduction systems, that pons asinorum of the first-year medical student, has been effectively re-written.

# **BOOKS RECEIVED**

Review is not precluded by notice here of books recently received

The Show of Violence. By F. Wertham, M.D. (Pp. 279. 15s.) London: Victor Gollancz. 1949.

Counting Tubes. Theory and Applications. By S. C. Curran, Ph.D., F.R.S.E., and J. D. Craggs, M.Sc., Ph.D. (Pp. 238. 35s., postage 1s. 3d. extra.) London: Butterworths Scientific Publications. 1949.

Science News 15. Edited by J. L. Crammer. (Pp. 194. ls. 6d.) Harmondsworth: Penguin Books. 1950.

A Histology of the Body Tissues. By M. Gillison. Foreword by R. C. Garry, D.Sc., M.B. (Pp. 220. 15s.) Edinburgh: E. and S. Livingstone. 1950.

Pye's Surgical Handicraft. Edited by Hamilton Bailey, F.R.C.S. 16th ed. (Pp. 724. 25s.) Bristol: John Wright. London: Simpkin Marshall. 1950.

Psychology and Mental Health. By J. A. Hadfield, M.A., M.B., Ch.B. (Pp. 444. 18s.) London: George Allen and Unwin. 1950.

Modern Pattern for Marriage. By W. R. Stokes, Ll.B., M.D. Foreword by D. Mace, M.A., Ph.D. (Pp 110. 8s. 6d.) London: Reinhardt and Evans. 1949.

Recent Advances in the Physiology of Vision. By H. Hartridge, M.R.C.P., F.R.S. (Pp. 401. 25s.) London: Churchill. 1950.

Biological Actions of the Adenine Nucleotides. By H. N. Green, M.D., M.Sc., and H. B. Stoner, M.D., B.Sc. Foreword by Sir E. Mellanby, G.B.E., K.C.B., F.R.S. (Pp. 221. 25s.) London: H. K. Lewis. 1950.

The Supersensitivity of Denervated Structures. By W. B. Cannon and A. Rosenblueth. (Pp. 245. 40s.) New York and London: Macmillan. 1949.

Bone and Joint Radiology. By E. Markovits, M.D (Pp. 446. 140s.) London and New York: Macmillan. 1949.

Bring Out Your Dead. By J. H. Powell (Pp. 304. 30s.) Philadelphia: University of Pennsylvania Press. London: Geoffrey Cumberlege. 1949.

Hemorrhagic Disorders. By P. M. Aggeler, M.D., and S. P. Lucia, M.D. (Pp. 112. 75s.) Chicago: The University of Chicago Press.

To include all the school-children who were thought to be in need of glasses would have made it impossible to give special priority to workers in industry who could not carry on their jobs without glasses.

The priority scheme had on the whole been successful. The Government had also managed to import something like one million lenses from abroad. By January of this year the Government had been able to establish a production of lenses in the U.K. some 33% above the demand. This meant that the delays were steadily being reduced. He hoped it would be possible before long to abolish the priority scheme altogether.

Continuing, Mr. Blenkinsop said the Government faced a more serious position in the dental services because of an overall shortage of dentists. Many of these had unfortunately been attracted into private practice by the higher rate of payment. The Government was doing all it could to encourage the training of more dentists. Some local education authorities had been able to make up for the loss of full-time school dental officers by securing the part-time services of practising dentists on a sessional basis. Cardiff had been able to meet the shortage by employing part-time dentists. He hoped similar arrangements would be extended to other areas. The position varied much from one part of the country to another.

Mr. H. M. KING asked Mr. Blenkinsop to take up with Mr. Bevan the possibility of requiring dentists to undertake sessions for the school dental service as one of the conditions of their entering the General Dental Service.

#### Tuberculosis in Scotland

Mr. RANKIN on March 9 called attention to the problem of tuberculosis in Scotland. According to experts, if 100 trained nurses could be obtained for the treatment of cases of tuberculosis about 1,000 beds would be made available, thus breaking the back of the problem in Scotland. He asked, Could the Government give any information on the deliberations of the committee appointed in July, 1948, to inquire into the continued high incidence and mortality in Scotland? In young women aged from 15 to 25 the mortality rate from tuberculosis had reached a new high figure of 1.14 per 1,000 population; in the age group 25 to 35 the mortality rate in 1939 was 0.74, but for 1947 it was 1.74. Corresponding figures for males were not nearly so bad. Special or extra diets were available for chronic cases of tuberculosis. Why not, then, an extra diet for female adolescents in the years when the seeds of the disease were most likely to be sown?

Mr. THOMAS FRASER, replying for the Government, said the reason why the incidence of tuberculosis in Scotland was far worse than in most other West European countries since the war remained obscure. The committee appointed by the Health Services Council was on the point of reporting. Many of the questions asked by Mr. Rankin could be better dealt with when the committee's report had been received. An encouraging fact was that in 1949 the Scottish death rate from respiratory tuberculosis was 10% below the 1948 figure. He thought Mr. Rankin's figures for deaths among females in certain age groups were not very recent. The Government had not yet been able to get the 1949 figures broken down into different age groups. Although deaths went down last year notifications went up, partly because of better case-finding. The Government would continue to take cases at the earliest stage, and to this end the number of mass radiography units in Scotland was being increased. Within the next few weeks seven of these units would be in operation. With increased notifications and longer periods of hospital treatment the waiting-list tended to grow longer. In West Scotland the waiting-list was growing less, and improvement largely due to the energetic efforts of the Western Regional Hospital Board in providing additional beds. In the last 18 months the Board had diverted some 250 beds, mostly in infectious diseases hospitals.

He had consulted his officials on the statements in the Press about the British Medical Association's conference in Edinburgh. An impression had been created that, if 100 trained nurses could be got, additional beds would be made available. The doctors had not said this, but had said "together with parttime and part-trained nurses." The recruitment of nurses was

improving steadily. When the revised salary scales were negotiated further consideration was given to the exceptional need to encourage nurses in tuberculosis centres, and a further financial inducement was granted. It was £30 for each completed year and an allowance to student nurses of £40 after two years in a ward for cases of respiratory tuberculosis.

The Government was encouraging more radical measures to prevent the disease. As an initial step B.C.G. vaccine was to be offered to nurses and medical students, and local authorities had been instructed to offer this protection to known contacts. At present it was necessary to obtain the vaccine from abroad, and production difficulties had caused an unfortunate hitch. Experts from this country had now returned from Denmark, where they discussed the difficulties on the spot, and the Government hoped that supplies would shortly become available again.

Cardiff.—Discussions are now taking place between the board of governors of the United Cardiff Hospitals, the University, and the City Council about a site for a new teaching hospital and medical school to replace the present inadequate premises of the Cardiff Royal Infirmary.

# Universities and Colleges

#### UNIVERSITY OF CAMBRIDGE

The Council of the Medical School has arranged courses for general practitioners in co-operation with the consultant staff of the United Cambridge Hospitals, the purpose of which is to provide instruction in the latest methods of medicine and surgery and to make it possible for the general practitioners of the region to acquire knowledge of these methods.

The Faculty Board of Medicine expressed the opinion that those responsible for the above instruction who do not already hold University posts should receive recognition by the University in the form of appointment to Associate Lectureships in the Department of Medicine. A recommendation on these lines was approved in Congregation on March 4.

The lectureships, which are established from January 1, are as follows: Three in physic, three in surgery, two in orthopaedic surgery, two in otolaryngology, two in ophthalmology, one in thoracic surgery, two in obsectrics and gynaecology, one in paediatrics, one in dermatology, two in psychiatry, and two in radiology.

The following medical degrees were conferred in Congregation on March 4:

M.D.—J. M. Ranking, D. J. Conway, A. S. Wigfield, D. G. Wraith.

M.B., B.Chir.—\*P. M. Smythe, \*D. H. Mackenzie, \*F. W. Huddy.

\* By proxy.

# UNIVERSITY OF MANCHESTER

Alexander Colin Patton Campbell, M.B., Ch.B., F.R.C.P.Ed., has been appointed Procter Professor of Pathology and Pathological Anatomy in the University. Professor S. L. Baker will continue to hold the Chair of Pathology together with the Directorship of the Pathological Section of the Centre for Research in Chronic Rheumatism, which will then become a full-time appointment, until Dr. Campbell assumes his duties early in the summer.

# ROYAL COLLEGE OF SURGEONS OF ENGLAND

At a meeting of the Council of the College on March 9, with Sir Cecil Wakeley, President, in the chair, the award of Honorary Fellowships to Professor P. Bailliart, of Paris, and Dr. Derrick Vail, Professor of Ophthalmology, North Western University, Chicago, was announced.

Mr. R. D. Owen, F.R.C.S.Ed., of Cardiff, was elected to the Fellowship of the College ad eundem.

Dr. James Craigie and Dr. L. Foulds were appointed Imperial Cancer Fund lecturers in the College for 1950.

A Diploma of Membership was granted to J. W. Fullerton (Manchester).

The following hospitals were recognized under paragraph 23 of the F.R.C.S. regulations: City General Hospital, Gloucester (surgical registrar and house-surgeon); Gloucestershire Royal Hospital, Gloucester (resident surgical officer, first and second house-surgeons (decennial revision)); Elizabeth Garrett Anderson Hospital, London (one general surgical post (with no gynaecological beds), for six months only); Mildmay Mission Hospital, London (senior house-surgeon for six months only, junior registrar); St. John and St. Elizabeth, London (surgical registrar and house-surgeon).

# The Services

The King of the Hellenes has conferred the decoration of Gold Cross of the Order of King George I upon Colonel (temporary) P. F. Palmer, O.B.E., R.A.M.C., in recognition of distinguished service in the cause of the Allies.

The Prince Regent of Belgium has conferred the decorations of Commandeur de l'Ordre de la Couronne upon Lieutenant-General Sir Alexander Hood, G.B.E., K.C.B., late R.A.M.C., and Commandeur de l'Ordre de Leopold II upon Brigadier J. M. Macfie, C.B.E., M.C., late R.A.M.C., in recognition of distinguished service in the cause of the Allies.

#### AUXILIARY R.A.M.C. FUNDS

The annual general meeting of the members of the Auxiliary Royal Army Medical Corps Funds will be held at 11, Chandos Street, London, W., on Monday, April 3, at 5 p.m., to receive the annual report and accounts for 1949 and to appoint officers and to elect auditors for 1950.

## DEATHS IN THE SERVICES

FRANK C. COWTAN, C.B., C.B.E., M.R.C.S., L.R.C.P.

Air Vice-Marshal Frank Cuninghame Cowtan died at his home in Farnham, Surrey, on March 5 at the age of 61. His death followed a long illness, which unfortunately led to his retirement from the Royal Air Force on Christmas Day, 1945, and which he bore with his accustomed gallantry and stoicism. He was educated at St. Paul's School and at St. Thomas's Hospital, qualifying in 1912. After being a house-physician at the Brompton Chest Hospital, Cowtan joined the R.A.M.C. as a regular officer. He then embarked on the career he loved and for which he was so suited by temperament, discipline, and ideals. He saw active service in France during 1915 and 1916, being mentioned in dispatches. From 1917 to 1919 he served with distinction in Mesopotamia, where he was promoted brevet major and mentioned in dispatches on three occasions. In September, 1919, he transferred to the R.A.F. and was granted a permanent commission as squadron-leader and appointed commandant of the medical training depot at Halton, Bucks. Cowtan was the only regular R.A.M.C. officer to transfer to the R.A.F. on the formation of the R.A.F. Medical Branch, which initially consisted of fifty officers with permanent commissions. His transfer was at the special request of the D.M.S. Air Ministry, who wanted an officer of high character and ability to initiate the training of medical personnel and to build up the esprit de corps of a new service. In Cowtan he had found the ideal man for the job, for he was well versed in military medicine, punctilious, keen, smart, tactful, and with the gift of inspiring confidence.

Cowtan's career in the R.A.F. was distinguished. He always filled an important post and always with success. He was Deputy P.M.O. in Iraq from 1926 to 1928, after which he was employed on senior staff duties at the Air Ministry from 1929 to 1934. He was in command of Princess Mary's R.A.F. Hospital at Halton, and was later P.M.O. Middle East Command, whence he was invalided home with a severe attack of undulant fever. He took an active interest in B.M.A. work, being president of the Mesopotamia Branch in 1928-9 and of the Egyptian Branch in 1937-8.

At the beginning of the 1939-45 war Cowtan was P.M.O. Coastal Command, and was mentioned in dispatches in January, 1941. He was appointed Honorary Surgeon to the King in March, 1941, an appointment he held until his retirement. He became P.M.O. of Fighter Command in 1943, and was awarded the C.B. for his services there. He was appointed P.M.O. to the Supreme Headquarters of the Allied European Forces (SHAEF) in 1944 in connexion with the planning of the medical arrangements for the invasion of Normandy, and was awarded the C.B.E. in January, 1946.

Cowtan was one of the ablest administrators of the R.A.F. Medical Branch. He possessed great charm of manner, was always courteous and calm, and most reliable in everything he did. He subdued his emotions and always presented a serene exterior, which may have contributed to the later development of the hypertension and coronary disease from which he died. He was a good artist, a first-class shot, fond of fishing, golf, and ornithology. He had a flair for crossword puzzles, and usually finished that of *The Times* in the train from Wendover to Marylebone. He loved good literature, but it had to be good, for he abhorred anything trashy in life. Those things or actions which he did not like he tactfully avoided. His death will be keenly felt by his many colleagues and friends, who will extend their deep sympathy to his widow, daughter, and son.—H. E. W.

# INFECTIOUS DISEASES AND VITAL STATISTICS

We print below a summary of Infectious Diseases and Vital Statistics in the British Isles during the week ended February 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 principal towns in Northern Ireland. A dash ... denotes no case; a blank space denotes disease not notifiable or no

	1950					1949 (Corresponding Week)				
Disease	(a)	(b)	(c)	(d)	(e)	(a)	(b)	(c)	(d)	(e)
Meningococcal infection Deaths	· 31	1 2	10	2	1	37	3	24	3	2
Diphtheria Deaths	74 1	9	12	_3	_4	112	10	30	_9	_4
Dysentery Deaths	445	21	119	2	_3	104	29	33	1	1
Encephalitis, acute Deaths	4	_	1	_	_	_	=		-	_
Erysipelas Deaths			33	10	1			37	9	7
Infective enteritis or diarrhoea under 2 years	26		4	11 3	1	41		8	38	3
Measles* Deaths†	4,980	45	124	108	413	19,502	777	134	151	149
Ophthalmia neonatorum Deaths	55	3	10	=	1	45	3	12	-	_
Paratyphoid fever Deaths	6	1	2(B)	_	=	9	_1	6 (B)	=	=
Pneumonia, influenzal  Deaths (from influenza);	1,098 78	64	36 14	- 1	18	1,469 158	119 33	62 21	18	22
Pneumonia, primary Deaths	304	61	345	¶	18	422	104	358	49 9	20
Poliomyelitis, acute Deaths§	38	7	_	_7	=	20 1	_1	1	1	_
Puerperal fever		_	10				-	4		
Puerperal pyrexia Deaths	86	9	6	1	_	121	12	8	_	2
Relapsing fever Deaths	_				_	_				
Scarlet fever	2,064	114	197		131	1,333	77	204 —	115	43 —
Smallpox Deaths	_	_	_	_	=	_	_	_	_	=
Typhoid fever Deaths		_3	Ξ		=	3		Ξ	3	=
Typhus fever Deaths	_	_	_		=		_	-	_	=
Whooping-cough* Deaths	1,679	78	374	48 —	39	3,027 16	191	259 1	63 3	67
Deaths (0-1 year)	283	33	39	29	11	387	46	57	22	21
Deaths (excluding still- births) Annual death rate (per 1,000 persons living)	5,882	935	778 15·6	1	175	6,992	1324	ł	220 13·6	1
Live births Annual rate per 1,000 persons living	7,545	1235	965 19·4		236	8,069	1299	1	424 26·3	
Stillbirths Rate per 1,000 total births (including stillborn)	178	19	21			202	28	21		

Measles and whooping-cough are not notifiable in Scotland, and the returns

\*Measies and whooping-tough are not nothable in Sectiand, and the feturis 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.

s 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.
|| Primary pneumonia no longer notifiable in Eire.

# Royal Sanitary Institute

A Health Congress will be held by the Royal Sanitary Institute at Eastbourne on April 24-28 under the presidency of Earl de la Warr. The following sections will be held on medical subjects (presidents of sections are shown in parentheses): Preventive Medicine (Professor James Mackintosh); Maternal and Child Health (Professor Hilda Lloyd); Food and Nutrition (Mr. A. L. Bacharach); Tropical Hygiene (president not appointed); Hygiene in Industry (Dr. Donald Stewart); Medical Officers of Health (Dr. H. C. Maurice Williams); and Health Visitors (Professor A. A. Moncrieff). Full particulars may be obtained from Royal Sanitary Institute, 90, Buckingham Palace Road, London, S.W.1.

#### Wessex Rahere Club

The spring dinner of the Wessex Rahere Club, which is open to all Bart's men resident in the South-west of England, will be held at the County Hotel, Taunton, on Saturday, April 29, when Mr. J. B. Hume will be the guest of honour. particulars may be obtained from the honorary secretary of the club, Mr. A. Daunt Bateman, 3, The Circus, Bath.

# SOCIETIES AND LECTURES

#### Monday

HUNTERIAN SOCIETY.—At Talbot Restaurant, 64, London Wall, E.C., March 20, 7 for 7.30 p.m., dinner-meeting; "Modern Trends in the Diagnosis and Treatment of Pulmonary Tuberculosis," discussion to be opened by Dr. Geoffrey Marshall and Mr. T. Holmes

London, W.C.—March 20, 5.30 p.m., "Physiology of the Autonomic Nervous System in Relation to the Eye," by Dr. D. Slome. Royal College of Surgeons of England, Lincoln's Inn Fields, London, W.C.—March 20, 5.30 p.m., "The Varieties and Modes of Renal Failure," Urology Lecture by Professor C. A. Wells.

EUGENICS SOCIETY.—At Royal Society, Burlington House, Piccadilly, London, W., March 21, 5.30 p.m., "The Quality of the Rural Population," by Mrs. Barbara Bosanquet, B.A.
INSTITUTE OF DERMATOLOGY, Lisle Street, Leicester Square, London, W.C.—March 21, 5 p.m., "Cutaneous Tuberculosis," by Dr. G. B.

Dowling.

Dowling.

INSTITUTE OF OPHTHALMOLOGY (UNIVERSITY OF LONDON), Judd Street, London, W.C.—March 21, 5.30 p.m., "Pituitary Tumours," by Mr. G. C. Knight.

INSTITUTE OF UROLOGY.—At St. Paul's Hospital, Endell Street, London, W.C., March 21, 5 p.m., "Retropubic Operations on the Prostate," by Mr. A. W. Badenoch.

ROYAL COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS, 58, Queen Anne Street, London, W.—March 21, 5 p.m., "Hydatidiform Mole and Chorioepithelioma," John Shields Fairbairn Memorial Lecture by Professor Arthur T. Hertig (Boston, U.S.A.).

# Wednesday

Wednesday

GLASGOW UNIVERSITY: DEPARTMENT OF OPHTHALMOLOGY.—March 22, 8 p.m., "Primary Visual Receptors," by Dr. T. D. M. Roberts. HARVEIAN SOCIETY OF LONDON.—At 26, Portland Place, London, W., March 22, 8.45 p.m., "Harvey and the Scientific Method," Harveian Lecture by Sir Henry Cohen.

Institute of Ophthalmology (University of London), Judd Street, London, W.C.—March 22, 5.30 p.m., "Compression of the Optic Nerves and Chiasm by Parasellar Lesions," by Mr. G. C. Knight.

Institute of Social Psychiatry.—At Seymour Hall, Seymour Place, London, W., March 22, 2 p.m., "Day Hospitals and Social Rehabilitation." Conference and discussion. Speakers will include Dr. Noel Harris, Dr. Joshua Bierer, Dr. E. B. Strauss, Dr. Donald Blair, Dr. Doris Odlum, and Dr. Desmond O'Neill.

Institute of Urology.—(1) At St. Peter's Hospital, Henrietta Street, London, W.C., March 22, 3.30 p.m., X Rays and Museum Specimens, by Mr. H. Rees: (2) At St. Paul's Hospital, Endell Street, London, W.C., March 22, 5 p.m., "Endoscopic Operations on the Prostate." by Mr. R. Ogier Ward.

Royal Institute of Philiosophy.—At University College (Anatomy Theatre), Gower Street, London, W.C., March 22, 7.30 p.m., "The Gates of the Future," by Professor J. W. Harvey.

Royal Institute of Public Health and Hygiene, 28, Portland Place, London, W.—March 22, 3.30 p.m., "The Social Value of Modern Physical Education." by Lieutenant-Colonel J. Edmundson.

Royal Society of Arts, John Adam Street, Adelphi, London, W.C.,—March 22, 2.30 p.m., "Chemistry as an Instrument of Culture," Pope Memorial Lecture by Professor John Read, F.R.S.

Society of Chemical Industry: Food Group.—At Burlington House, Piccadilly, London, W., March 22, 6.15 p.m., meeting of Nutrition Panel. "Jams and Some Other Spreads as Food." papers by Messrs. L. E. Campbell, Ph.D., W. Birch, R. De Giacomi, and E. R. Bransby, Ph.D.

#### Thursday

Institute of Urology.—At St. Paul's Hospital, Endell Street, London, W.C., March 23, 5 p.m., "Stricture of the Urethra," by Mr. J. E. Semple.

Medico-Legal Society.—At 26, Portland Place, London, W., March 23, 8.15 p.m., "Alcohol and the Motorist," by Dr. J. A. Goreky.

St. George's Hospital Medical School, Hyde Park Corner, London, S.W.—March 23, 4.30 p.m., "Psychiatry," lecture-demonstration by Sir Paul Mallinson.

TORQUAY AND DISTRICT MEDICAL SOCIETY.—At Torbay Hospital, March 23, 8.30 p.m., "Diseases of the Rectum and Anus and Their Treatment," by Mr. R. Marnham.

BIOCHEMICAL SOCIETY.—At Department of Biochemistry, University College, Gower Street, London, W.C., March 24, 11.30 a.m., annual general meeting. Papers will be read.

MAIDA VALE HOSPITAL FOR NERVOUS DISEASES, Maida Vale, London, W.—At Medical School, March 24, 5 p.m., Neurological Demonstration by Dr. S. Nevin.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, London, W.C.—March 24, 5 p.m., "Syphilis in the Oral Cavity." Urology Lecture by Dr. V. E. Lloyd.

ROYAL SANITARY INSTITUTE.—At University Reception Room, Main University Building, Queens Road, Bristol, March 24, 10 a.m., sessional meeting. Symposium: "Typhoid Fever—A Recent Outbreak." Papers by Dr. J. Hutton, Mr. R. Williams, D.P.A., Drs. K. Cooper and J. Macrae.

### Saturday

Sturday

St. Stephen's Hospital (Rheumatism Unit), 369, Fulham Road, London, S.W.—March 25, 10 a.m., "The Significance of the Effect of Compound E in Rheumatoid Arthritis," introductory address by Professor G. W. Pickering; 11 a.m., "Rheumatoid Disease: Its Widespread Clinical Manifestations," by Dr. Philip Ellman; 12 noon, "Modern Conception and Management of Rheumatic Fever," by Dr. E. G. L. Bywaters; 2 p.m., "Organization of a Rheumatic Unit with Special Reference to the Management of Rheumatoid Arthritis," by Dr. Francis Bach; 3 p.m., Ward Round and demonstration of methods of physical treatment, injection, and plaster technique. Rehabilitation, by Dr. Francis Bach and the Medical Registrars; 4.15 p.m., "Clinical Pathology in Gout and the Rheumatic Diseases," by Dr. A. G. Signy; 5.15 p.m., "The Radiological D'agnosis of the Rheumatic Diseases," Lantern lecture by Dr. Grace Batten.

### Sunday

Sunday

St. Stephen's Hospital (Rheumatism Unit), 369, Fulham Road, London, S.W.—March 26. 10 a.m., Ward Round with demonstration of cases, by Dr. Philip Ellman and the Medical Registrars; 11.15 a.m.. "Joint Lesions in General Medicine," by Dr. Philip Ellman; 12 noon, "The Painful Shoulder," by Mr. H. E. Harding; 2 p.m., "Orthopaedic Aspects of Rheumatic Disease and the Prevention and Treatment of Deformities," by Mr. Timbrell Fisher; 2.45 p.m., Demonstration of cases and treatment by manipulation (if cases are available), by Mr. Timbrell Fisher; 3.30 p.m., "Pain—Neurotic and Referred," by Dr. Colin Edwards; 4.30 p.m., "Psychiatric Factors in the Chronic Rheumatic Diseases," by Dr. David Shaw.

# APPOINTMENTS

BONE, ALAN W., F.R.C.S., Senior Consultant Surgeon to Stockton and Thornaby Hospital and to Sedgefield General Hospital, Newcastle-upon-Tyne Regional Hospital Board

EAST ANGLIAN REGIONAL HOSPITAL BOARD.—Senior Registrar in Gynaecology and Obstetrics in Peterborough Area, A. B. Backus, M.B., B.S., M.R.C.O.G.; Assistant Senior Medical Officer to the Board, P. J. H. Clarke, M.B., B.Ch., D.P.H., T.D.D.

# BIRTHS, MARRIAGES, AND DEATHS

# BIRTHS

BIR1HS

Ashcroft.—On March 4, 1950, at Newcastle-upon-Tyne, to Alison (née Gillespie), wife of Dr. Anthony Ashcroft, a daughter.

Doyle.—On February 21, 1950, at the Liverpool Maternity Hospital, to Margaret, wife of Mr. Richard Dovle, F.R.C.S., a daughter.

Marrow.—On March 1, 1950, at the Women's Hospital, Nottingham, to Mr. and Mrs. A. H. Marrow, a daughter—Elizabeth Sarah.

Suchett-Kaye.—On February 27, 1950, in London, to Beryl Daphne (née White), M.R.C.S., L.R.C.P., wife of A. I. Suchett-Kaye, M.D., M.R.C.P., a brother for Charles—Robert.

Thompson.—On February 27, 1950, at Southsea, to the wife of Dr. T. I.

Thompson, a daughter.

Weetch.—On March 7, 1950, at Sheffield, to Iola, wife of Robert Scott Weetch,
M.B., M.R.C.P., a daughter.

### **DEATHS**

Bailey.—On March 5, 1950, at the Purey Cust Nursing Home, Yorks, Henry Bailey, M.R.C.S., L.R.C.P., formerly of The Croft, Horsforth, Leeds. Yorks. Bisset.—On March 8, 1950, at Brookside, Nelson, New Zealand, Ernest Bisset, M.B., Ch.B., D.P.H., Lieutenant-Colonel, I.M.S., retired. Branson.—On March 5, 1950, at Bradfield Hall, Bury St. Edmunds, Suffolk, William Philip Sutcliffe Branson, C.B.E., M.D., F.R.C.P., aged 75. Cowtan.—On March 5, 1950, at his home. Sandford, Shortheath, Farnham, Surrey, Frank Cuninghame Cowtan, C.B., C.B.E., M.R.C.S., L.R.C.P., Air Vice-Marshal, retired.