

tion of such actions which have been successful. The reason for the increase in the number of actions brought does not lie in any change in the law; nor is it to be found in the institution of the National Health Service, which has in no way altered either the legal concept of the duty of the doctor towards his patients or the test of "general consensus of opinion in the profession" by which the legal concept is applied. The increase in actions has largely occurred since 1949, and is undoubtedly the result of the Legal Aid and Advice Act passed in that year.

Since the 1949 Act it has become financially practicable for any plaintiff, however poor, who can satisfy a committee set up under the Act that on his own version of what happened he has a *prima facie* case of negligence against a doctor or hospital, to litigate his case in the High Court. Before the 1949 Act, unless he had substantial means of his own or from some other source to support him, he had in practice no hope of litigating such an action, owing to the very heavy expense necessarily involved. Now, provided he has a *prima facie* case, the State will make up the deficit which previously would have prevented him from bringing the action, even though he may well lose it in the end.

Like many others who were largely protected before 1949 by the cost of litigation, doctors are now exposed in practice as they have always been in theory to the actions of any patients who consider that they have been injured by a breach of the doctor's duty towards them. The standard of duty is set by the medical profession itself, so that it lies in the doctor's own hands to see that, although occasionally a case will have the wrong result, substantially no injustice either to patient or to doctor will be done.

Universities and Colleges

ROYAL COLLEGE OF SURGEONS OF ENGLAND

At a meeting of the Council of the College, held on March 12, with Sir Cecil Wakeley, President, in the chair, a report of the death of Professor Johan Holst, of Oslo, an Honorary Fellow of the College, was received with deep regret.

The Hallett Prize was presented to A. T. Matheson (Cape-town) and the Handcock Prize to A. H. Tooley (King's College Hospital). The Council received reports of the renewal of the Mackenzie Mackinnon Research Fellowship of Dr. I. K. R. McMillan (St. Thomas's) and the Streatfeild Research Scholarship of Mr. A. T. Andreasen.

A Diploma of Membership was awarded to D. B. Fox (University College).

At a meeting of the Council of the College held on April 9, with Sir Cecil Wakeley, President, in the chair, Professor Reynaldo dos Santos, of Lisbon, was admitted to the Honorary Fellowship.

The following were elected Fellows of the College without examination as being medical practitioners of at least 20 years' standing: Mr. W. E. Tucker (Bermuda), Professor F. Davies (Sheffield), Mr. J. Dobson (Wigan), Mr. R. Scot Skirving (Sydney), Mr. A. E. Coates (Melbourne).

The Jacksonian Prize for 1952 was awarded to Mr. John Borrie (New Zealand), and a certificate of honourable mention was awarded to Mr. Rodney Smith (St. George's) for their essays on the surgical treatment of carcinoma of the stomach. The Council selected "Melanomas and Melanosis" as the subject for the Jacksonian Prize for 1954.

The Council received a gift of the *Conquest of Ceylon*, in three volumes, by P. de Queyroz, from the Faculty of Medicine, University of Ceylon.

Diplomas in Physical Medicine, in Ophthalmology, in Tropical Medicine and Hygiene, in Laryngology and Otolaryngology, in Industrial Health, and in Medical Radiotherapy were granted, jointly with the Royal College of Physicians of London, to the following successful candidates:

DIPLOMA IN PHYSICAL MEDICINE.—L. S. Bain, E. E. Bullock, A. B. Coyer, J. A. M. Joyce, S. Mattingly, A. P. H. Randle, Dorothy J. Roth, R. A. Shaddick, G. O. Storey.

DIPLOMA IN OPHTHALMOLOGY.—Judith MacA. Brown, R. U. Chowdhary, K. J. Dastur, J. M. Heaton, S. Itchhaporia, B. R. Jones, Mary A. C. Jones, A. T. Karsgaard, M. K. Mehra, J. Moss, M. Nawaz, C. I. Phillips, A. Samad, J. Singh, J. R. van der Merwe, Billie I. Williams, T. Wilson.

DIPLOMA IN TROPICAL MEDICINE AND HYGIENE.—I. Ahmad, Anwar-ul-Islam, T. Awuku-Asabre, A. R. O. Bakare, S. A. Biggart, E. B. Bright, G. H. Burgess, Carmel Cachia, J. E. Cranswick, R. A. Davis, S. R. A. Dodu, P. F. Doherty, I. M. Grant, C. H. Gurd, S. M. M. Haque, H. G. Hendow, C. S. Heymann, Jasmine R. Jacob, V. V. Kalbian, W. N. Laing, A. R. T. Lundie, A. D. A. Maconochie, D. E. Marmion, S. Nadesan, M. C. Peterside, Irene Rajaratnam, D. Ramadwar, S. Paul, A. W. Senft, P. Sirivorasarn, H. G. Skinner, G. J. Stott, Gladys M. Vanniasingham, A. V. A. Vethanayagam, S. Vyas, M. C. Williams, W. Williams, R. Woodward.

DIPLOMA IN LARYNGOLOGY AND OTOLARYNGOLOGY.—P. J. Damato.

DIPLOMA IN INDUSTRIAL HEALTH.—P. H. Nash.

DIPLOMA IN MEDICAL RADIOTHERAPY.—R. Finney.

Hospitals were recognized under paragraph 23 of the F.R.C.S. regulations as follows: Albert Dock Hospital, London, orthopaedic registrar, for six months; house-surgeon, for six months; *from January, 1954*, casualty and receiving-room officer. Paddington Hospital, surgical registrar; two house-surgeons, for six months. Jersey General Hospital, St. Helier, resident surgical officer, for six months (until March, 1956). Pontypool Hospital, house-surgeon, for six months. Griffithstown County Hospital, senior house officer (general surgery), for six months. Kingston Hospital, *decennial revision*, two senior house officers (orthopaedic and casualty); two senior house officers (general surgery); two house officers (general surgery), all for six months. Ipswich Borough General Hospital, *additional recognition*, junior orthopaedic registrar, for six months. Pembroke County War Memorial Hospital, Haverfordwest, *confirmation of temporary recognition*, resident surgical officer, for one year; house-surgeon, for six months. Bridge of Earn Hospital, *additional recognition*, registrar (general surgery), for six months. Birmingham Accident Hospital, *revision from January, 1954*, four resident surgical officers; six house-surgeons. Royal Hampshire County Hospital, Winchester, *additional recognition*, two house-surgeons (general surgery and ear, nose, and throat); house-surgeon (general surgery and ophthalmology), all for six months, *from January, 1954*, casualty officer, to be recognized for casualty work and not, as hitherto, for general surgery. Royal Victoria Hospital, Bournemouth, *from January, 1954*, casualty officer; orthopaedic house-surgeon. Bridgend General Hospital, *from January, 1954*, casualty house-surgeon. Chase Farm Hospital, Enfield, *from January, 1954*, casualty officer, to be recognized for casualty work and not, as hitherto, for general surgery. Dulwich Hospital, *redesignation*, "surgical registrar" to be replaced by "resident surgical officer"; *from January, 1954*, casualty officer. St. Giles's Hospital, London, *from January, 1954*, casualty officer. St. Andrew's Hospital, Bow, *from January 1954*, casualty officer. Woolwich Memorial Hospital, *redesignation*, "senior resident surgical officer" now becomes "registrar general surgery"; *from January, 1954*, casualty officer (senior house officer). Mansfield and District Hospital, *alteration to existing recognition*, omit senior house-surgeon; *from January, 1954*, two senior house officers to casualty and orthopaedic department. Royal Gwent Hospital, Newport, *from January, 1954*, two senior house officers (casualty). Northampton General Hospital, *from January, 1954*, casualty officer; *additional recognition*, fourth house-surgeon, for six months; *redesignation*, "resident surgical officer" now becomes "senior surgical registrar." Perth Royal Infirmary, *from January, 1954*, house-surgeon (casualty). Queen Mary's Hospital, Sidcup, *from January, 1954*, casualty officer. St. Nicholas Hospital, Plumstead, *from January, 1954*, first and second casualty officers. Merthyr General Hospital, resident surgical officer, house-surgeon, both for six months. St. Albans City Hospital, *confirmation of temporary recognition*, two surgical registrars, both for 12 months; two house-surgeons, both for six months. *From January, 1954*, casualty officer. Bolton Royal Infirmary, *paragraph 23c*, ear, nose, and throat, registrar. Royal Hospital, Richmond, *decennial revision*, house-surgeon, for six months. Royal Salop Infirmary, Shrewsbury, *additional recognition*, orthopaedic house-surgeon, for six months. *From January, 1954*, casualty house-surgeon. Portsmouth and Southern Counties Eye and Ear Hospital, *paragraph 23c*, ear, nose, and throat registrar; senior house officer (otolaryngology). St. Richard's Hospital, Chichester, *from January, 1954*, casualty officer. Epsom District Hospital, *revision*, increased period of recognition of resident surgical officer (surgical registrar) from six to twelve months. *From January, 1954*, casualty officer. Queen Mary's Hospital for the East End, *decennial revision*, resident surgical officer, deputy resident surgical officer, both for twelve months; two house-surgeons, each for six months. Poplar Hospital, *decennial revision*, two house-surgeons, for six months. *From January, 1954*, casualty house-surgeon. Clare Hall Hospital, Barnet, *redesignation*, registrar has now become

"senior registrar." Blackburn Royal Infirmary, *revision*, surgical registrar, for twelve months; senior house officer (general), three house officers, all for six months. *From January, 1954*, two senior house officers (orthopaedics and casualty). Queen's Park Hospital, Blackburn, *revision*, surgical registrar for twelve months; house officer (general), for six months. Dryburn Hospital, Durham, *additional recognition*, surgical registrar, for six months. City General Hospital, Gloucester, *revision*, orthopaedic registrar; orthopaedic house-surgeon, both for six months. Ballochmyle Hospital, Mauchline, *additional recognition*, two junior house officers, for six months. Birkenhead General Hospital, *from January, 1954*, two casualty officers. Reduction of period of recognition of posts already recognized from twelve to six months: two surgical registrars; orthopaedic registrar; senior house-surgeon. Chester Royal Infirmary, *from January, 1954*, casualty officer. *Redesignation*, orthopaedic registrar has been replaced by assistant orthopaedic surgeon (S.H.M.O.). Bootle Hospital, *from January, 1954*, casualty officer. Ashford County Hospital, *redesignation*, three surgical registrars become one senior registrar and two registrars (12 months); two house officers, for six months, in place of three resident junior house-surgeons, for twelve months. *From January, 1954*, third house officer to be recognized for casualty work and not, as hitherto, for general surgery. Bedford General Hospital, *revision*, period of recognition of two house-surgeons to be reduced from twelve to six months. *From January, 1954*, house-surgeon (casualty department). Dudley Road Hospital, Birmingham, *revision*, senior surgical registrar and surgical registrar, both for twelve months; three house-surgeons, for six months. *From January, 1954*, two casualty officers. Gloucestershire Royal Hospital, *from January, 1954*, casualty officer. *Revision*, period of recognition of first and second house-surgeons to be reduced from twelve to six months. Royal Surrey County Hospital, Guildford, *from January, 1954*, two casualty officers. Edgware General Hospital, *from January, 1954*, two casualty officers. Leicester Royal Infirmary, *revision*, omit one (of five) general house-surgeons. *From January, 1954*, two registrars (casualty and general surgery); senior house officer (casualty department). Bethnal Green Hospital, *from January, 1954*, casualty officer. Miller General Hospital, London, *from January, 1954*, casualty officer. Prince of Wales's General Hospital, London, *from January, 1954*, senior casualty officer. St. Alfege's Hospital, London, *from January, 1954*, casualty officer. St. James' Hospital, Balham, *from January, 1954*, two casualty officers. St. Mary Abbots Hospital, London, *from January, 1954*, casualty officer. Luton and Dunstable Hospital, *redesignation*, senior surgical registrar becomes "registrar" (12 months); senior orthopaedic registrar becomes "orthopaedic registrar," for six months. *From January, 1954*, house officer (casualty). Poole General Hospital, *from January, 1954*, casualty officer. Southlands Hospital, Shoreham-by-Sea, *from January, 1954*, orthopaedic registrar; orthopaedic house-surgeon. *Redesignation*, resident surgical officer now becomes surgical registrar (twelve months); reduction of period of recognition of house-surgeon from twelve to six months. Upton Hospital, Slough, *from January, 1954*, senior house officer (casualty). Leigh Infirmary, Wigan, *from January, 1954*, casualty officer to be recognized for casualty work and not, as hitherto, for general surgery. Royal Albert Edward Infirmary, Wigan, *from January, 1954*, casualty officer to be recognized for casualty work and not, as hitherto, for general surgery.

ROYAL COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS

At a meeting of the Council of the College, held on January 31, with the President, Mr. A. A. Gemmell, in the chair, D. C. A. Bevis, I. Donald, and I. Macdonald were awarded Leverhulme Research Scholarships for 1953.

The following were elected to the Membership of the College: D. M. Brodie, P. Bruce-Lockhart, D. S. Burris, K. G. Cockburn, S. B. Cooper, Janette G. Cowie, H. J. G. De Villiers, H. G. Dixon, Margaret M. Downes, E. M. Edwards, J. R. Elliott, A. H. Foate, G. S. Foster, A. E. Fyfe, G. H. Garfield, J. M. Gate, G. L. Gleeson, L. Goldman, N. G. Gourlay, M. Grant, R. W. Grayburn, J. M. Holmes, G. C. S. Hunter, Valentine M. Husband, Sarah I. Jacob, R. A. Kenihan, K. Khadenga, H. H. Kirk, B. V. Kyle, J. C. McCawley, J. Macpherson, J. S. McVeigh, Jean Murray-Jones, T. J. M. Myles, L. M. Norburn, E. M. O'Dwyer, S. Panchalingam, R. M. McK. Pratt, M. J. M. Solomons, W. K. Sutton, T. A. Thompson, R. S. Wurm.

ROYAL COLLEGE OF PHYSICIANS OF IRELAND

The following were admitted to the Membership of the College on February 6: G. T. L. Archer, V. T. B. Doyle, T. M. Gregg, Elinor D. U. Powell.

INFECTIOUS DISEASES AND VITAL STATISTICS

Summary for British Isles for week ending April 4 (No. 13) and corresponding week 1952.

Figures of cases are for the countries shown and London administrative county. Figures of deaths and births are for the 160 great towns in England and Wales (London included), London administrative county, the 17 principal towns in Scotland, the 10 principal towns in Northern Ireland, and the 14 principal towns in Eire.

A blank space denotes disease not notifiable or no return available.

The table is based on information supplied by the Registrars-General of England and Wales, Scotland, N. Ireland, and Eire, the Ministry of Health and Local Government of N. Ireland, and the Department of Health of Eire.

CASES in Countries and London	1953					1952				
	Eng. & Wales	Land.	Scot.	N. Ire.	Eire	Eng. & Wales	Land.	Scot.	N. Ire.	Eire
Diphtheria ..	11	1	6	1		29	5	13	0	3
Dysentery ..	423	60	89	2		592	70	67	1	2
Encephalitis, acute	10	0	0	0		6	0	0	0	
Enteric fever: Typhoid ..	6	0	1	0	4	1	0	0	0	
Paratyphoid ..	7	1	0	0		12	0	1(B)	0	
Food-poisoning ..	63	14		1		65	9		33	
Infective enteritis or diarrhoea under 2 years ..				11	7				7	12
Measles*	21,166	953	401	208	232	6,953	270	588	317	476
Meningococcal infection ..	43	6	14	0	2	38	4	32	0	3
Ophthalmia neonatorum ..	36	4	9	0		32	3	16	0	
Pneumonia†	937	72	290	22	6	801	39	400	8	4
Poliomyelitis, acute: Paralytic ..	31	2		0		10	1		0	3
Non-paralytic ..	7	1		0		2	0			
Puerperal fever§	221	27	11	0	1	268	45	17	3	
Scarlet fever	1,403	96	146	40	38	1,403	110	176	18	59
Tuberculosis: Respiratory ..			135	42				170	18	
Non-respiratory ..			29	2				30	1	
Whooping-cough ..	2,508	148	273	31	76	3,110	146	262	87	48

DEATHS in Great Towns	1953					1952				
	Eng. & Wales	Land.	Scot.	N. Ire.	Eire	Eng. & Wales	Land.	Scot.	N. Ire.	Eire
Diphtheria ..	0	0	0		0	0	0		0	0
Dysentery ..	0	0				1	0		0	
Encephalitis, acute		0			0		1			1
Enteric fever ..	0	0	0			0	0	0		
Infective enteritis or diarrhoea under 2 years ..	9	1	1	3	1	11		0	0	1
Influenza ..	52	7	7	3	1	34	4	16	0	2
Measles ..		0	0		0		0	2	0	1
Meningococcal infection ..		2	0				2			
Pneumonia ..	267	32	25	12	9	282	25		7	4
Poliomyelitis, acute	4	1		0		1	1			0
Scarlet fever ..		0	0		0		0		0	0
Tuberculosis: Respiratory ..	115	20	15	4	11	119	21	25	3	9
Non-respiratory ..		3	0	0	2		1	3	0	1
Whooping-cough ..	7	1	0	0	2		0	0	0	1
Deaths 0-1 year ..	226	28	26	15	18	257	28	33	9	14
Deaths (excluding stillbirths) ..	5,587	775	599	144	159	5,294	756	661	101	183
LIVE BIRTHS ..	7,185	1009	925	231	379	7,766	1188	863	202	381
STILLBIRTHS ..	199	28	21			199	30	29		

* Measles not notifiable in Scotland, whence returns are approximate.

† Includes primary and influenza pneumonia.

§ Includes puerperal pyrexia.