

## CHILDREN'S EYES

*Diseases of Children's Eyes.* By James Hamilton Doggart, M.A., M.D.(Cantab), F.R.C.S. Second edition, revised. (Pp. 304; 211 figures, including 33 coloured plates. £2 2s.) London: Henry Kimpton. 1950.

As the only one of its kind in the English language this book serves a useful purpose; the call for a second edition so soon after the first is evidence of its appreciation both in this country and abroad. Its value is undoubted, for the ophthalmologist practising among children finds that many of his standard diagnostic methods are inapplicable. The history, so important in the assessment of visual disturbance, is second-hand; subjective tests, which form the basis of ophthalmological diagnosis, are inapplicable; and the more elaborate objective methods of examination, such as with the slit-lamp, are inapplicable. The host of congenital deformities and degenerations, many of them familial, that may occur in the eye demand special knowledge; while the dependence of the visual future of the child on the early recognition and adequate treatment of such conditions as squint places ophthalmic therapeutics among children in a category of its own. To a considerable extent it is more important that this specialized knowledge be brought to the disposal of the general practitioner and the paediatrician than to the ophthalmologist, who should already be acquainted with it, and the clarity of the exposition, the readability, and the interest of Doggart's book, as well as its avoidance of unnecessary detail and the discussion of rarer abnormalities, make it a useful guide for a wide public.

Fortunately the second edition is no longer than its predecessor, but it has been brought up to date by the inclusion of new clinical entities which have recently excited interest, such as retrolental fibroplasia. The illustrations, already good and profuse, have been improved, and the useful bibliographies have been expanded. Moreover, the technique of the production is up to the high standard we have come to expect from its publisher.

STEWART DUKE-ELDER.

## MEDICINE AND WELFARE

*The Future in Medicine.* The March of Medicine, 1949. Number XIV of the New York Academy of Medicine Lectures to the Laity. (Pp. 160. 16s.) New York: Columbia University Press. London: Geoffrey Cumberlege. 1950.

The New York Academy of Medicine Lectures to the Laity were instituted 14 years ago. This volume includes lectures on law and medicine, the endocrines, science under dictatorship, blood and man, and the criminal within us. All will be read with interest by any medical man. The lecture on "The Endocrines, Servants or Masters," is of great interest in showing the evolutionary development of the endocrine glands and the reciprocal relationship between the endocrines and the nervous system. The endocrine glands are to a large extent controlling mechanisms which have been inserted as the organism has increased in complexity. "Science Under Dictatorship," by Leo Alexander, tells the harrowing story of the road which led Nazi medicine to genocide, human experiment, and intensive research in "ktenology," or the science of killing. It was a long road, which began before the Nazi regime in the demand for euthanasia, and Leo Alexander draws two important conclusions. The first is that we launch ourselves down the descent

to Avernus once we break the Hippocratic oath, "to abstain from whatever is deleterious and mischievous, and to give no deadly medicine to anyone if asked, nor suggest any such counsel." The second is that "the killing centre is the *reductio ad absurdum* of all health planning based only on rational principles and economy, and not on humane compassion and divine law." In the modern State there is a temptation to think that what is useful is good, and to act only for the welfare of the majority. True democracy implies the realization that all men are brothers and must be treated so, however unproductive or tiresome they may be.

L J WITTS

## BOOKS RECEIVED

*Review is not precluded by notice here of books recently received*

*The Eye Manifestations of Internal Diseases.* By I. S. Tassman, M.D. 3rd ed. (Pp. 672. 84s.) London: Henry Kimpton. 1950.

*The Contribution of Surgery to Preventive Medicine.* By Sir James Learmonth, K.C.V.O., C.B.E., Ch.M., F.R.C.S.Ed. (Pp. 55. 12s. 6d.) London: Geoffrey Cumberlege. 1951.

*Lumbar Puncture and Spinal Analgesia.* By R. R. Macintosh M.A., D.M., F.R.C.S.Ed., D.A. (Pp. 149. 21s.) Edinburgh: E. and S. Livingstone. 1951.

*The Transmission of Nerve Impulses at Neuroeffector Junctions and Peripheral Synapses.* By A. Rosenblueth. (Pp. 325. 48s.) London: Chapman and Hall. 1950.

*Handbook of Antibiotics.* By A. L. Baron. (Pp. 303. 52s.) London: Chapman and Hall. 1950.

*Prince of Darkness.* By various authors. (Pp. 250. 7s. 6d.) London: Rider. 1951.

*Pavlov: A Biography.* By B. P. Eabkin. (Pp. 365. 25s.) London: Victor Gollancz. 1951.

*Physiotherapy in Obstetrics and Gynaecology.* By H. Heardman, M.C.S.P. (Pp. 228. 16s.) Edinburgh: E. and S. Livingstone. 1951.

*A Textbook of Gynaecology.* By J. Young, D.S.O., M.D., F.R.C.S.Ed., F.R.C.O.G. 8th revised ed. (Pp. 493. 40s.) London: Adam and Charles Black. 1950.

*A Textbook of Medical Conditions for Physiotherapists.* By J. E. Cash, B.A., M.C.S.P. (Pp. 350. 20s.) London: Faber and Faber. 1951.

*Psychiatric Aspects of Juvenile Delinquency.* By L. Bovet, M.D. (Pp. 90. 5s.) Geneva: World Health Organization. 1951.

*A Study of Epilepsy in its Clinical, Social, and Genetic Aspects.* By C. H. Alström. (Pp. 284. No price.) Stockholm: Einar Munksgaard. 1950.

*Specific Dyslexia.* By B. Hallgren. (Pp. 287. No price.) Stockholm: Einar Munksgaard. 1950.

*Late Prognosis in Meningococcal Meningitis.* By E. Trolle. (Pp. 310. No price.) Copenhagen: Danish Science Press. 1951.

*Die Pathogenese des rheumatischen Syndroms.* By B. Zorn. (Pp. 194. M. 9.) Jena: Gustav Fischer. 1951.

*Geschichte der Medizin im Überblick mit Abbildungen.* By T. Meyer-Steineg and K. Sudhoff. 4th ed. (Pp. 460. M. 18.) Jena: Gustav Fischer. 1950.

*De Ductus Arteriosus.* By Dr. E. Odé. (Pp. 154. Dutch fl. 8.) Leyden: A. W. Sijthoff's Uitgeversmaatschappij N.V. 1951.

*Veränderung der Reaktionslage im Krankheitsverlauf.* By Professor W. Koch. (Pp. 163. M. 14.) Berlin: Walter de Gruyter. 1951.

Professor HJALMAR HOLMGREN, whose death occurred on February 21 at the early age of 45, came of a Swedish family which has contributed many men of distinction to the medical profession. He had already come to the fore as a research worker, and was the creator of the department for experimental histology at the Karolinska Institute in Stockholm. Here he organized and directed biochemical research, devising new and improving old methods of investigation. More than 60 papers of his had been published. One of his most important contributions to research on the subject of the production of heparin by giant cells was published by him in 1937 in conjunction with Jorpes and Wilander. He also spent many years studying the rhythmical functions of the liver. His study of the variations in the fat content of the liver and other organs was published in 1936. Work on experimental endocrinology led him to the discovery of new methods for measuring hormones, and he was also an authority on tissue culture and the growth of experimental tumours.

Dr. WILLIAM JOSIAH LOWE FFRENCH, who had practised in North Lincolnshire for 30 years, died at his home in Marnhull, Dorset, on March 23, aged 84. The son of the Rev. Canon ffrench, of Shinrone, Ireland, he qualified in Dublin in 1890, being second senior medical prizeman at the Royal College of Surgeons in Ireland. After holding resident hospital appointments in England, he went into practice in Barnetby-le-Wold, where he remained until 1925. Dr. ffrench built up an impressive reputation locally, and was an ex-president of the East Yorks and North Lincs Branch of the B.M.A. and chairman of the North Lincoln Division in 1924-5. A county J.P., he took an active part in the work of the Unionist-Conservative Association of the area. In the 1914-18 war he was medical officer at the Brooklesby Hall Auxiliary Hospital and also medical officer to the R.F.C. air station at Elsham. After retiring to Dorset in 1925 he made several voyages to the Far East in troop-ships as medical officer, and at the outbreak of the second world war, at the age of 72, he was medical officer on board a ship going across the Atlantic to Trinidad during the early period of the submarine menace. From 1940 to 1947 he was civilian medical officer to the Military Hospital, Shaftesbury. Dr. ffrench was for 60 years a member of the B.M.A., and was chairman of the North Lincolnshire Division in 1924-5.

G. E. M. writes: I knew William J. Lowe ffrench for 48 years. He was always cheery, full of Irish wit, and ready to help and give his sound advice to everyone. He worked hard and never spared himself to attend his patients at any time of the day or night. He was beloved by them all, and they looked upon him not only as their doctor but their friend and adviser—in fact he was the true example of the "family doctor." He died of pneumonia after influenza, and his loss will be mourned not only by his wife and family but by his patients and many friends.

Dr. WILLIAM DUNCAN SILKWORTH, who gave much help and encouragement to the founders of Alcoholics Anonymous, died in New York on March 22 at the age of 77. He had been medical superintendent for 19 years of the Charles B. Towns Hospital for alcoholic and narcotic addiction.

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## The Services

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### NAVAL MEDICAL COMPASSIONATE FUND

A meeting of the subscribers of the Naval Medical Compassionate Fund will be held at the Medical Department of the Navy, Queen Anne's Mansions, St. James's Park, London, S.W., on Friday, April 20, at 2.30 p.m., to elect six directors of the fund.

## Medico-Legal

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### SUCCESSFUL DEFENCE OF INSANITY

[FROM OUR MEDICO-LEGAL CORRESPONDENT]

A defence on the grounds of insanity—schizophrenia—was successfully raised at Winchester Assizes on March 8 at the trial of Ivor Powell, age 18½, for the murder of his grandmother.

Powell's parents died when he was some 6 years old, and after a short time spent in a cottage home run by Bath City Council he lived with various relations. For some six months up to April, 1950, he lived with his maternal grandfather and step-grandmother, of both of whom he was extremely fond. He left them because the work was too much for his grandmother, and went to live with another aunt. On January 24, 1951, his grandfather died of a stroke. Powell was at the funeral with the rest of the family, and though undemonstrative was obviously upset. He spent a long time with his grandmother helping her on that day. At this time he was recovering from an attack of influenza and was off work.

Two days later, on January 30, he went to see his grandmother in the morning. He was with her for about an hour and a half. Then, for no reason other than that she said his grandfather had lived as long as he had because she, and not his family, had been looking after him, Powell beat his grandmother's head in with the poker. Dr. C. R. Gibson, lecturer in forensic medicine at Bristol University, who carried out the necropsy, said in evidence that for a lad of Powell's slight build and poor muscular development to have caused such terrible injuries he must have used "maniacal force." Powell then went home. Nothing unusual in his demeanour was apparently noticed by the family. The body was found two days later, and in the early morning of February 2 Powell was arrested and made a voluntary statement in which he described quite clearly what he had done, showing no worry or remorse and not appearing to appreciate the seriousness of his position.

While he was in prison on remand his whole history was explored, and he was examined by Dr. Thomas Christie, principal medical officer at Holloway Prison, in consultation with the medical officers of Bristol Prison and Winchester Prison. Powell's school reports showed that his conduct was always excellent, but that his intellectual capacity, which was originally full of promise, began to deteriorate at about the age of puberty. His final report said that, while his behaviour was almost too good, his work, though not wholly unsatisfactory, was not what it had promised to be.

His relations all found him of very unemotional temperament, with few friends and no girl friends. Though apparently a competent workman at his job, he himself said his mates at work called him a poor workman. He was quite calm and intelligently interested in his surroundings while in prison on remand, and showed no signs of apprehension. There was no family history of insanity.

Dr. Christie, founding his opinion on this history and his personal observation, gave evidence that Powell was a schizoid type. At the time of Dr. Christie's examination and at the trial he was not certifiable as insane, but Dr. Christie thought it possible that he would become certifiable as a sufferer from schizophrenia. Acute attacks of schizophrenia, which might last only a few minutes, could and often did develop suddenly, with no warning. He could find no definite signs of schizophrenia in Powell at the time of his examination, but thought it probable that he suffered from an acute attack on the morning of January 30, an attack of short duration from which he entirely recovered, reverting to his schizoid state. The savage ferocity of the assault on his grandmother was typical of attacks by schizophrenics.

Dr. Christie then considered schizophrenia in relation to the legal tests of insanity as affecting criminal responsibility—the M'Naghten Rules. Schizophrenia was a "disease of the mind" causing deterioration of the patient's whole personality, leaving him with no control over his emotions and at times no control over his speech and actions. Accordingly it produced a "defect of reason." When suffering from this the patient would know "the nature and quality of his act," but would be quite incapable of knowing "that what he did was wrong." Powell would therefore have known what he was doing when he hit his grandmother on the head with the poker, and would remember all about it afterwards, but would not know until he had recovered from his attack that what he did was wrong.

The jury duly returned the special verdict "Guilty of the act charged but insane at the time of doing the act," and Mr. Justice Byrne ordered Powell to be detained in Broadmoor. So for once doctors, lawyers, and laymen were all in agreement about schizophrenia in relation to criminal responsibility.

## Universities and Colleges

### UNIVERSITY OF CAMBRIDGE

The honorary degree of D.Sc. will be conferred on Sir John Sebastian Bach Stopford, M.D., F.R.C.P., F.R.S., Vice-Chancellor of and Professor of Experimental Neurology in the University of Manchester, on June 7.

The following medical degrees were conferred on March 17:

M.D.—T. D. Kellock, J. M. Willcox.

M.B., B.Chir.—\*P. H. Shorthouse, \*Aideen O'Brien.

\*By proxy.

### UNIVERSITY OF GLASGOW

James William Howie, M.D., Head of the Department of Pathology and Bacteriology at the Rowett Research Institute, Aberdeen, has been appointed to the Gardiner Chair of Bacteriology in the University of Glasgow. Professor Howie was educated at Robert Gordon's College, Aberdeen, and at the University of Aberdeen, where he graduated M.B., Ch.B., with honours, in 1930, proceeding M.D., with honours, in 1937. From 1938 to 1946 he was lecturer in bacteriology in the University of Aberdeen, his lectureship being interrupted by a period of war service in West Africa, where he worked on the problem of yellow fever. In 1946 he was appointed to the Rowett Research Institute and in the same year he became assistant editor of the *Journal of Pathology and Bacteriology*.

### UNIVERSITY OF EDINBURGH

The honorary degree of LL.D. will be conferred on July 6 on Benjamin Philp Watson, M.D., F.R.C.S.Ed., F.R.C.O.G., Professor Emeritus of Obstetrics and Gynaecology, Columbia University, New York, and formerly Professor of Midwifery in the University of Edinburgh.

### UNIVERSITY OF DUBLIN

#### SCHOOL OF PHYSIC, TRINITY COLLEGE

The Diploma in Gynaecology and Obstetrics has been awarded to the following successful candidates: F. A. Akerele, L. R. Ashley, W. A. G. Bishai, R. Brown, D. C. J. Carter, A. J. R. Clarke, M. Debnath, J. P. M. Droulers, W. H. D. Fairbank, S. W. Ghali, S. Haroon, S. el-D. H. Issa, S. Lourdenadin, P. C. McAuliffe, M. B. Millerick, G. E. Peters, A. Press, A. Schutz, A. R. Sen, S. Thurairenam.

The following candidates have been approved at the examination indicated:

B.A.O.—<sup>1</sup>W. Gault, <sup>1</sup>Patricia M. Leeson, <sup>1</sup>Ethel A. L. Blake, <sup>2</sup>N. Boland, <sup>2</sup>S. P. Fitz-Simon Cotton, <sup>2</sup>Phyllis E. McCready, <sup>2</sup>J. A. K. Meldrum, <sup>2</sup>J. G. Goodbody, <sup>2</sup>G. T. Nelson, <sup>2</sup>R. J. Weir, <sup>2</sup>E. Taylor, <sup>2</sup>R. D. Thornes, <sup>2</sup>Patricia M. Woolf, <sup>2</sup>T. Asuni, <sup>2</sup>E. D. Cooke, <sup>2</sup>Matilda M. Dickey, <sup>2</sup>T. D. Kimmnet, <sup>2</sup>G. J. Malseed, <sup>2</sup>J. R. Cole, <sup>2</sup>Joan M. Falkiner, <sup>2</sup>J. R. MacN. Houston, <sup>2</sup>R. King, <sup>2</sup>Elizabeth M. Senior, Margaret M. Bell, S. D. Coleman, J. O. Farinde, Edith P. Pringle, Frances J. Baker,

Marian F. Cianchi, Doreen E. Mallagh, L. Tarlo, A. S. Dewar, J. Morrow, H. G. Smith, Mary D. Brosnan, H. M. O. Brown, Sheila E. Weir, T. E. W. Winckworth, Ethel P. Cole, Aileen F. Smith, Ruth M. Ransom, Audrey M. M. Fair, W. A. Beatty, K. W. M. Harbord, E. Ward, Iris E. Byers, Hazel Morris, L. M. Dillon, I. A. Eppel, Patricia R. Hunter, R. F. Hutchings, B. W. Withrington, J. Hunter, S. S. Faloon, H. R. B. Jack.

<sup>1</sup>With first-class honours. <sup>2</sup>With second-class honours.

### UNIVERSITY OF LONDON

The following have been appointed, or nominated for appointment or reappointment, as representatives of the University on the governing bodies indicated in parentheses: Dr. Vernon F. Hall (King's College Hospital); Dr. E. Pochin (Royal Cancer Hospital); Major-General P. H. Mitchiner (Territorial and Auxiliary Forces Association of the County of the City of London).

The following have been appointed representatives of the University on the committees of management of the following institutes of the British Postgraduate Medical Federation: *Cardiology*, Sir James Paterson Ross; *Dental Surgery*, Professor W. E. Herbert; *Dermatology*, Sir Archibald Gray; *Diseases of the Chest*, Mr. J. B. Hunter; *Laryngology and Otology*, Mr. V. E. Negus; *Obstetrics and Gynaecology*, Professor W. C. W. Nixon; *Orthopaedics*, Professor J. D. Boyd; *Psychiatry*, Professor F. R. Winton; *Urology*, Mr. P. H. Mitchiner.

The following have been recognized as teachers of the University in the subjects indicated in parentheses: *Institute of Ophthalmology*, Dr. S. Behrman (Medicine), Mr. J. D. M. Cardell, Mr. R. C. Davenport, Mr. C. L. Gimblett, Mr. A. G. Leigh, Mr. P. McG. Moffat, Mr. A. S. Philips, Mr. F. T. Ridley, and Mr. E. Wolff (Ophthalmology); *Institute of Psychiatry*, Dr. C. P. Blacker (Mental Diseases); *Institute of Laryngology and Otology*, Mr. C. Gill-Carey and Mr. G. H. Howells (Oto-rhino-laryngology); *Royal Free Hospital School of Medicine*, Dr. W. Gunn (Medicine); *Guy's Hospital Medical School*, Dr. J. N. Hunt (Physiology); *Westminster Medical School*, Mr. R. W. Raven (Surgery); *St. Thomas's Hospital Medical School*, Dr. W. W. Sargent (Mental Diseases); *Royal Dental Hospital of London School of Dental Surgery*, Dr. O. L. C. Sibley (Anaesthetics); *St. Mary's Hospital Medical School*, Dr. R. R. Wilson (Pathology). Dr. M. W. Lloyd-Owen has been granted probationary recognition as a teacher of anaesthetics at St. Mary's Hospital Medical School for two years from December, 1950.

The Board of Intermediate Medical Studies and the Board of Preliminary Medical Studies were discharged on March 31. A Board of Preclinical Studies was established on April 1, belonging to the Faculties of Medicine and Science. The personnel of the board was printed in the *University of London Gazette* of February 24 (p. 241). From April 1 the constitution of the Board of the Faculty of Medicine was amended by the addition of three representatives of the Board of Preclinical Studies, and of the Board of the Faculty of Science by the addition of two representatives. One representative will be nominated by the board to serve on the Board of Advanced Medical Studies.

Regulations have been approved for a preclinical examination being instituted for internal students entering upon medical courses in and after October, 1953. The present regulations for the first and second examinations for medical degrees will remain in force until further orders for those schools which are unable to provide the necessary courses of study under the regulations for the preclinical examination. Part 1 of the preclinical examination for internal students will be held for the first time in July, 1954.

Internal students who apply for entry to courses in medicine in and after October, 1953, will be required (a) to satisfy the minimum University entrance requirements in one of the ways provided by the regulations; (b) to satisfy the preliminary requirement for admission to the Faculty of Medicine by passing in chemistry and physics at least at ordinary level at an examination for the general certificate of education awarded by one of the approved University examining bodies.

The examination for Part II of the Academic Postgraduate Diploma in Psychological Medicine for 1951 will begin on October 22, and the closing date for the receipt of entries is October 1.

The Sanderson-Wells Prize (Senior), of the value of £20, for the best essay on "The Dietary Treatment of Hypertension," and the Sanderson-Wells Prize (Junior), of the value of £10, for the best essay on "The Comparative Merits of Animal and Vegetable Foods for Human Nutrition," are offered in 1952. Entries for the senior prize must be submitted by May 31, 1952, and for the junior prize by April 30, 1952, to the Academic Registrar, Senate House, London, W.C.1, from whom full particulars of the two prizes may be obtained.

## Wednesday

GLASGOW UNIVERSITY: DEPARTMENT OF OPHTHALMOLOGY.—April 11, 8 p.m., "*The Nature of Exophthalmos*," by Dr. K. C. Wybar.

INSTITUTE OF OPHTHALMOLOGY, Judd Street, London, W.C.—April 11, 5.30 p.m., "*The Spectral Sensitivity Curve*," by Dr. L. C. Thomson.

ROYAL INSTITUTE OF PUBLIC HEALTH AND HYGIENE, 28, Portland Place, London, W.—April 11, 3.30 p.m., "*Public Health and International Broadcasting*," by Mr. B. V. de G. Walden, Ph.D.

SOCIETY OF CHEMICAL INDUSTRY: FOOD GROUP.—At Chemical Society, Burlington House, London, W., April 11, 6.30 p.m., 20th annual general meeting. "*The Man of Taste*," by Mr. A. L. Bacharach, M.A., F.R.I.C.

## Thursday

LONDON JEWISH HOSPITAL MEDICAL SOCIETY.—At London Jewish Hospital, Stepney Green, London, E., April 12, 3 p.m., clinical meeting.

ROYAL ARMY MEDICAL COLLEGE, Millbank, London, S.W.—April 12, 5 p.m., "*The Significance of Anaemia*," by Sir Lionel Whitby.

ROYAL COLLEGE OF PHYSICIANS OF LONDON, Pall Mall East, S.W.—April 12, 5 p.m., "*Physical Exercise: Its Clinical Associations*," Lumleian Lecture by Sir Adolphe Abrahams. (See also April 10.)

●ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, London, W.C.—April 12, 5 p.m., "*Acute Pancreatitis*," by Professor Digby Chamberlain; 6.15 p.m., "*Surgery of Hypertension*," by Mr. A. Dickson Wright.

ST. ANDREWS UNIVERSITY.—At Lecture Theatre, Materia Medica Department, Medical School, Small's Wynd, Dundee, April 12, 5 p.m., "*The Embolism of Normal and of Malignant Tumour Cells*," by Professor J. S. Young.

TORQUAY AND DISTRICT MEDICAL SOCIETY.—At Newton Abbot Hospital, April 12, 4.30 p.m., clinical meeting.

## Friday

ALFRED ADLER MEDICAL SOCIETY.—At 11, Chandos Street, London, W., April 13, 8 p.m., "*Asthma in Childhood*," by Dr. Margaret Lowenfeld. Discussion to be opened by Drs. E. B. Strauss and M. G. Good.

INSTITUTE OF OPHTHALMOLOGY, Judd Street, London, W.C.—April 13, 5.30 p.m., "*Viruses in Ocular Diseases*," by Dr. C. H. Smith.

LIVERPOOL PSYCHIATRIC CLUB.—At 36, Rodney Street, Liverpool, April 13, 8 p.m., "*The Development of the Psychiatric Services*," by Dr. J. E. Howie.

MANCHESTER REGION REGISTRARS' GROUP.—At Clinical Lecture Theatre, Royal Infirmary, Manchester, April 13, 5.30 p.m., annual general meeting.

MEDICAL SUPERINTENDENTS' SOCIETY.—April 13 (1) at Liverpool Medical Institution, Mount Pleasant, Liverpool, 10 a.m., annual general meeting; (2) at Exchange Hotel, Liverpool, 7 p.m., annual dinner.

●ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, London, W.C.—April 13, 5 p.m., "*Tumours of the Innominate Bone*," by Sir Gordon Gordon-Taylor; 6.15 p.m., "*Fractures of the Shaft of the Tibia*," by Mr. F. W. Holdsworth.

WEST LONDON MEDICO-CHIRURGICAL SOCIETY.—Visit to Chelsea Physic Gardens, April 13, 5.45 p.m., demonstration by Mr. W. G. Mackenzie and talk by Dr. W. S. C. Copeman; 6.30 p.m., sherry party (tickets 5s.).

## BIRTHS, MARRIAGES, AND DEATHS

## BIRTHS

Calvert-Smith.—On March 9, 1951, at Launceston, Tasmania, to Dr. Daphne Calvert-Smith (formerly Bousfield), wife of John E. Calvert-Smith, a sister for Paul.

Clark.—On March 21, 1951, at Farnborough Hospital, Kent, to Mary Rose, wife of Dr. David H. Clark, 8, Winchester Road, Bromley, a daughter—Rosalin Mary.

Harris.—On March 21, 1951, in London, to the wife of Dr. Nigel H. Harris, a son.

Jefferson.—On March 22, 1951, at St. Mary's Hospital, Manchester, to Eirlys (formerly Hughes), wife of Antony Jefferson, F.R.C.S., a sister for Ann-Jane.

MacLeod.—On March 27, 1951, at Nuffield House, Guy's Hospital, to Joan (formerly Lewis), wife of Dr. Ian S. MacLeod, of Forest Hill, London, S.E., a daughter—Flona.

Shaw.—On March 6, 1951, at Chiswick Hospital, to Jean, wife of Richard E. Shaw, Ch.M., F.R.C.S., a daughter—Deborah.

## MARRIAGES

Wischusen—Morphy.—On March 10, 1951, at Melbourne, Australia, Peter James Wischusen to Sheila Morphy, M.B., Ch.B., of London.

## DEATHS

Albers.—On March 24, 1951, at Capetown, South Africa, Alfred Gustave August Albers, B.M., F.R.C.S.

Birch.—On March 21, 1951, at 78, London Road, Guildford, William Somerset Birch, M.C., M.R.C.S., L.R.C.P., aged 62.

Bridges.—On March 29, 1951, at Acacia Cottage, Appleford, Berks, Robert Francis Bridges, M.B., B.Ch., Lieutenant-Colonel, R.A.M.C., retired, aged 67.

## 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.

## Nylon Smalls

**Q.**—Nylon under-garments have considerable advantages for those whose work entails much travelling. Are they healthy to wear in tropical climates or in climates with a high humidity?

**A.**—At high temperatures, comfort depends to a very large extent on the evaporation of perspiration, since the loss of body-heat by convection or radiation is restricted. It is essential, therefore, that clothing should limit the removal of perspiration as little as possible and should assist in its evaporation. Perspiration which simply rolls off the body and is not evaporated at the skin surface or in the clothing does nothing to maintain comfort. When also the relative humidity of the atmosphere is high the rate of evaporation of respiration will be slowed down and it will be even more difficult to keep comfortable.

Experiments which have been carried out at the Shirley Institute, Manchester, show that an absorbent fabric produces only a slight change in the rate of evaporation of water from a surface, and that if the fabric is of sufficiently open structure the rate may be even greater than from the uncovered surface. A fabric that can retain a large amount of liquid perspiration within its structure is obviously more desirable than one capable of retaining only a little, for, after the saturation stage has been reached, additional liquid will simply drain away. Hence, for conditions under which the body produces liquid perspiration, an absorbent material of fairly open structure is desirable for next-to-the-skin garments.

Nylon fabrics may contain sizing material applied during their manufacture, and this will tend to make the material non-absorbent or even water-repellent. Moreover, when such substance has not been added, or after it has been removed by a scouring process, nylon used for clothing absorbs water less readily than some other fibres such as scoured wool or cotton. The ability of a fabric to retain water within its interstices is influenced by its structure, but for corresponding structures a nylon fabric as used in clothing will retain less water than, say, cotton or wool. A recent article in *Textile World* (1950, 100, 118) describes a new process called "nylonizing" for reducing the water-repellency of nylon fabrics, but we have had no experience of this process and cannot, therefore, comment upon its usefulness.

In addition to the liquid perspiration it is also necessary to dissipate insensible perspiration which is continuously secreted by the body even when at rest. In general, the resistance of a textile fabric to the diffusion of water vapour through it is governed by three factors—namely, the thickness of the fabric, the kind of fibre used in its construction, and the closeness of its weave. The thicker the fabric of any given material, the greater is its water-vapour resistance. The diffusion of water vapour through a fabric occurs not only through the interstices but also to an important extent through or along the fibres themselves. In very close fabrics the latter mechanism has considerable importance and may in fact become predominant. Textile fibres differ in the resistance they offer to the diffusion of water vapour through or along them, and this effect is related to how hygroscopic the fibres are—the resistance of absorbent fibres like cotton and wool is low compared with that of nylon. Hence a closely woven nylon fabric would offer rather greater resistance to the passage of water vapour through it than a closely woven cotton or wool fabric of the same thickness. However, the loose structure of the fabrics usually used for