

effects of the infra-red, visible, and ultra-violet rays, and in the present stage of our knowledge the ultra-violet are the most important. It is interesting to note that the effects of particular rays may be modified by substituting or combining other rays. Thus, an x-ray burn may be treated advantageously by ultra-violet light, and the lethal effect of ultra-violet light on infusoria may be postponed by admission of visible rays. It is probable that the combination of rays in the solar spectrum is peculiarly suited to the needs of the inhabitants of this planet, particularly in temperate regions.

Certain of the properties of the ultra-violet rays on the body have been ascertained; notably the recent discovery of their ability so to influence the blood, after due exposure of the skin, that its power to destroy disease-producing organisms may be greatly increased. This is a property of the greatest interest and value. It affords an explanation of the beneficial effect of sunlight on septic conditions. Haemobactericidal power after insolation, though commonly raised, may be occasionally lowered, and this is an additional reason why insolation should be applied under medical direction, as in certain conditions lowering of the bactericidal power of the blood may just turn the balance and result in great harm to the patient. For the discovery of this property of ultra-violet light credit must be given to Professor Leonard Hill, working with Dr. Colebrook and Dr. Eidinow. It is, I think, one of the most important discoveries made in recent years, and likely to have profound significance in therapeutics. From clinical considerations one felt that such a result must be produced, but it needed the skill of these investigators to demonstrate it. Here I would especially pay a warm tribute to the brilliant investigations of Professor Hill.

Other remarkable properties of the ultra-violet light are: its effect on the calcium metabolism of the body, assisting in that way in the repair of diseased bony tissues; its function as an essential food sparer. In a vitamin-free diet it enables life to be prolonged and disease due to vitamin deficiency, as rickets, to be cured. It has the power, too, of creating pigment in the skin. This skin pigment has a protective quality, permitting prolonged exposure to sunlight to be safely endured and utilized for the good of the bodily health. These are but examples of some of the properties ultra-violet light has been shown to possess, and this knowledge may now be applied in practical therapeutics.

The visible rays, of longer wave-length than the ultra-violet, have greater penetrative power, pass through the skin, and are absorbed by the blood, their energy being converted into heat. This fact was discovered by Sonne, who put forward the suggestion that this local heating of the blood destroys toxins or poisons produced by germs, and supported his view by a series of experiments with lethal doses of diphtheria and typhoid toxins injected into rabbits.

The infra-red rays have even greater penetrative power, and produce local congestive and thermal effects. It is unnecessary to dilate further on the properties of various rays. I have but indicated a few of the more important effects as yet discovered. What the future will disclose I know not, but much remains to be discovered. Enough has been said to show how complex is the modern science of heliotherapy, how manifold are its possibilities, how strange and unexpected its effects. Their very complexity shows that they should be employed with caution, with a definite aim, and on sound physiological principles. All these rays, be they infra-red, visible, or ultra-violet, induce inflammatory reactions, which, properly controlled in suitable subjects, may be utilized in the fight against disease.

I cannot do more than mention here the incidental effects produced by sunlight. Insolation necessitates exposure of the skin to the cold air. This in itself produces all sorts of effects which would need a special lecture to describe. Especially is this of importance in increasing metabolism—a matter of great moment in treating such a disease as surgical tuberculosis. Still more may the body metabolism be raised and the effects of the sun-bath increased if the latter follows carefully graduated sea-bathing.⁶ Ultra-violet radiation is more intense at the seaside than inland;

the sea is a great mirror reflecting the actinic rays, absorbing the heat rays, and hence intensifying the action of the former.

CONCLUSION.

To my mind, study of the so-called sun cure opens up a vista much wider and more extensive than that exhibited by mere consideration of the effects of radiant energy. It means that we have at hand a potent method of producing cell stimuli and of profoundly modifying or altering the properties of the cells of which our bodies are composed. The study of bacteriology, important and valuable as it has been, has perhaps too much obsessed us. Bacteriologists have patiently investigated the seeds producing disease, their cultural and microscopical character, their variations, even the various strains of similar micro-organisms. We can divide tubercle bacilli into human, bovine, avian, atypical, and other strains. But what about the soil into which these organisms are implanted? We do not need to be agriculturists to know that certain seeds will only grow in certain soils and under certain conditions; that if they do grow they may be profoundly modified by altering the nature of the soil or locality or climate. Have we not been rather slow in applying that knowledge to disease in man? Let us study ever more eagerly and intensively the properties of the human soil, how we may modify and alter it until at last it becomes impossible for germ diseases to be implanted and develop. The sun cure is only one indication of how this new study may be developed. Itself it is full of hope and promise, but greater still are the lessons to be learned by considering how the properties of the living cell may be modified. After all, the cell is the fortress against disease which needs to be strengthened and reinforced so that it will not only overcome invasion, but even resist and prevent infection.

One further lesson must still be learned. Sunlight is an important agent in the prevention and arrest of disease. It is a vital necessity for all, especially the growing child. Uninterrupted enjoyment of its health-giving rays should be possible for all, and every effort should be made to reduce the smoke pall which too often shrouds our great cities and obstructs the light. In its intensive use there is great promise in the employment of artificial light for therapeutic purposes. Already at Alton has been initiated a great artificial light department, where light rays of varying wave-length may be used separately or in combination to supplement or take the place of that source of all terrestrial energy, the sun. Little imagination is needed to suggest wide and general application of principles I have laid down. But while advocating the sun cure, I feel it is my duty to utter a warning that it must be wisely and carefully employed. Graduated exposures are essential, and all needful precautions should be taken, or a method of great hope and promise will inevitably fall into disrepute.

REFERENCES.

- ¹ Gauvain and de Voss: *Heliotherapy in Surgical Tuberculosis*, *British Journal of Tuberculosis*, April, 1914.
- ² Gauvain: *The Role of Heliotherapy in Surgical Tuberculosis*, *Tubercle*, June, 1920.
- ³ Leonard Hill: *Sunshine and Open Air*. Edward Arnold and Co., 1924.
- ⁴ Rollier: *Heliotherapy*. Oxford Medical Publications, 1923.
- ⁵ Luckiesh: *Ultra-Violet Radiation*.
- ⁶ Gauvain: *The Effect of Sun, Sea, and Open Air in the Treatment of Disease*, *Journal of the Royal Society of Arts*, December 21st, 1923.

Memoranda: MEDICAL, SURGICAL, OBSTETRICAL.

DIAPHRAGMATIC HERNIA OF THE STOMACH.

THE following case is interesting on account of the rarity of the condition and the possibility that trauma was the cause.

A girl, aged 2 years, fell on to the floor, striking her nose. The next day she seemed well and was playing as usual, but on the following day she began to vomit a clear, watery fluid, and subsequently spent a sleepless night. Twenty-four hours later the vomit became brown in colour, the child could not speak, but would do as she was told; she did not complain of pain, but she was constipated and the vomiting continued. She looked ill, with a peculiar staring appearance, though she had quite a good colour. The vomit was typically "coffee-ground"; she had a very rapid pulse; the temperature was normal, and the tongue clean. Very marked epigastric pulsation was present; the heart was pushed downwards and to the right, the apex beat being just below the tip of the xiphisternum. All the heart sounds were of maximum

intensity to the right of their normal positions, the apical sound being best heard just below the xiphisternum and the basal sounds over and to the right of the sternum respectively. Her abdomen was supple and she showed no signs of pain or tenderness during the examination. I could not elicit any knee-jerks, but her pupillary reflexes were normal, as were those of the upper extremities. She had a large bruise over the bridge of her nose, but there was no history of bleeding from it or from the ears or mouth. She became worse the same evening, and died early the next morning. The necropsy disclosed a diaphragmatic hernia. The stomach was in the left pleural cavity, having passed through a circular opening about half an inch in diameter to the left of the bodies of the vertebrae; it was very dilated and full of "coffee-ground" vomit, but as it was uninjured and not congested I find it difficult to explain the presence of blood in its contents. I might add that I had seen this child previously on two occasions, and I did not find the heart in an abnormal position. The coroner brought in a verdict of death due to shock, and added that he was convinced that the child would still be alive had it not been for the fall. I was unwilling to express an opinion on this point, but, on being pressed, I said it was probable that the fall was a coincidence and not the cause of the stomach passing through an opening which had always been there.

R. A. McCABE, M.R.C.S., L.R.C.P.

Rushden, Northants.

PSEUDO-HERMAPHRODITISM.

Cases of pseudo-hermaphroditism are not so very common, hence my excuse for recording the following.

A child, then aged 4 years, was admitted into a home under my care in 1914, and has been seen by me at intervals ever since. The foster-mother under whose charge the child has been told me recently that the child had always been rather a tomboy at school, and that she had lately noticed that the child did not look quite like other girls; and as she complained of a swelling in the right groin she asked me to examine her.

At a casual glance all that was noticeable was an apparent fold of skin about an inch long between the anterior part of the labia majora; on raising this was seen a small triangular-shaped area covered with mucous membrane resembling the vaginal opening of a little child. On further examination it was at once obvious that the fold of skin was a diminutive and ill formed penis, the urethral orifice being on the under surface near the free extremity.

The swelling complained of in the right groin was obviously the right testicle, and on the left side a similar but more elusive swelling suggested the left. The right testicle since my examination three days previously has come down into the right labia majora. The pubic hairs are only just beginning to grow. On rectal examination there is nothing to be felt suggestive of the uterus, and there is no sign of any breast tissue; the child's voice is becoming rather deep for a girl.

It is obvious, therefore, that this child, who has been brought up from birth as a girl, is in reality a boy, and his outward apparel will have to be changed to conform with the masculine organs which are beginning to assert themselves.

Ipswich.

JOHN GUTCH, M.D.

THE CURE OF PILES BY THE RE-EDUCATION OF THE ANAL SPHINCTER.

THE essential factor in many cases of piles is a loss of tonic contraction of the sphincter and sufficient to allow the blood in the haemorrhoidal plexus of veins to find its way through the capillaries of the mucous membrane of the anal orifice into the external (subcutaneous) veins of the anus. This statement is easily verified, for in cases of piles it is often noticeable that the tightness of the anal sphincter, when tested by the tip of a finger, is less than it should normally be.

In such cases the tendency to piles can be obviated by the simple expedient of teaching the patient voluntarily to contract the sphincter and levator ani many times in the day, and to hold them contracted for many minutes at a time, whether he be standing, walking, or sitting. A very few days, or weeks, of this oft-repeated and voluntary increase in activity will re-establish a normal habit of tonic activity, and the tendency to piles will no longer exist. The efficacy of this treatment is easily demonstrable in any case where there are external piles of any size. In such a case, after the patient has exercised the muscles for a week or so, it will be found that, as soon as the voluntary effort is made, a haemorrhoid of considerable size can be retracted far enough to be compressed by the action of the anal muscles, quite apart from the additional compression which can be exerted by the action of the glutei muscles. The continuous compression thus exercised during the day, combined with the absence of distension of the haemorrhoid (in consequence of the improved tone of the sphincter), will cause a great diminution in its size, and may ultimately lead to its disappearance.

I do not claim that all piles can be cured in this manner, but only that it is a simple method of treatment which often proves effective in curing this troublesome condition.

T. STACEY WILSON, M.D., F.R.C.P.,
Honorary Consulting Physician,
Birmingham General Hospital.

Reviews.

SUNSHINE AND OPEN AIR.

Sunshine and Open Air,¹ by Dr. LEONARD HILL, does not disappoint the expectations raised by the author's name. The book is devoted to a scientific consideration and analysis of the atmosphere and sunlight, their physiological effects and their therapeutic significance. Although a very short work, it is closely packed with scientific data; its brevity being due to the absence of redundant matter and repetition. In point of fact, readability is often sacrificed to compression, but the book will well repay the close attention it demands.

The introductory chapter concerns the Alpine winter climate and contains a useful note on the suitability of cases for Alpine treatment; it is pointed out that the measure of success depends upon the power of response of the body to the stimulating conditions. Following this is a chapter on the composition and physiological effect of high and low atmospheres. In the next section, on humidity and catarrh, the author's views may be summed up in his own words:

"The more people pollute the atmosphere with smoke and consequent fogs, cut themselves off from sunlight, shut themselves up to avoid cold, and live sedentary 'hot-house' lives, disordering their economy by over-eating and at the same time reducing the combustion of food through body heat stagnation, the more they will suffer and die from catarrhal complaints."

Most practitioners will agree with Dr. Hill when he maintains that much could be done by slaying the bogey of "catching cold" and encouraging free ventilation, which prevents hot heads and cold feet; and there is undoubtedly, as we believe, an increasing appreciation of the importance of ventilation amongst the people as a whole. In this connexion it is of interest to note that Sir Henry Gauvain, in his lecture printed at page 234 this week, states that patients responding suitably to insolation at Alton and Hayling Island are extraordinarily immune to coughs and colds.

Sunshine is considered in all its aspects. An interesting comparison is made between the lethal power on infusoria, in shallow quartz cells, of sunlight and of the mercury-vapour lamp, the effectiveness being nearly equal. The biological action of light is separately and very fully considered in the fourth chapter. It is impossible to summarize this, but reference may be made to the section on deficiency diet, rickets, and light, in which it is maintained that the ultra-violet rays can ward off or delay the evil effects of a deficient diet. Young rats and children are protected from rickety changes in the bones by a short daily exposure to the sun, the arc or the mercury-vapour lamp.

The closing chapter treats of metabolism, heat loss, and the cooling power of the air, the baneful effects of too sedentary a life, the sense of well-being created by correct habits and environment, and many another consideration of great practical value. The book teems with facts, and their practical application to human needs is not neglected; the result is a book which should be read by everyone interested in the scientific use of natural remedial measures.

CLINICAL DIAGNOSIS.

DR. LEWELLYS F. BARKER's *Clinical Diagnosis of Internal Diseases*¹ is dedicated to the late Sir William Osler by his pupil and successor in the professorial chair at the Johns Hopkins Hospital. These three bulky volumes,

¹ *Sunshine and Open Air; their Influence on Health, with Special Reference to the Alpine Climate.* By Leonard Hill, M.B., F.R.S. London: E. Arnold and Co. 1924. (Demy 8vo, pp. vii + 132; 12 figures, 8 plates. 10s. 6d. net.)

² *The Clinical Diagnosis of Internal Diseases.* By Lewellys F. Barker, M.D., LL.D., Queens, McGill. New York and London: D. Appleton and Co. 1923. (Roy. 8vo: Vol. I, pp. xvii + 978, 10 coloured plates, 290 figures; Vol. II, pp. xvii + 1063, 9 coloured plates, 204 figures; Vol. III, pp. xvii + 1039, 191 figures. £5 5s.)

Universities and Colleges.

UNIVERSITY OF CAMBRIDGE.

At a congregation held on July 17th the following medical degrees were conferred:

M.D.—O. B. Cohen.
M.B., B.Ch.—O. E. G. Smith, C. A. Lupton, T. R. Thomson, C. E. Newman, H. D. N. Miller.
M.B.—G. K. Cooper, T. M. Thomas.
B.Ch.—J. R. B. Dearden, A. H. Johns, H. W. H. Holmes, R. A. M. Scott, R. W. Smith.

UNIVERSITY OF LONDON.

UNIVERSITY COLLEGE.

MR. RICHARD J. LYTGOE has been appointed Sharpey Research Scholar in physiology. Mr. Lytgoe was Mercers' Company's Scholar at Cambridge. He was placed in the First Class of Parts I and II of the Natural Science Tripos; he has been clinical assistant to Sir John Parsons at the Royal London Ophthalmic Hospital, and demonstrator to Professor Langley in physiology, to Professor Hopkins in biochemistry, and to Professor MacAlister in anatomy. He served in the Royal Garrison Artillery during the war.

The Percy F. MacGregor Scholarship in embryology has been awarded to Mr. G. Payling Wright. He was placed in the First Class in the Honours School of Physiology at Oxford. He held the Theodore Williams Scholarship in pathology at Oxford and the Pilliter Exhibition in pathology at University College Hospital Medical School.

UNIVERSITY OF WALES.

At the congregation of the University of Wales held at Bangor on July 17th the following degrees were conferred:

M.B., B.Ch.—D. I. Bowen, D. T. Davies, Edith M. Davies, L. C. Edwards, Martha Griffith, E. D. Owen, Constance Walters.

ROYAL COLLEGE OF PHYSICIANS OF LONDON.

THE ordinary quarterly comitia of the Royal College of Physicians of London was held on July 31st, when the President, Sir Humphry Rolleston, was in the chair.

Members.

The following gentlemen, having passed the required examinations, were admitted as Members:

Richard Sydney Allison, M.D. Belfast, Walter Russell Brain, M.B. Oxon., Walter Francis Raphael Castle, D.Sc., M.D. Camb., Alexander Cawadlas, O.B.E., M.D. Paris, Philip Cyril Powter Cloake, M.D. Lond., L.R.C.P., Keith Douglas Fairley, M.D. Melb., Charles Basil Sabine Fuller, M.C., M.B. Camb., L.R.C.P., Eric Frank Gartrell, M.B. Adelaide, Frank Beddo Hobbs, M.B. Camb., L.R.C.P., Charles John Lewis, M.D. Birm., L.R.C.P., Samuel Lawrence Ludbrook, M.B. New Zealand, Arthur Arnold Osman, D.Sc., L.R.C.P., Martin Owen Raven, M.D. Oxon., L.R.C.P., Carl Ivo Streich, M.B. Adelaide, Eric Leo Susman, M.B. Sydney, Geoffrey William Theobald, M.B. Camb., L.R.C.P., James Graham Willmore, L.R.C.P.

Licences.

Licences to practise physic were granted to the following 208 candidates who had conformed to the by-laws and regulations and passed the required examinations:

*Harriet E. Acheson, B. E. Ahrens, N. J. Ainsworth, H. McC. Allen, G. Anderson, E. C. Archer, F. H. Armanious, R. N. Aston, A. E. Austen, J. M. Barnard, E. V. Barnes, A. Barnsley, J. C. Barrett, Idris M. Benjamin, T. P. Beswetherick, F. A. Bevan, H. M. Bird, R. Bolton, W. R. Bowen, A. D. Briscoe, *Eileen M. Bronson, A. C. Brown, D. M. Brown, *Doris D. Brown, R. K. Bryce, H. F. Burt, G. A. H. Buttle, *Doris M. E. Carrington, M. N. Chatterjee, F. E. Chester-Williams, *Edith I. Clark, C. K. Colwill, A. Cooke, H. A. Cooper, J. D. Craig, S. H. Currie, D. D. R. Dale, *Agnes S. Daniel, *Edith M. Davies, J. Davies, *Muriel Davies, V. H. J. Davies, S. C. M. Davison, R. Y. Dawbarn, *Ursula H. de Foubert, M. de Lacey, J. A. F. Denysen, D. M. de Silva, A. C. Dick, J. C. G. Dickinson, C. P. Donnison, R. H. Dyer, C. J. East, H. E. K. Eccles, A. B. Eddowes, J. E. Elam, *Dorothy K. Elliott, H. N. Emery, *Phyllis V. L. Epps, H. G. Estcourt, T. I. Evans, T. P. Evans, A. Farid, D. W. G. Faris, C. W. S. Fernando, W. W. J. Fernando, H. R. Fisher, F. G. France, H. J. Fuller, *Florence M. Gamble, A. G. D. Gavin, W. T. MacN. Gentie, W. H. Gervis, G. Gillett, A. Glen, I. Gluckman, P. L. Goitein, F. M. Graham, P. L. Gray, W. H. Gray, S. J. H. Griffiths, G. E. Harries, J. Hartsilver, H. Hincho, R. C. Howard, *Dorothy M. Howse, J. N. Hudson, G. C. Hughes, R. G. W. Husbands, A. G. Hyde, M. H. Jacobs, *Bessie G. Jemson, C. M. Jennings, A. J. R. F. Johnson, D. J. Jones, E. L. H. Jones, R. W. Jones, R. C. Jones, A. Jewell, D. E. Keefe, M. C. H. Kingdon, I. Kinsler, A. H. Kynaston, J. H. R. Laptain, W. C. Latham, J. J. Laws, S. A. Leader, H. Levitt, F. J. Levy, *Nancy R. Lewis, E. M. Liddle, W. R. A. Line, *Rosalie E. Lucas, H. J. McCarthy, J. McCunn, A. F. McGlashan, G. A. McKaig, A. V. Mackenzie, R. S. MacLachy, J. R. Maler, H. B. Mann, R. G. B. Marsh, D. J. Martin, F. Martin, G. A. Martin, R. Massingham, J. H. Matthews, L. M. Maybury, B. A. J. Mayo, T. F. Meyrick, K. V. Milburn, W. J. Montague, J. H. Moore, J. G. Morgan, L. Morris, C. J. Murphy, T. W. Nankivell, M. C. O'Connor, J. O. Oliver, F. C. O'Mara, *Helen E. D. E. Orstein, K. C. L. Paddle, L. J. Panting, H. R. Paterson, *Dorothy E. Peake, A. A. F. Peel, M. S. Penbrey, D. B. Phillips, L. M. J. R. Pilot, G. H. Pitt, L. Platky, H. G. Poles, A. Pool, *Gwendolen M. Pratt, J. O. Priestley, V. J. Rao, W. E. Rees, H. D. C. Rice, *Jessie L. Robb, W. A. Robb, Lillian E. Robinson, W. E. Rodgers, G. R. Rolston, F. V. Roques, E. Scott, J. A. Scott, S. J. Seurlock, E. K. Seah, J. Sellick, A. Shirley, A. D. H. Simpson, A. W. H. Smith, *Jean L. Smith, K. S. M. Smith, J. F. Southward, H. L. Sparrow, C. E. Stainthorpe, E. V. Suckling, F. S. Tait, C. Thomas, D. M. E. Thomas, O. F. Thomas, O. O. S. Thomas, W. D. R. Thompson, D. S. Todd-White, G. M. O'Toill, J. R. Tree, L. A. S. Trot, C. A. Van Rooyen, G. C. Vaughan, I. R. Vermooten, F. O. Walker, J. L. le C. Walker, H. A. Ware, H. C. Warner, R. L. Washington, H. O. Watkins-Pitchford, A. Watson, B. M. R. West, Vivian E. Whitman, *Mary A. Wiles, W. Wilkinson, R. G. Williams, V. G. Williams, T. J. Wilson, W. M. Winder, A. J. Wrigley, E. Zimmerli.

* Under the Medical Act, 1876.

Diplomas.

The diplomas indicated were granted jointly with the Royal College of Surgeons to the following successful candidates:

PUBLIC HEALTH.—H. L. Barker, J. B. Batten, W. G. Booth, L. P. Costabadi, A. Crawford, B. B. Dalal, Edith M. P. Davies, S. R. E. Davies, Helen M. Du Buisson, Mary Esslemont, Gwladys Evans, Dorothy J. L. Gallie, P. C. C. Garnham, G. McN. Ha'greaves, Marjorie C. Hawkins, N. R. Jenkins, Elspeth H. R. Livingstone, V. A. Luna, Kathleen F. Matthews, Alice D. Pocock, A. T. W. Powell, I. N. O. Price, Violet Reade, Grace Stevenson, Emma M. Store, E. Tagoe, Blanche Thomas, P. Thwaites, E. H. Wilkins, Gwendolen Wilson, J. G. Wilson.
TROPICAL MEDICINE AND HYGIENE.—E. Benjamin, R. G. Cochrane, T. Creaser, P. K. Dixon, W. Dunlop, R. J. Gittids, A. W. Grace, M. L. C. Irvine, R. B. MacGregor, H. G. D. Mathur, Crothy Mitchell, S. Nag, G. C. Ramsay, Beatrice A. S. Russell, Ruth M. Scutt, H. W. Torrance, B. B. Yodh.
PSYCHOLOGICAL MEDICINE.—J. S. Harris, W. J. T. Kimber, N. Mac eol, E. G. T. Poynder, D. Slight.
OPHTHALMIC MEDICINE AND SURGERY.—G. ApThomas, H. M. Armstrong, B. Basu, W. J. Chapman, J. M. Damany, G. Kumar, S. H. Miles, E. V. Oulton, Freda Ramsay, J. Rego, R. S. Shah, S. S. Sumner, K. N. Tandon, H. E. Variava.
LARYNGOLOGY AND OTOTOLOGY.—W. R. Beavis, J. B. Cavenagh, J. Hare, H. I. Harriner, T. G. Wynne.

The Murchison Scholarship was awarded to Mr. Norman William Snell, M.R.C.S., L.R.C.P.

College officers, members of committees, and examiners were appointed on the nomination of the President, the Council, and the Library Committee:

Censors: Dr. H. G. Turney, Dr. Farquhar Buzzard, Dr. James Calvert, Dr. Cyril Ogilvie.
Emeritus Treasurer: Sir Dyce Duckworth, Bt., M.D. Treasurer: Dr. Sidney Phillips.

Examiners.

Chemistry.—C. S. Gibson, B.Sc., R. H. A. Pimmer, D.Sc.
Physics.—W. E. Curtis, D.Sc., Sidney Russ, D.Sc.
Practical Pharmacy.—A. E. Russell, M.D., E. A. Cockayne, M.D., Philip Hamill, M.D., Nathan Mutch, M.D., W. E. Dixon, M.D.
Physiology.—J. B. Leathes, M.B., John Mellanby, M.D.
Anatomy.—T. B. Johnston, M.B.
Medical Anatomy and Principles and Practice of Medicine.—H. Morley Fletcher, M.D., A. P. Beddard, M.D., W. C. Bosanquet, M.D., J. W. Russell, M.D., C. R. Box, M.D., Sir James Purves-Stewart, K.C.M.G., M.D., Charles Bolton, M.D., L. A. Smith, M.D., Sir Charlton Briscoe, Bt., M.D., J. A. Torrens, M.D.
Midwifery and Diseases peculiar to Women.—J. P. Hedley, M.B., Sir Ewen Maclean, M.D., T. G. Stevens, M.D., J. D. Barris, M.B., H. J. P. Simson, M.B.
Public Health.—Part I: H. Wilson Hake, Ph.D. Part II: D. S. Davies, M.D.
Tropical Medicine.—Sir Percy Bassett-Smith, K.C.B. (Bacteriology), Sir Leonard Rogers, M.D. (Diseases and Hygiene of the Tropics).
Ophthalmic Medicine and Surgery.—J. Stansfield Collier, M.D.
Laryngology and Otology.—Sir Stclair Thomson.
Psychological Medicine.—Part I: E. D. Macnamara, M.D. Part II: R. Percy Smith, M.D., C. M. Hinds Howell, M.D.

A communication was received from Mr. C. F. Rey on behalf of H.H. Tafari Makonnen, the Regent of Ethiopia, expressing his appreciation of his visit to the College and sending a commemorative medal in memory of it.

The President brought before the College the results of communications with (1) the Home Office, concerning veronal; (2) the Ministry of Health, concerning heroin: A report by Sir William Hale-White and Sir William Willcox on the question of the prohibition or the limitation of the manufacture of heroin.

The Moxon Medal was awarded to Sir Leonard Rogers, M.D., F.R.S., on the recommendation of the Council.

The adjudicators recommended that the Weber-Parkes Prize and Medal be awarded to Professor Calmette.

Dr. Sidney Martin and Sir Arthur Newsholme were re-elected Representatives on the Executive Committee of the Cancer Research Fund.

The President announced that he had appointed Sir Frederick Mott, M.D., F.R.S., to deliver the Harveyian Oration in 1925.

A report was received from the representative of the College on the General Medical Council.

After some formal College business had been transacted the President dissolved the comitia.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

AN ordinary council meeting was held on July 31st, when the President, Sir John Bland-Sutton, was in the chair.

Diplomas of Membership were granted to 208 candidates.* Diplomas in Tropical Medicine and Hygiene were granted jointly with the Royal College of Physicians to seventeen candidates, and in Ophthalmic Medicine and Surgery to fourteen candidates.*

Sir W. Watson Cheyne will deliver the Lister Memorial Lecture on Thursday, May 14th, 1925.

Sir Charles Ballance was re-elected a member of the Executive Committee of the Imperial Cancer Research Fund.

ROYAL COLLEGE OF SURGEONS IN IRELAND.

THE following candidates have been approved at the examinations indicated:

PRIMARY FELLOWSHIP.—T. G. Wilson.
FINAL FELLOWSHIP.—J. D. Cherry, Majorie F. Sibthorpe, J. Teban.

CONJOINT BOARD IN SCOTLAND.

THE following have passed the final examination and have been admitted L.R.C.P.Ed., L.R.C.S.Ed., and L.R.F.P.S. Glasg.:

Amy B. R. A. Perriton, A. H. Forman, M. A. Watson, E. N. Jamieson, M. M. Tannahill, C. C. Robson, V. G. C. Menon, P. Murray, H. V. Ritchie-McKinley, C. F. Deutrom, W. A. Ekanayake, S. B. Jones.

* The names are printed in the report of the comitia of the Royal College of Physicians published in the preceding column.

H. Amarasinghe, Mary C. Semple, J. Donnelly, O. H. D. Oliver, S. Thambipillai, A. Menzies, R. S. Caldwell, M. Goldberg, E. S. Greaves, J. H. MacAlpice, S. N. Bandyopadhyay, J. M. Anderson, S. Leverson, A. E. Coyne, J. G. O'Keefe, D. M. Safwat, J. F. Sweeney, G. M. Rose, D. T. Gemmell, C. Campbell, V. Bell, D. M. Gray, D. R. Paterson, and H. Schulgasser.

The following candidates have been approved at the examination indicated:

FINAL EXAMINATION.—Medicine: B. S. Jayawardena, F. El-Ahmadi, N. T. Yusif, H. A. Newton, H. H. James, N. Wren, G. H. Tarras, P. A. M. Jayawardene, J. E. Israel, T. J. Muir, and N. Ampalavanar. **Surgery:** B. S. Jayawardena, Molly F. Churcher, H. H. James, J. Kirkness, G. H. Tarras, A. Vasudev, E. S. Brohier, D. Stewart, J. P. Subramaniam, and N. Ampalavanar. **Midwifery:** E. A. M. McKinney, P. Groarke, T. G. S. Harkness, F. El-Ahmadi, J. T. Smith, D. S. Middleton, Molly F. Churcher, N. Wren, R. F. Pagnam, J. M. Rutherford, J. E. Israel, V. B. van Dort, E. S. Brohier, and D. Stewart. **Medical Jurisprudence:** Winifred G. Price, D. B. Cruickshank, C. A. Basil, T. W. Chapman, F. Blackie, A. G. Cruickshank, J. F. Wallace, H. B. Martin, G. McCracken, W. J. Ledgerwood, J. B. Hutchison, W. W. Crawford, J. Lees, P. Henry, I. Michaelson, Eliza Bell, J. T. M. Symington, H. S. Kent, J. O. Shiach, Jessie R. Bruce, A. F. Chisholm, E. G. Douglas, T. M. Ormiston, J. M. Coutts, G. B. Buract, Catherine Miller, A. A. F. Shepherd, D. B. Craig, J. W. Wylie, T. D. Gould, R. J. Snodgrass, A. J. M. Gall, C. Ismail, and J. A. Hyde.

CONJOINT BOARD IN IRELAND.

The following candidates have been approved at the examinations indicated:

FINAL PROFESSIONAL EXAMINATION.—P. M. Banim, T. G. Boyle, Dorothy E. Campbell, E. J. Daly, W. O. Dunwoody, T. T. W. Eaton, V. D. Gordon, Attracta Halpenny, A. Heron, J. J. Hogan, J. A. Kennedy, G. A. Moorhead, W. McCurry, A. S. ff. O'Carroll, E. Orr, F. R. O'Shiel, Muriel V. Prentice, J. Shiel, R. A. McE. B. Simpson, A. W. P. Smyth, M. J. Walsh.
D.P.H.—W. E. R. Dimond, W. H. Smith.

SOCIETY OF APOTHECARIES OF LONDON.

The following candidates have passed in:

SURGERY.—W. B. Arnold, K. R. Chaudhri, C. E. Donaldson, R. Hare.
MEDICINE.—H. P. Burns, J. C. C. Langford, J. H. Morris (Section I).
FORENSIC MEDICINE.—J. O. W. Bland, J. C. C. Langford.
MIDWIFERY.—H. L. Bernstein, J. L. Hopkins, G. L. W. Iredale, J. de V. Maingard.

The Diploma of the Society has been granted to Messrs. W. B. Arnold, H. P. Burns, K. R. Chaudhri, C. E. Donaldson, R. Hare.

The Services.

Major-General S. Guise Moores, C.B., C.M.G., R.A.M.C.(ret.), has been appointed house-governor and medical superintendent of the Osborne Convalescent Home for officers of the Navy, Army, Air Force, and Indian Army, on the retirement of Surgeon-Lieut.-Colonel Sir W. R. Crooke-Lawless, K.C.V.O., C.B., C.I.E., M.D.

DEATHS IN THE SERVICES.

Lieut.-Colonel Morgan David O'Connell, R.A.M.C.(ret.), died in Dublin on June 3rd. He was born at Kilmallock on May 13th, 1855, and educated in the medical school of the Royal Irish College of Surgeons, taking the L.R.C.S.I. in 1875, and the L.K.Q.C.P. in 1876. He entered the army as surgeon on August 4th, 1878, became lieutenant-colonel after twenty years' service, and retired on August 15th, 1903. He served in the Sudan campaign of 1885, at Suakin, receiving the Egyptian medal and the Khedive's bronze star; and in the South African war in 1899-1902, when he was in charge of a general hospital, with the rank of colonel; he took part in operations in Cape Colony and in the Orange River Colony, and received the Queen's and King's medals, with two clasps to each. He was re-employed during the recent great war, from January 1st, 1915. He was the author of a work entitled *Climate and Aque*, published in 1909.

Major Patrick Ambrose McCarthy, I.M.D., died in the General Hospital, Calcutta, on May 15th, aged 56. He entered the department in 1885, received a commission as lieutenant on December 26th, 1910, and attained the rank of major on December 25th, 1917. He was civil surgeon of Mogok, the ruby mines district in Burma, and at the time of his death was the senior officer but one of his department.

Dr. William Henry Simmons, late R.A.M.C., died suddenly in West Africa on June 11th, aged 29. He was the youngest son of the late Charles James Simmons and of Mrs. Simmons of Hove, and was educated at Guy's, taking the M.R.C.S. and L.R.C.P.Lond. in 1918. He entered the R.A.M.C. as a lieutenant in the Special Reserve on November 14th, 1918, just after the armistice, and became captain after a year's service. Before joining he had held the post of out-patient officer at Guy's, and subsequently those of house-surgeon of St. John's Hospital, Lewisham, and of assistant resident medical officer at the National Hospital for Consumption, Ventnor; afterwards he joined the West African Medical Staff.

Captain Hugh Michael Collins, I.M.S.(ret.), died on May 8th. He was born on October 23rd, 1890, and educated at Madras University and at the London Hospital, taking the M.R.O.S. and L.R.C.P.Lond. in 1915. Immediately afterwards he took a temporary commission as lieutenant in the R.A.M.C., and was appointed to the I.M.S. as lieutenant and temporary captain on May 30th, 1916. He was invalided two years ago. During the recent war he served in Mesopotamia, in the operations in South Kurdistan in 1919, was mentioned in dispatches in the *London Gazette* of June 15th, 1919, and February 12th, and received the O.B.E. on November 15th, 1919.

Obituary.

T. D. LISTER, C.B.E., M.D.

We regret to record the death of Dr. Thomas David Lister, C.B.E., who died, on July 30th, at his residence at Henley, aged 55. He was educated at Aske's School and Guy's Hospital, where he graduated as M.B., B.S.Lond., and obtained the diplomas M.R.C.S., L.R.C.P. in 1892. Two years later he proceeded to the degree of M.D., and in the same year became F.R.C.S. In 1900 he received the diploma of M.R.C.P. He was house-surgeon at Guy's Hospital from 1893 to 1894, and pathologist to the East London Hospital for Children from 1897 to 1900.

Dr. Lister was consulting physician for chest cases to the Prince of Wales's Hospital for Officers, Marylebone, from 1917 to 1919. In the latter year he was elected a member of the Senate of London University, and in 1920 he received the C.B.E. Whilst honorary advisory physician of the council of the National Association for the Establishment and Maintenance of Sanatoria for Workers Suffering from Tuberculosis he drafted the scheme for Benenden Sanatorium. He was the head office medical adviser of the Royal Exchange Assurance Corporation, the Friends' Provident Institution, and the North British and Mercantile Insurance Company, physician to the National Union of Teachers, consulting physician to the Post Office Sanatorium Society, and the Association of Local Government Officers, an invited member of the Panel Committee for the County of London, and of the Hospital Sunday Fund Board of Delegates. His other appointments included those of physician to the Mount Vernon Hospital and the Royal Waterloo Hospital for Children and Women. His publications included *Industrial Tuberculosis* (1910), *Sanatoria for the People* (1911), and various contributions on life assurance, children's diseases, consumption, and allied subjects. He leaves a widow, two sons, and a daughter.

Dr. W. F. MARSH JACKSON of Smethwick died on July 21st in his 83rd year. He was the son of the Rev. William Jackson, at one time vicar of St. John's, Workington, was educated at Queen's College, Birmingham, and took the diplomas of M.R.C.S.Eng. in 1868 and L.R.C.P.Edin. and L.M. in 1888. He went to Smethwick in 1864, first as assistant and then in partnership with Dr. Hicks. From 1874 to 1922 he served as certifying factory surgeon, and on his retirement from that appointment received many letters, including one from the Home Office, congratulating him upon his long and faithful service. The Volunteer movement made a strong appeal to Dr. Jackson's patriotic spirit; he was appointed honorary surgeon in 1868, and in 1892 received the Volunteer Officers' Decoration for long service. He was appointed a justice of the peace on the formation of the borough bench for Smethwick in 1901. He was also consulting medical officer of health and divisional surgeon to the county police. Prior to the proceedings at the borough police court on July 24th, the chairman spoke of the high esteem and respect in which Dr. Marsh Jackson was held by everybody in the district.

Dr. GEORGE FISHER, who died suddenly of angina pectoris, aged 78, on August 1st, was the son of George Fisher, who practised at Bawtry, Yorkshire. He received his medical education at Leeds and took the diplomas of M.R.C.S.Eng. in 1876, and the L.R.C.P.Edin. and L.M. in 1874. He served for two years as house-surgeon at the Workshop General Dispensary. After practising for two years in New Zealand, where he was surgeon to the Thames Gold Field Hospital, he returned to this country and was in practice at Shere, Surrey, until 1907, when he retired. In that year he went to live at Dorking, where he identified himself with the public life of the town, serving on the Urban Council for many years, and remaining a member until the time of his death. Dr. Fisher is survived by one son and two daughters.

The well known American psychologist, Professor STANLEY HALL, has recently died at the age of 78.

Medical News.

On August 1st, 1924, the London School of Tropical Medicine became incorporated in the London School of Hygiene and Tropical Medicine. The Director of the new school, Dr. Andrew Balfour, informs us that invitations were sent to all members of the staff of the former institution, and, so far as can be told at the moment, all these members have signified their desire to become members of the staff of the new London School of Hygiene and Tropical Medicine.

THE St. Bartholomew's Old Students' dinner will be held on Wednesday, October 1st, in the Great Hall of the hospital at 7 for 7.30 p.m., with Dr. J. H. Drysdale in the chair. The cost of the dinner is 25s. 6d. (inclusive of wine); early application should be made to Sir C. Gordon-Watson, K.B.E., 82, Harley Street, W.1.

FOLLOWING upon the resignation of Mr. J. B. Banister from the post of gynaecologist to the Prince of Wales's Hospital, Tottenham, on his appointment to Charing Cross Hospital, the governors have invited Mr. Arthur Giles, consulting gynaecologist to the hospital, to resume active work on the staff as senior gynaecologist, and have appointed Mr. Aubrey Goodwin as gynaecologist.

THE triennial meeting of the International Institute of Anthropology will be held in Prague from September 14th to 21st. It will deal with the historical and morphological aspects of anthropology, comparative ethnology, social psychology, and eugenics. Short excursions will be arranged in Bohemia and longer ones in Moravia and Slovakia.

THE French Congress of Oto-rhino-laryngology will be held at the Paris Faculty of Medicine, under the presidency of Professor Jacques of Nancy, from October 15th to 18th, when the following subjects will be discussed: (1) Posterior sinusitis and its ocular complications, introduced by Canuyt, Ramadier, and Velter; (2) Diathermy in oto-rhino-laryngology, introduced by Bourgeois, Dutheillet de Lamothe, Portmann, and Payet. Further information can be obtained from the general secretary, Dr. G. Liébault, 216, Boulevard Saint-Germain, Paris.

THE twenty-fourth French Congress of Urology will be held in Paris, under the presidency of Dr. Genouville, on October 8th, when a discussion will be opened by Drs. Rochet and Thévenot of Lyons on the bladder after nephrectomy for tuberculosis. Further information can be obtained from the general secretary, Dr. O. Pasteau, 13, avenue de Villars, Paris, VIIe.

A POST-GRADUATE course will be held in Vienna from September 29th to October 11th, dealing with modern developments in medical and surgical treatment, and from November 24th to December 6th there will be an intensive course in children's diseases. Detailed information can be obtained from Dr. A. Fischel, Dean of the University.

THE West India Red Cross Society exists to help in reducing the heavy infant mortality in the British West Indies and generally in promoting the welfare of that portion of the empire. It is affiliated to the British Red Cross Society and several institutions in various islands. It held a meeting in London on July 25th, which was addressed by Dr. Andrew Balfour, Director of the London School of Hygiene and Tropical Medicine.

SIR MARTIN CONWAY has written, and the Paris, Lyons, and Mediterranean Railway has published in English, a very well illustrated pamphlet entitled *A Week-End in the Jura*. He begins by stating that it is possible to leave Victoria Station, London, at 11 o'clock on a Friday morning, to be back there again at 7 o'clock on the following Tuesday evening, and to have enjoyed three full days of motoring through the Jura mountains. Copies of the pamphlet can be obtained (post free) from the offices of the company, 179, Piccadilly, London, W.1.

THE sixth Congrès français de Natalité will be held at Strasbourg from September 25th to 28th. It will consist of seven sections, devoted to legislation, economics, statistics, morality and education, social hygiene, dwelling houses, and agriculture respectively.

POST-GRADUATE courses on dermatology and syphiligraphy will be held at the Hôpital St. Louis, Paris, under the direction of Professor Jeanselme, commencing on October 3rd and November 3rd respectively. The fee for each course is 150 francs. A detailed programme will be sent on application to Dr. Burnier, Hôpital St. Louis, Paris.

THE issue of *Paris Médical* for July 19th, which is devoted to orthopaedic surgery, contains an article by Dr. Rosheim of Cannes on Lord Byron's club-foot illustrated by Platier's caricature.

Letters, Notes, and Answers.

ORIGINAL ARTICLES and LETTERS forwarded for publication are understood to be offered to the BRITISH MEDICAL JOURNAL alone unless the contrary be stated. Authors desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL are requested to communicate with the Financial Secretary and Business Manager, 429, Strand, W.C.2, on receipt of proof.

CORRESPONDENTS who wish notice to be taken of their communications should authenticate them with their names—not necessarily for publication.

Communications intended for the current issue should be posted so as to arrive by the first post on Monday or at latest be received not later than Tuesday morning.

ALL communications with reference to advertisements as well as orders for copies of the JOURNAL should be addressed to the Financial Secretary and Business Manager, 429, Strand, London, W.C. Attention to this request will avoid delay. Communications with reference to editorial business should be addressed to the Editor, BRITISH MEDICAL JOURNAL, 429, Strand, W.C.2.

THE telephone number of the BRITISH MEDICAL ASSOCIATION and BRITISH MEDICAL JOURNAL is Gerrard 2630 (Internal Exchange). The telegraphic addresses are:

EDITOR of the BRITISH MEDICAL JOURNAL, *Aitiology Westrand, London.*

FINANCIAL SECRETARY AND BUSINESS MANAGER (Advertisements, etc.), *Articulate Westrand, London.*

MEDICAL SECRETARY, *Medisecra Westrand, London.*

The address of the Irish Office of the British Medical Association is 16, South Frederick Street, Dublin (telegrams: *Bacillus, Dublin*; telephone 4737, Dublin), and of the Scottish Office, 6 Rutland Square, Edinburgh (telegrams: *Associate, Edinburgh*; telephone, 4361, Central).

QUERIES AND ANSWERS.

MILLSTONE FLOUR AND NATIONAL NUTRITION.

MR. E. MUIRHEAD LITTLE, F.R.C.S., replying to Dr. J. Macpherson Lawrie's question in the JOURNAL of August 2nd (p. 218), says he gets excellent bread made of stone-milled flour from Messrs. Crang and Son, 3, Thayer Street, Marylebone, W.1.

INCOME TAX.

Request for Certified Accounts.

"S. W. F." has made a return of income on the average of the three years 1921, 1922, and 1923, but has now been asked by the local inspector of taxes to supply certified copies of the accounts of the practice for 1922 and 1923.

* * The accounts requested are, we presume, statements of gross cash receipts and classified expenses for each year. Such accounts would probably be only an elaboration of the calculations which "S. W. F." no doubt prepared for himself when he calculated his average profits, and we suggest that he might make out such statements and certify them to be correct to the best of his knowledge and belief, and forward them as being a reasonable compliance with the inspector's request.

Motor Car Transactions.

"J. W. J." bought a motor car in October, 1923, value £200, when a motor cycle was taken in part exchange (£90). The value of the motor cycle at that date was £150.

* * Assuming that £150 was the cost of the cycle in the first place, the position is that "J. W. J." has improved his professional equipment and at the same time has in effect covered his renewal cost—in other words, the net outlay of £200—£90 = £110 represents (a) replacement of cycle to the extent of £60, plus (b) £50 expended on improvements. On these grounds the £60 is clearly allowable.

"MOTORIST" bought about six years ago a second-hand B. car for £130, and in 1923 replaced it by a new M.C. car at a cost of £255 less £30 received for the old car.

* * The net expenditure of £225 is in part an improvement of the equipment, seeing that the original car was a second-hand one, and the whole of the expenditure is not allowable for income tax purposes. £100 (that is, £130—£30) is allowable, and £125 represents the capital outlay.

"A. B." sold an A. J. car for £35 and purchased an O. car for £365 in replacement. An A. J. car would then have cost £475. What is the correct deduction to be made?

* * It must be remembered that as no depreciation allowance can be claimed by a professional practitioner, the deduction must be restricted to out-of-pocket expenses; the cost of replacement was, in fact, £365—£35 = £280, and "A. B." cannot claim to deduct a greater sum, even though that sum would have been allowable if he had expended it. He will be well advised, however, to bear in mind that his standard of replacement is a £475 car and not a £365 car, so that if, for instance, he were to replace his new car by one costing £475 no portion of the then cost would represent capital improvement.