

controlled biochemical studies of Hoskins on chronic schizophrenia, the controversial work by Shagass on sedation threshold, which is still developmental, Hess's hypotheses of ergotropic and trophotropic psycho-physiological processes in animals, and he samples the sometimes conflicting studies mainly on animals in the field of psycho-pharmacology. In a continued attempt to be all-embracing

within his own uni-dimensional views he makes statements like "emotions and instinctual drives occur only in the alerted organism." Surely, the problems of dreaming apart, it is common clinical experience that patients can sometimes be helped to abreast primitive feelings by reducing their level of consciousness. Again, according to him, tranquillizers always depress mood; peptic

ulcer and hypertension could presumably never be found to co-exist on the basis of his hypothesis that one reflects vagotonic and the other sympathotonic dominance, and so on. The book closes with suggestions for further research which the author would obviously dearly like to pursue himself.

ARTHUR CRISP.

## Books Received

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

**Short History of Surgical Dressings.** By Isabelle M. Z. Elliott, F.P.S. Based on material collected by the late James Rawlings Elliott, F.P.S., D.B.A. (Pp. 118+x; illustrated. 25s.) London: Pharmaceutical Press. 1964.

**Klinik und Therapie der Vergiftungen.** By Prof. Dr. med. Sven Moeschlin. (Pp. 750+xix; illustrated. DM. 66.) Stuttgart: Georg Thieme. 1964.

**Humangenetik. Ein kurzes Handbuch in fünf Bänden.** Edited by Prof. Dr. med. P. E. Becker. Volume 2. (Pp. 663+xv; illustrated. DM. 198.) Stuttgart: Georg Thieme. 1964.

**Ocular Pharmacology and Therapeutics and Problems of Medical Management.** Edited by Samuel J. Kimura, M.D., and Ernest K. Goodner, M.D. (Pp. 267+viii; illustrated. 64s.) Oxford: Blackwell. 1963.

**Clinical Tropical Diseases.** By A. R. D. Adams and B. G. Maegraith. Third edition. (Pp. 555+x; illustrated. 63s.) Oxford: Blackwell. 1964.

**Guide to Hospital Orthopaedic Practice.** By Peter Viek, M.D., F.A.C.S., F.I.C.S., and Carole A. Mancuso, R.N., B.S.N. (Pp. 176; illustrated. 48s.) Philadelphia: F. A. Davis. 1963.

**Industrial Toxicology and Dermatology in the Production and Processing of Plastics.** By K. E. Malten and R. L. Zielhuis. (Pp. 258+xiv; illustrated. 50s.) Amsterdam, London, New York: Elsevier. 1964.

**Ocular Pathology.** By C. H. Greer. (Pp. 222+viii; illustrated. 42s.) Oxford: Blackwell. 1963.

**Selected Papers from the Institute of Cancer Research: Royal Cancer Hospital and from the Royal Marsden Hospital, 1962.** Volume 17. (Pp. 1,037+xxii; illustrated.) Inquiries to: Committee of Management of the Institute and the Board of Governors of the Royal Marsden Hospital, London. 1964.

**Genetics of Bacteria and their Viruses.** Studies in Basic Genetics and Molecular Biology. By William Hayes, M.B., Sc.D.(Dublin), F.R.C.P.I., D.P.H. (Pp. 740+xii; illustrated. 84s.) Oxford: Blackwell. 1964.

**Laboratory Animals Centre.** Collected Papers. Report of a Symposium held at Zoological Society of London, 29 May 1963. (Pp. 108; illustrated. 12s. 6d.) Obtainable from: Laboratory Animals Centre, M.R.C. Laboratories, Woodmansterne Road, Carshalton, Surrey. 1963.

**Progress in Medical Genetics.** Edited by Arthur G. Steinberg, Ph.D., and Alexander G. Bearn, M.D. Volume 3. (Pp. 266+v; illustrated. \$12.25.) New York and London: Grune & Stratton. 1964.

**Disability Evaluation and Principles of Treatment of Compensable Injuries.** By Earl D. McBride, B.S., M.D., F.A.C.S., F.I.C.S. 6th edition. (Pp. 573+xiv; illustrated. £7 10s.) Philadelphia: J. B. Lippincott. London: Pitman. 1964.

## New Southern Rhodesian Teaching Hospital

As the leader pointed out in last week's *B.M.J.* (March 21, p. 720) the dissolution of the Federation of Rhodesia and Nyasaland may seriously interfere with what was conceived as a major British contribution to the medical needs of Central Africa—the creation of a multi-racial teaching hospital and medical school in Salisbury, Rhodesia.

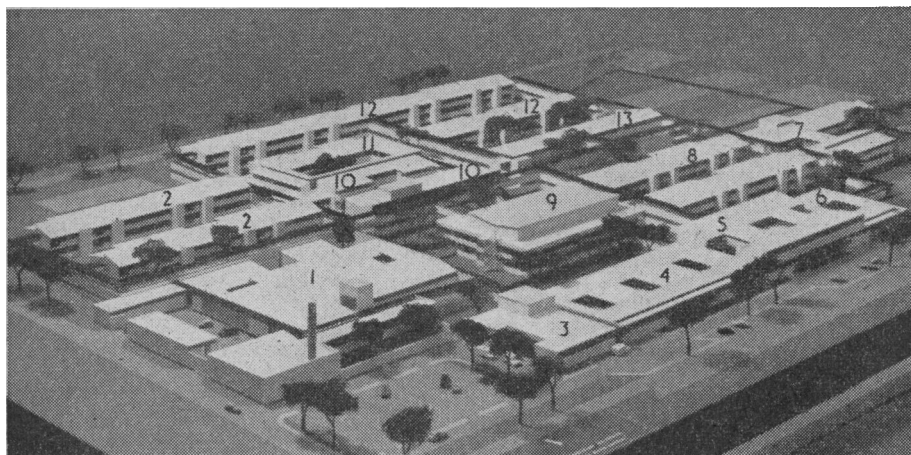
Nevertheless, plans for the hospital have already reached an advanced stage and sketch plans and models are about to be finally approved. These are the work of the consultant architects Messrs. Llewelyn Davies and Weeks, and have been scrutinized at every stage by the preclinical and clinical professors in Birmingham and Salisbury.

The new teaching hospital is to be built on the university campus at Mount Pleasant, seven miles from Harari, the African Hospital, which is to the south-west of Salisbury. There will be 345 beds available for teaching purposes—90 of them will be for medical patients, 90 for surgical, and 90 will be divided between obstetrics, paediatrics, and a special-care baby unit. This emphasis on maternity and child-health is specially suited to the needs of Rhodesia, and the education of mothers will also be a necessary part of the work. A relatively small casualty department is provided, but this includes some minor theatres and special beds for patients who need resuscitation.

The hospital is based on the principles laid down in the Nuffield studies, and, as can be seen from the model, the general plan is of the "horizontal" type, the ward blocks being only two stories high. The site is a spacious one and the long low buildings can be built quickly and economically.

Due account has been taken of the requirements of students, and the accommodation for the clinical academic staff and the pre-clinical departments in the medical school laboratories have been closely integrated. Animal housing and theatres are to be shared for experimental testing and development. The hospital has a centralized system of supply and a single disposal point. To save both money and ground certain departments will be provided elsewhere—for example, the laundry and a central sterile supply department.

If Southern Rhodesia were to provide its present four million inhabitants with a sufficient number of doctors by British standards over, say, a period of 40 years, nearly 200 medical students would have to be admitted every year. This number is out of the question at present, but the Medical Faculty has plans for admitting 50 students a year in the next year or two when building should begin.



A model of the proposed teaching hospital of the University College of Rhodesia and Nyasaland in Salisbury.

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|-------------------------------------|---------------------------------------|
| 1. Central stores; catering         | 8. Wards                              |
| 2. Wards                            | 9. Radiographic department; theatres  |
| 3. Casualty                         | 10. Premature baby and delivery units |
| 4. Out-patients                     | 11. Paediatric and obstetric block    |
| 5. Main entrance and administration | 12. Wards                             |
| 6. Gynaecological out-patients      | 13. Intensive care and isolation      |
| 7. Pathology                        |                                       |