

was sent out in the last annual report. Could he not help us in this direction?—I am, etc.,

LEWIS G. GLOVER,

11, Chandos Street, Cavendish Square, W.1, Oct. 23rd. Honorary Treasurer, R.M.B.F.

SIR,—It is good to see that the subject of medical benevolence is attracting more attention in your columns. Perhaps it might more correctly have been headed "The Lack of Medical Benevolence," for surely the inadequacy of support given to the leading medical charities is a blot on the profession. There are now more than 56,000 names on the *Medical Register*, and the income of the Royal Medical Benevolent Fund last year from subscriptions was £11,856. Comment upon these figures is superfluous.

The medical profession to-day provides a good living for its members, but when the cost of buying a practice, life insurance, education, and the deep dip into the banking account every few years to buy a new car are taken into account the difficulties of accumulating capital to provide for old age and the widow and orphans are obvious. From the exacting nature of our work it is inevitable that the number of those who break down in health, or die early, must be considerable. The importance of the Royal Medical Benevolent Fund having adequate funds at its disposal, with which to assist cases of necessity, is surely a duty which the profession owes to itself.

I have been impressed by three lines in Dr. Hawes's letter; he says that "in eighteen years of qualified life I have never once been personally approached and asked to subscribe to the fund." That, I believe, is the secret of the apparent apathy in the profession to the needs of the Royal Medical Benevolent Fund and other medical charities. It is the personal appeal that is necessary. What can be done is illustrated by my own experience as Charities Secretary in this Division—one of the youngest and smallest in the Association.

By personal appeal, during the five years of its existence, I have raised a sum of nearly £100 for the Royal Medical Benevolent Fund. Every practising colleague contributes, and I have rarely to ask a second time for the now recognized yearly subscription. I might add that I am careful not to make my appeal synchronize with that of the income-tax collector.

What can be done in this Division can be done in others, but the personal appeal is essential. I feel certain that it is not apathy to the needs of the less fortunate members of our profession and their dependants but the distractions of a busy life that has been the real reason for the meagre support given to our own particular charities.

The British Medical Association itself is so busy flying flags, *re* hospital policy, public medical services, and other schemes for socializing the profession, that it has little time to devote to the needs of medical charities. It would, however, do a good service to the profession if it would urge a little more vigorously upon the Divisions the necessity of having an active charities secretary. To those who are willing to undertake the task of collecting subscriptions for the Royal Medical Benevolent Fund I can promise, from personal experience, the warmest appreciation and thanks from the committee of that Fund.—I am, etc.,

W. G. HARNETT,

Charities Secretary, Barnet Division, B.M.A.
Hadley, Oct. 23rd.

SIR,—The questions with which Dr. A. J. Hawes opens his letter on this subject may be answered comprehensively in a sentence. It is apparently *not* the desire of the majority of the profession to provide decently for its own

poor. The excellent machinery of the Royal Medical Benevolent Fund is there for the purpose. In many areas there are already local secretaries appointed, who try to practise the suavity and persistence recommended by Dr. Hawes. And with what result? A generous cheque from a minority, some expressed irritation and even downright opposition from a few, and a stony unresponsiveness from the majority.

All that Dr. Hawes desires could be achieved if every medical man with a modest income subscribed a guinea yearly to the Royal Medical Benevolent Fund, well-to-do and wealthy practitioners proportionately higher. The implied reproaches, the begging letters, and the unrelieved distress of our own poor would then all vanish together. Now then, non-subscribers! Why not sit down and write that cheque now?—I am, etc.,

HONORARY LOCAL SECRETARY, R.M.B.F.

Scotland, Oct. 23rd.

Universities and Colleges

UNIVERSITY OF CAMBRIDGE

At a congregation held on October 19th the degree of Master of Arts was conferred upon the new Professor of Anatomy, Henry Albert Harris, D.Sc., M.D.Lond.

UNIVERSITY OF LONDON

A meeting of the Senate was held on October 24th, with the Vice-Chancellor (Professor L. N. G. Filon) in the chair.

Dr. L. J. Witts was appointed to the chair of medicine, and Professor Geoffrey Hadfield to the chair of pathology, at St. Bartholomew's Hospital Medical College, both from January 1st, 1935.

The following appointments to readerships (indicated in parentheses) at the British Post-Graduate Medical School, from November 1st, were also made: Dr. R. S. Aitken (medicine); Mr. Lambert Rogers (surgery); Dr. J. Chassar Moir (obstetrics and gynaecology); Dr. A. A. Miles (bacteriology); Earl J. King, Ph.D. (pathological chemistry).

Dr. Alexander Haddow was reappointed to the Laura de Saliceto Studentship.

ROYAL COLLEGE OF SURGEONS OF ENGLAND

Annual Meeting of Fellows and Members

The annual meeting of Fellows and Members will be held at the College in Lincoln's Inn Fields, W.C., on Thursday, November 15th, at 3 p.m., when a report from the Council will be presented. Fellows and Members can obtain copies of the report on application to the secretary, and can, if they so desire, have their names placed on the list of those to whom the report is sent annually. Motions to be brought forward at the meeting must be signed by the mover, or by the mover and other Fellows and Members, and must be received by the secretary not later than November 5th. A copy of the agenda will thereafter be issued to any Fellow or Member who may apply for one.

ROYAL COLLEGE OF PHYSICIANS OF LONDON

A quarterly comitia of the Royal College of Physicians of London was held on October 25th, with the President, Lord Dawson of Penn, in the chair. Dr. J. R. Charles, Dr. C. E. Lakin, and Dr. W. W. C. Topley were elected councillors. Sir Raymond Crawford was elected a representative on the Committee of Management, and Sir Comyns Berkeley a representative of the College on the Central Midwives Board.

The College decided to revise the regulations for the Licence so as to preclude the possibility of foreign medical graduates obtaining the diploma, by an indirect channel, with less than three years' clinical study in this country.

The College approved, by an overwhelming majority, a report from its special committee, which was in general agreement with the recent report of the Departmental Committee on Sterilization.

The President announced the following appointments: Dr. F. Ridehalgh, as Proffit Scholar for the Tuberculosis Survey Scheme; Dr. E. L. Middleton, as Milroy Lecturer for 1936; and William Richard Lambert Harrison, late of Epsom College, as Jenks Scholar for 1934.

Membership

The following candidates, having satisfied the Censors' Board, were admitted Members of the College:

Henry Howarth Bashford, M.D.Lond., L.R.C.P., Philip Graeme Bentlif, M.D.Camb., L.R.C.P., Stanley George Bradfield, M.B. Sydney, Ernest George Brewis, M.D.Durh., Felix Warden Brown, M.B.Oxf., Sushil Chandra Chatterjee, M.B.Calcutta, L.R.C.P., Hugh Richard Jarvis Donald, M.B.Oxf., L.R.C.P., Cyril Percy Donnison, M.D.Lond., L.R.C.P., Clarence Michael Guiney, M.B.Sydney, John Fulford Jarvis, M.B.Lond., L.R.C.P., Bhagwan Singh Khurana, M.B.Punjab, Frank Graham Lescher, M.C., M.D.Camb., L.R.C.P., Harry Stephenson Lucraft, M.D.Ed., Samuel Nevin, M.D.Belf., Carlyle Thornton Potter, M.D.McGill, Lawrence Orred Roberts, M.B.Lond., L.R.C.P., Ibrahim Shawky, Rupert Sykes, M.B.Lond., L.R.C.P., Padukotah Sreenivasachari Varadarajan, M.B.Madras, Herbert John Williams, M.D.Birm., L.R.C.P., Rupert Allan Willis, M.D.Melb., Frederick James Wright, L.R.C.P.

Licences

Licences to practice were conferred upon the following 123 candidates (including eight women) who have passed the final examination in medicine, surgery, and midwifery of the Conjoint Board, and have complied with the necessary by-laws:

A. S. Amsden, N. Angel, T. G. Armstrong, J. C. Baillie, C. R. Barker, G. Bates, D. M. Blomfield, C. H. T. Bond, A. C. E. Breach, D. M. Bressler, Margaret M. B. Carey, R. C. F. Catterall, F. B. Champion, Dora J. A. Clark, J. H. L. Conway-Hughes, T. Csató, R. H. Dale, S. M. Davidson, D. A. Davies, G. B. Davis, E. W. Dunkley, A. G. Edwards, J. K. Elliott, R. S. Ellis-Brown, E. A. Evans, R. Farncombe, A. Fearnley, S. Y. Fegetter, H. P. Fernandes, B. W. Fickling, I. Finer, C. M. Fysh, A. B. F. Gibson, N. C. Griffin, D. L. Griffiths, P. K. Guha, W. H. C. M. Hamilton, E. B. Harvey, G. R. Hawkes, C. F. Heys, J. R. Hill, R. C. Hill, A. H. Hunt, R. Hussain, F. Janus, G. O. Jelly, P. G. C. Jones, T. E. Jones-Davies, H. Kaplan, A. R. Kennedy, A. W. Khan, M. D. Kiddon, J. H. Lawrence, B. Lawson, A. P. R. Lewis, J. A. Lewis, S. Lilienfeld, G. M. Lloyd, R. Lyons, J. C. McAvoys, E. B. McDowall, J. G. Mathias, K. M. Mayall, M. L. Meade-King, B. M. Merriman, J. R. Miles, C. Mitchell, Elizabeth C. Morris, J. H. Moseley, R. F. Mowll, S. Mullick, R. M. Noordin, D. G. Oehlers, H. E. Osen, M. L. Pan, Edith A. S. Parry-Evans, H. F. Patrick, S. Paul, W. H. Philipps, Lilian M. Pickford, F. W. M. Plant, M. R. Preston, Kathleen G. Priestman, A. W. Probert, E. J. Pryn, J. Rapoport, C. Ratnayaka, J. W. Redgate, J. H. Rees, M. G. R. Robinson, J. S. Ross, L. M. Rouillard, A. J. Rouse, B. D. Sachdeva, J. I. Seidman, R. H. Shah, D. B. Shulman, C. W. T. Shuttleworth, J. A. Sidebottom, L. W. Spratt, I. K. Thomas, Nest Thomas, B. Thorne Thorne, T. G. Tregaskis, J. L. Treneman, R. C. H. Tripp, R. J. Vakil, W. Waks, P. A. Walford, H. A. Wallace, F. H. Weston, F. C. H. White, C. T. H. Whiteside, N. Whittaker, S. M. Whitteridge, C. W. K. Willard, E. G. K. Williams, T. M. Williams, W. Wilson, P. L. E. Wood, L. S. F. Woodhead, R. F. Wyatt, Winifred F. Young, R. Clarke, J. R. Dickinson.

Diplomas in Public Health were granted, jointly with the Royal College of Surgeons, to the following:

M. R. Burke, J. O. F. Davies, Joan Goodger, Margaret I. Porteous, K. Rai, A. W. Russell, A. Singh, J. T. Wybourn.

A Diploma in Gynaecology and Obstetrics was granted, jointly with the Royal College of Surgeons, to Hussein Youssif Gohar.

CONJOINT BOARD IN SCOTLAND

The following candidates have been approved at the examinations indicated:

DIPLOMA OF L.R.C.P.ED., L.R.C.S.ED., L.R.F.P. AND S.GLAS.—M. F. Schneekloth, J. L. Jackson, F. Ansbacher, M. Gruenbaum, H. Lipschutz, F. Dannheisser, F. M. Abeles, J. Levy, S. L. Iast, L. Wislicki, H. Winter, H. Davidsohn, S. James, P. Rosenthal, H. Goldschmidt, I. H. B. Ghosh, G. Friedlaender, A. B. Sternberg, F. Besser, E. Whyte, O. E. Manasse, K. H. Lepehne, P. L. Rothschild, P. V. J. Solomon, P. A. Printz, C. H. Goldmann, C. H. Straughan, G. Wolff, M. Rakofsky, D. C. L. Stevenson, M. Kraus, A. Ehrlich, W. Cohen, W. Grunstein, H. K. Rosenkranz, R. E. Elkan, J. Pulfer, L. R. Studebaker, A. B. Morrison, O. S. Kohnstamm, G. Kosak, Erika Schwabacher, T. C. A. Wilson, F. Auerbach, Else F. Meyer, A. Roskamm, R. E. Wilson, H. W. Beetham, W. Buky, F. Muller, M. E. Tausend, R. Friedlaender, H. F. D. Whitelaw, T. G. K. Bhagavat, H. Nussbaum, H. Kai-Gee Wong, F. Bernstein, F. Lewy, F. Husain, Y. Carasik.
D.P.H.—J. A. Guy, Barbara C. Welsh, J. W. Brydon, H. A. Raeburn, H. Somerville, J. Macfarlane.

SOCIETY OF APOTHECARIES OF LONDON

The following candidates have passed in the subjects indicated:

SURGERY.—I. D. R. Aubrey, G. A. Bell, W. McC. Graves-Morris, D. W. Hoodless, A. Lassman, A. G. Manley.

MEDICINE.—J. W. D. Bull, F. M. Kerry, J. A. McClintock.

FORENSIC MEDICINE.—G. A. Bell, J. A. Carter, W. McC. Graves-Morris, C. C. Joannides, O. C. John, J. C. Paterson, D. Rocyn-Jones.

MIDWIFERY.—J. H. Bentley, N. Bickford, R. Fleming, C. McK. Johnston, H. N. Levitt, A. Ponder, R. C. Sen.

The diploma of the Society has been granted to T. D. R. Aubrey, G. A. Bell, R. Fleming, A. G. Manley, and J. A. McClintock.

Obituary

Sir HAVELOCK CHARLES, Bt., G.C.V.O., LL.D., M.D.

Major-General I.M.S. (ret.)

We regret to announce that Major-General Sir Richard Henry Havelock Charles, Bt., G.C.V.O., K.C.S.I., Bengal Medical Service (retired), died in London on October 27th, aged 76.

He was born on March 10th, 1858, the sixth son of David Hughes Charles, M.D., of Cookstown, County Tyrone, and was educated at Queen's College, Cork, and University College, London, subsequently studying in Paris, Berlin, and Vienna. In 1881 he graduated M.D. with honours and gold medal, and B.Ch. in the Royal University of Ireland. He entered the I.M.S. on April 1st, 1882, passing first into the Service, and at Netley gained the Herbert prize as best man of the year, the Montefiore prize in surgery, and the Parkes gold medal in hygiene. He was, as usual, posted to military duty for the first few years, during which period he served with the Afghan Boundary Commission of 1884-6, afterwards writing a *Report on the Hospital Service of the Commission* in 1886. On his return he was appointed professor of anatomy in the Lahore Medical College; in 1894 he was transferred to the same chair in the Calcutta Medical College, and second surgeon to the Medical College Hospital, and subsequently professor of surgery and first surgeon. He became lieutenant-colonel after twenty years' service, and retired on March 20th, 1908.



In 1906 he was placed on special duty with the Prince and Princess of Wales, now Their Majesties the King and Queen, for their tour in India, and appointed physician-in-ordinary to the Prince of Wales. King George, on his accession to the throne in 1910, appointed him serjeant-surgeon to the King, an ancient post which requires the holder to attend the King when he goes on active service. He held this post till 1928, when he resigned it, and was appointed honorary serjeant-surgeon.

On his retirement Sir Havelock Charles was appointed member of the Medical Board of the India Office from December, 1907; on February 28th, 1913, he became president of the Board, and from June, 1916, also medical adviser to the Secretary of State for India. On becoming president of the Board he was promoted to the rank of major-general. He held these offices up to 1923. He had a long list of honours and titular distinctions. In 1894 he became F.R.C.S.I. In 1906 he received the honorary gold medal from the Royal College of Surgeons of England, and was created K.C.V.O. He received the G.C.V.O. in 1912, a good service pension on October 22nd, 1917, the K.C.S.I. on January 1st, 1923, and a baronetcy on January 2nd, 1928. He also received the LL.D. from Queen's University, Belfast, in 1923. He was dean of the London School of Tropical Medicine in 1916, and president of the Society of Tropical Medicine and Hygiene, and a knight of St. John of Jerusalem. He had been a member of the British Medical Association for thirty-six years. As medical adviser to the Secretary of State for India he attended the Annual Representative Meeting at Cambridge in 1920, during the discussion on naval and military business, and thanked the B.M.A. for what it

man of the subcommittee in charge of post-elementary school instruction, and took special interest in the work of evening classes, the School of Science and Art, and the public lectures in the Town Hall. He was also a member of the General Purposes, Juvenile Employment, Elementary Education, and School Attendance Subcommittees, and was for some time a governor of the Burton Endowed Schools. He gave great help to various philanthropic enterprises, and, like his father before him, was a strong and active supporter of Holy Trinity Church.

Dr. Lowe was a surgeon colonel of the old 2nd Volunteer Battalion of the North Staffordshire Regiment, and received the Volunteer Decoration. He was a vice-president of Burton St. John Ambulance Association, and put in much work on its behalf. In Freemasonry he attained Provincial Rank, and he had been Provincial Grand Master of the District in the Manchester Unity of Oddfellows. He was president of numerous sports clubs. When he left Burton he had sat on the borough bench of justices for just over twenty years, and had been a county magistrate for nearly as long. He was buried at Birchington-on-Sea, where he lived after retirement.

Dr. THOMAS NASH THOMAS died at his residence in Solva, Pembrokeshire, on October 22nd, at the age of 74. He had been a member of the British Medical Association for over forty years. He received his medical education at the London Hospital, where he was contemporary with Sir John Lynn-Thomas. After obtaining the M.R.C.S., L.R.C.P., and L.S.A. he settled down in Leicester, where he had a very large practice. So successful was he that at a comparatively young age he was able to retire and to lead the life of a country squire in his native Pembrokeshire. He farmed there on a large scale, but was not allowed to do so for long, inasmuch as his services as a doctor were soon in demand. Dr. Thomas was a master of the art of prescribing. According to the local chemists, his prescriptions were a joy to behold. He deplored the modern habit of tablet prescription. He was a man of wide experience and large sympathies, and his work in Leicester and Pembrokeshire will be long remembered. He leaves a widow, the constant companion and inspiration of his life.

We regret to announce the death, after a long illness, patiently borne, of Dr. SAMUEL JOHN COLE of Bideford, at the age of 78 years. Dr. Cole was a student at the London Hospital, and qualified M.R.C.S., L.R.C.P. in 1887. He was a Fellow of the Royal Institute of Public Health, and had been a prosector of the Royal College of Surgeons; he also occupied the post of school medical officer of the administrative county of West Suffolk. For a short time he was in practice in Pentonville, London. For many years, owing to ill-health, Dr. Cole was obliged to curtail his activities. During the war he did good work in North Devon by filling the vacancies and carrying on the practices of local medical men who were called up for war service.

The death on October 13th, at Fazakerley Sanatorium, Liverpool, after a very brief illness, of Dr. BRERETON GEORGE ELLIOTT, removes a lovable personality from the medical profession. He was the son of the late Rev. John Elliott of Armagh, a brother of Dr. John Trimble Elliott of Smithborough, Co. Monaghan, and a nephew of Colonel C. J. Trimble of Preston. Dr. Elliott had his earlier medical career in private practice in Cherrytree and Witton, Blackburn, where he founded the Blackburn Division of the St. John Ambulance Association. During the Great War he saw active service in two theatres. He had been an officer of the 5th Battalion East Lancashire Volunteers, and on the outbreak of hostilities he accompanied the East Lancashire Territorials, as they had then become, to Egypt. Thence he proceeded with them as a combatant officer to Gallipoli, where he was

promoted to the rank of major. His health becoming impaired on active service he was returned to Egypt to command a military hospital there; subsequently he served at Kimmel Camp. After the war Major Elliott served for a number of years as a resident medical officer at Fazakerley Sanatorium. In these various spheres of activity he quietly won by his kindly disposition, human sympathy, and administrative wisdom, the respect and affection of his soldiers, colleagues, and nursing staffs in hospital, and of the ex-service men, who had always in him a warm friend. Those who knew him well will always remember his quiet drollery and wit.

W. M. K.

The following well-known foreign medical practitioners have recently died. Dr. Couto, professor of clinical medicine and perpetual president of the Academy of Medicine at Rio de Janeiro, foreign associate of the Académie de Médecine of Paris; Dr. MARIO SABATUCCI, professor of the Institute of Hygiene of Rome; and Dr. CECILIA GRIERSON, the first Argentine woman doctor to be qualified (in 1889), who founded the first school for nurses in the Argentine Army and the Argentine Society for First Aid.

Medical Notes in Parliament

[FROM OUR PARLIAMENTARY CORRESPONDENT]

Both Houses of Parliament reassembled on October 30th, when the Commons discussed the Incitement to Disaffection Bill. Mr. Ramsay MacDonald promised a day to discuss the reports made by the commissioners dispatched by the Government to the distressed areas.

The Kenya Native.—On October 30th Sir PHILIP CUNLIFFE-LISTER informed Dr. O'Donovan that the Governor of Kenya had no doubt that the institution of research on the lines foreshadowed by Dr. H. L. Gordon would assist in the solution of many of the administrative, social, and political problems of the colony, though the state of the colony's finances still made it impossible for the Colonial Government to find the necessary funds. Sir Philip was considering whether there was any means by which the question could be further investigated.

London Refuse.—Sir HILTON YOUNG stated on October 30th that the Advisory Committee on London Refuse had made an interim report dealing with the disposal of house and trade refuse. The Metropolitan Boroughs Standing Joint Committee, of which the committee in question was a subcommittee, has asked for the observations of the Common Council of the City and of the metropolitan borough councils on the report.

Exhaust Fumes in Streets.—Asked to give the result of any recent investigation concerning the effect of exhaust fumes of motor vehicles in crowded thoroughfares, Mr. HORE-BELISHA told the House of Commons on October 30th that he had no information to give beyond that conveyed in a statement of July 30th.

Poor Relief in Scotland.—On September 15th, 162,142 poor persons, with 209,535 dependants, were in receipt of poor relief in Scotland. These include vagrants and persons in receipt of outdoor medical relief.

Imported Foods.—Dr. ELLIOTT announces that exporting foreign countries had agreed to reductions in their quotas for shipments of cream and condensed milk to the United Kingdom. Butter is not included in this arrangement. A measure of co-operation has been secured for regulating meat shipments to the United Kingdom till March 31st.

Slum Clearance.—At September 30th, 60,242 houses in clearance areas in England and Wales were included in clearance or compulsory purchase orders submitted for confirmation or in agreements for purchase. The total number of new dwellings approved for rehousing was 54,994, of which 26,926 had been completed, and a further 19,301 were under construction.

financially responsible for the practice and to take the profits. If, however, she interferes with the conduct of the practice or practises herself, the General Medical Council may consider him to be guilty of the offence of "covering" an unqualified person and remove his name from the *Register*. Such arrangements, according to one large defence society, do not usually work well for very long.

A locumtenent^s is the confidential agent of his employer and is bound in law, as well as in honour, to try to serve the interests of his practitioner and to maintain a good relationship with patients and the other doctors of the neighbourhood as assiduously as though he himself were the owner of the practice. He may make no profits of any kind from the work other than that which he has agreed to accept from his principal, and if he retains for himself any money given him in return for professional services, he is not only liable to pay his principal damages to the value of this unlawful profit, and the costs of the action, but may also be prosecuted under the Prevention of Corruption Act, 1906, which lays down that an agent, on pain of fine or imprisonment, may not accept for himself any profit without the knowledge of his principal. It is grossly unethical for a locumtenent to set up in practice in a place to which he has first come in that capacity, but it is only a legal wrong if he has signed a covenant binding him not to do so.

Medical News

On Tuesday, November 6th, Professor F. A. E. Crew of Edinburgh will deliver the Lloyd Roberts Lecture, on "Medicine and the Further Evolution of Society," at the Manchester Royal Infirmary.

The annual general meeting of the West Riding Association of Graduates of the University of Edinburgh will be held at the Great Northern Hotel, Leeds, on Wednesday, November 14th, at 6.45 p.m. The annual dinner will follow at 7.30. The guest of the evening will be Mr. John Wheeler Dowden. Graduates please take note of this date. Applications for further information to the honorary secretary, 33, Manor Row, Bradford.

The Glasgow University Club, London, will dine at the Café Royal, Regent Street, W., on Friday, November 23rd, at 7.30 p.m., with Professor Alexander Macphail in the chair. Any Glasgow University men who, though not members of the club, desire to attend are asked to communicate with the honorary secretaries, 62, Harley House, N.W.1.

A public lecture under the Chadwick Trust, on "Fifty Years of Public Health Progress," will be given by Dr. Matthew B. Ray at Huddersfield Technical College on Friday, November 9th, at 7.30 p.m.

A lecture on the theory and practice of contraception will be given to medical practitioners and students who have completed their gynaecological course by Dr. Gladys Cox on November 16th, at 6 p.m., at the Walworth Women's Welfare Centre, 153A, East Street, S.E.17. Demonstrations will be given on November 23rd and 30th at 6 p.m. and 7 p.m. (those attending are asked to bring rubber gloves). To cover expenses of lecture and demonstration a fee of 5s. is charged. Tickets admitting to the lecture are to be applied for in advance.

The 1934-5 session of the West Kent Medico-Chirurgical Society opened on October 12th at the Miller General Hospital with the annual general meeting. The following lectures have been arranged: November 9th, Mr. G. John Sophian, "Physiology and Pathology of Menstruation"; December 14th, Sir Humphry Rolleston, "Shifting Sands of the Architecture of Medicine"; February 8th, 1935, Dr. H. Stanley Banks, "Serum Treatment of Scarlet Fever, Diphtheria, and Measles"; March 8th, Mr. A. Lawrence Abel, "Common Diseases of the Rectum and Anal Canal." On April 12th there will be a debate on

"That Surgery is the Method of Election for the Treatment of Peptic Ulcers." For the motion, Mr. C. A. Joll, seconded by Dr. H. V. Morlock; against, Dr. Harold Pritchard, seconded by Mr. R. C. B. Ledlie.

The following lecture-demonstrations have been arranged by the South-West London Post-Graduate Association at St. James's Hospital, Ouseley Road, S.W., on Wednesdays at 4 p.m.: November 7th, Dr. W. G. Wyllie, "Pulmonary Fibrosis and Bronchiectasis in Children"; November 14th, Dr. Stanley Wyard, "Tuberculosis in Children"; November 21st, Dr. C. E. Lakin, demonstration of medical cases; November 28th, Dr. Braxton Hicks, "Some Mutual Difficulties of the Clinician and the Pathologist"; December 5th, Mr. V. Z. Cope, demonstration of surgical cases; December 12th, Mr. L. Phillips, "Some Medical Aspects of Gynaecology."

A course of three lectures on "Newer Aspects of Gastritis and its Consequences" will be given by Dr. Knud Faber, professor of medicine in the University of Copenhagen, at Guy's Hospital Medical School, London Bridge, S.E., on November 6th, 8th, and 9th, at 5 p.m. Dr. Arthur Hurst will take the chair at the first lecture. Admission free, without ticket.

The 1934-5 session of the North London Medical and Chirurgical Society opened on October 10th, when Dr. H. Letheby Tidy gave an address on some modern views on anaemia. The programme includes clinical demonstrations on November 15th, 1934, and February 14th, 1935, and the following addresses: December 14th, Dr. Rubens Wade, "Some Aspects of Anaesthesia"; January 16th, 1935, Sir William Willcox, "Common Functional Disorders of the Liver"; March 13th, Mr. Eric Lloyd, "Scoliosis."

The Cancer Hospital (Free), Fulham Road, S.W., announces that a series of lectures on cancer will be given in the lecture theatre of the hospital on Thursdays at 4 p.m. from January 3rd to April 11th, 1935, inclusive. No charge is made for attendance at the course, which is open only to medical practitioners.

A discussion on the bed-bug as a housing problem will be introduced by Mr. A. W. McKenny Hughes at a meeting of the Royal Sanitary Institute at 90, Buckingham Palace Road, S.W., on Tuesday, November 13th, at 5.15 p.m., when Lord Balfour of Burleigh will preside. The opening paper will deal with the disinfection of houses and furniture, and the prevention of infestation.

At the official opening ceremony of the West Lane Hospital Nurses' Home, Middlesbrough, on October 30th, the mayor said that the past year had been memorable, especially in regard to hospital and public health services generally, both at the Holgate Municipal Hospital and at the Poole Sanatorium, as well as at the hospital in West Lane. He paid a warm tribute to Dr. C. V. Dingle, the medical officer of health, who had worked for several years towards the fulfilment of a scheme to provide these necessary extensions.

The Fellowship of Medicine (1, Wimpole Street, W.) announces that lecture-demonstrations will be given at 11, Chandos Street, W., on November 6th and 13th at 2.30 p.m. In the series of lectures on diet and dietetics, on Wednesdays at 8.30 p.m., at 11, Chandos Street, W., Dr. E. G. B. Calvert will speak on diet of the diabetic, on November 7th, and Dr. F. W. Christie on diet of the obese and thin, on November 14th. On November 10th, at 3 p.m., there will be a special demonstration of surgical cases by Mr. C. E. Shattock, at the National Temperance Hospital, Hampstead Road, N.W. Forthcoming courses of instruction include venereal disease at the London Lock Hospital, November 12th to December 8th; gynaecology at the Samaritan Hospital, November 17th and 18th; proctology at St. Mark's Hospital, November 19th to 24th; and an evening course in rheumatism at the British Red Cross Clinic on Tuesdays and Thursdays from November 20th to December 6th. A special M.R.C.P. course in diseases of the chest will be given at the Brompton Hospital between December 17th and January 11th. A panel of teachers is available daily for individual tuition in various branches of medicine and surgery.

^s B.M.A. Handbook for the Newly Qualified, 1923, p. 11.

The first Rumanian Congress of Medical Radiology and Electrology will be held at Bucarest from November 8th to 10th under the presidency of Dr. Severeanu. The subjects for discussion will be cholecystography, x-ray diagnosis of intrathoracic tuberculosis, radiotherapy of mammary cancer, and actinotherapy of erysipelas. The general secretary is Dr. G. N. Giurea, Str. Stirber Voda 108, Bucarest.

The council of the University of Manchester has equipped a laboratory of surgical research at 20, York Place, immediately adjacent to the Royal Infirmary. Applications to work in the laboratory should be made in the first instance to Professor E. D. Telford.

The High Commissioner for India has been asked by the Indian Research Fund Association to invite applications for the post of Director of Nutritional Research at Coonoor, in the Madras Presidency. Candidates must be graduates in medicine with a wide experience of nutritional research, both in the field and in the laboratory, who have made original contributions on the subject. They must be of sound constitution, and not more than 45 years of age. A notice giving further particulars appeared in the advertisement columns of the *British Medical Journal* of October 13th (p. 50). Applications must be made on the prescribed form, copies of which can be had from the High Commissioner, India House, Aldwych, W.C.2. Completed forms must be received by November 30th.

Professor Sudhoff of Leipzig, who recently celebrated his eighty-first birthday, has resumed the editorship of the journal which is henceforward to be known as *Sudhoffs Archiv für Geschichte der Medizin und der Naturwissenschaften*, in collaboration with Professor Dr. J. D. Achelis.

A square in front of the Salpêtrière, Paris, has recently been named after the late Mme Marie Curie.

Letters, Notes, and Answers

All communications in regard to editorial business should be addressed to **THE EDITOR, British Medical Journal, B.M.A. House, Tavistock Square, W.C.1.**

ORIGINAL ARTICLES and LETTERS forwarded for publication are understood to be offered to the *British Medical Journal* alone unless the contrary be stated. Correspondents who wish notice to be taken of their communications should authenticate them with their names, not necessarily for publication.

Authors desiring REPRINTS of their articles published in the *British Medical Journal* must communicate with the Financial Secretary and Business Manager, British Medical Association House, Tavistock Square, W.C.1, on receipt of proofs. Authors over-seas should indicate on MSS. if reprints are required, as proofs are not sent abroad.

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.

The TELEPHONE NUMBER of the British Medical Association and the *British Medical Journal* is EUSTON 2111 (internal exchange, four lines).

The TELEGRAPHIC ADDRESSES are:

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The address of the Irish Office of the British Medical Association is 18, Kildare Street, Dublin (telegrams: *Bacillus, Dublin*; telephone: 62550 Dublin), and of the Scottish Office, 7, Drumsheugh Gardens, Edinburgh (telegrams: *Associate, Edinburgh*; telephone: 24361 Edinburgh).

QUERIES AND ANSWERS

Aerophagy with Meteorism

"PERPLEXED" asks for suggestions regarding a case of aerophagy in a man, aged 40, with ensuing meteorism. The condition is always worse when the patient is excited or nervous, and occasionally occurs after a long railway journey. There is marked distension of the abdomen, and intense discomfort. After a couple of hours or so the air becomes gradually expelled, per rectum. Nothing organic can be discovered.

Treatment of Ménière's Disease

"INQUIRER" writes from Northern Ireland: Could any of your readers suggest treatment for a case of Ménière's disease? The patient is a man of about 50, and has been suffering from this complaint for from three to four years. Bromides and luminal appear to have little, if any, effect on the onset of attacks.

** An annotation on this subject was published in the *Journal* of October 27th (p. 779).

Trichophyton Infection

Dr. J. F. BRISCOE (London S.W.1) writes: Tinea tonsurans in the Victorian age was a most common malady of children's heads, and if not treated promptly became an intractable complaint. The fungus in chronic cases, growing deeply, resisted ordinary medicaments. At one of our large public schools glacial acetic acid was introduced as an ideal remedy, and the acid was well rubbed in, perhaps once, or maybe twice. If it was a small patch the drug proved effective. At that period, too, short of blistering, many cases gave prolonged trouble. To-day, disease is caught so early that ringworm can be readily dispatched, since children's heads are now "drilled" at and after school hours. Moreover, in my opinion, singeing the scalp may interrupt the growing spores and the filamentary mycelium threads, and I am positive it stays baldness. Dhobi itch, and all the contagious tineas, may be treated successfully in the same routine method as tinea tonsurans. With the acetic acid, white precipitate ointment, even an application of liquor potassae, and hyposulphite of soda in tinea versicolor are remedies out of fashion which are not to be despised. Changing linen and woollen vests, and especially the pants, needs careful attention; while trousers long worn are like the old women's petticoats, needing the sterilizing chamber. To be certain of success the secret of the treatment of all the fungoid eruptions of the skin is to get your application below the epidermis.

Income Tax

Payment of Annuity

"J. B." writes: About three months ago I wrote to you about a claim for repayment of income tax by a relative to whom I pay an annuity. I would like to let you know that I followed the advice you were good enough to give me in the *British Medical Journal* for July 14th (p. 98). A reply has just come from Somerset House to the effect that they agree with the inspector that, having regard to the form of the agreement, the annuitant was not entitled to the repayments in question, but they do not think that in the circumstances they can claim a refund of the amounts overpaid. "No further application for a refund will therefore be made." May I offer my sincere thanks for your help in the matter.

Motor Car Replacement

"E. B." has had the following car transactions in 1933-4: On April 1st, 1933, he owned a 12-h.p. "A" car, written down value £41; on April 25th he sold it for £70 and bought an 18-h.p. "T" car for £295; in June he sold the "T" car for £225 and bought an "S" (new) car for £235; in November he sold that car for £90 and bought an "A" car for £30. He has been allowed £40 for the loss on the "T" car and £30 for the loss on the "S" car.

** The latter item (£30) is, of course, much less than the loss incurred on the "S" car, which was £235 - £90 = £145. The difficulty is that the allowance is not specifically for the loss on the car replaced, but is for the expenditure on the new car—to the extent of the loss incurred on the old one. As £30 only was spent on the purchase of the last car, that limits the allowance in respect of the replacement of the new "S" car to that sum.

"W. H." runs two cars; one is an 8.3-h.p. "R" car, bought second hand for £35, and he intends to sell it for, say, £15, and buy a new 9.8-h.p. "H" car for £179. What is his best course as regards income tax allowances?

** He can claim a replacement allowance of (£35 - £15 =) £20 as an expense of the year 1934. That, however, will preclude him from claiming the depreciation allowance of (£179 at 22 per cent. =) £39 for 1935-6. He can, however, claim that allowance—that is (£140 at 22 per cent. =), £21, for 1936-7, and so on for future years. When the "H" car is replaced he should claim obsolescence allowance—that is, £179 less the amount received on sale