Local News

ENGLAND AND WALES

The King's Fund

At the meeting of the Council of King Edward's Hospital Fund for London held on December 19 H.R.H. the Duke of Kent read a message from His Majesty the King, who said:

"New methods for the prevention and cure of disease entail ever-increasing expenditure. Co-ordination and cooperation must constantly be sought, and in this connexion I am sure that the Council will feel that no greater tribute could well be paid to the work which the King's Fund has tried to do than the recent splendid gift of Lord Nuffield to form a nucleus of a fund for hospitals outside the London area." The Duke of Kent in his presidential speech said that the King's Fund would this year distribute £304,000. Of this sum £43,500 had been paid in special emergency grants and an extraordinary grant of £15,000 had been made to the Westminster Hospital and a further one of £15,000 towards the building of a new hospital on the amalgamation of the Central London and Golden Square Throat, Nose and Ear Hospitals. In view of the special circumstances this year, a further distribution would be made when the hospital accounts for 1939 become available. In talking of the needs of the hospitals the Duke said: "The Government is responsible only for the cost of the beds reserved for casualties. But for the civil work, which has never stopped and is now increasing, the hospitals are dependent on voluntary contributions, and the need is all the more urgent because so many of their supporters are themselves hard hit by the war." Sir Harold Wernher, in presenting the report of the Emergency Bed Service, said that since it opened in June, 1938, 10,000 cases had been admitted to hospital through this agency. Though the Service had been closed on the outbreak of war as the staff had been seconded to the Ministry of Health for work in connexion with the casualty scheme, it had been possible to reopen it by the middle of September, and it was now in full operation and handling a steady flow of cases.

A Maternity Home for Officers' Wives

Not the least among the very deserving projects to which we are asked to give our help at this time is that of a maternity home for the wives of officers. Many officers' wives in war time are unable to meet the ordinary fees of a maternity home, and they have usually no claim upon the military maternity homes. A real need thus exists, but thanks to the generosity of Mrs. Edward Baron, who has lent Fulmer Chase, near Slough, rent and rates free for the duration of the war, the first steps have been taken to supply this need. Fulmer Chase, which stands in 230 acres of country, is being adapted to accommodate twenty-eight beds, an isolation ward with a further two beds, a labour ward, lunch and dining room, and staff quarters. There will be two resident medical officers having special experience in obstetrics, and a consultant staff, drawn from the London hospital staffs in that sector, will visit the home when required. The fee for the majority of beds will be 15 guineas for three weeks, and this will be inclusive of all medical and surgical attendances, nursing, and maintenance. There will also be provision for grants in aid of special cases. It is hoped to open Fulmer Chase for the reception of patients about January 15. Promises of sums sufficient to endow two beds for the duration have been received, but funds are urgently needed if the work of the home is to be a success. The council responsible for carrying out this project includes Sir Comyns Berkeley, Dame Louise McIlroy, Professor W. Fletcher Shaw, and Dr. Frances Huxley, and donations should be sent to Sir Comyns Berkeley, who is the honorary treasurer. Further information and forms of application for admission, etc., can be obtained from the honorary secretary, Miss L. M. Brooks, Maternity Hospital for the Wives of Officers, 60, Portland Place, W.1.

Retirements from L.C.C. Service

Dr. J. A. H. Brincker, principal medical officer in the public health department of the London County Council, is retiring at the end of the year under the age limit. The Emergency Committee of the Council, after describing Dr. Brincker's work in a full-time capacity since 1911, and in a part-time capacity for several years before that, says that his knowledge has proved invaluable and "by his retirement the Council will lose the services of one of those rare experts whom it will be difficult to replace." Dr. W. K. Knobel, a senior medical officer, is also retiring under the age limit after eighteen years in the Council's service. To him the successful development of the tuberculosis scheme in its early days was in no small measure due, and the Committee says that by his retirement the Council lose the services of an able and experienced officer.

Memorial to Dr. Mabel Campbell

By her manifold interests and her vivid, generous, and courageous personality Dr. Mabel Campbell won a unique place in the life of the North of England. She was deeply and universally beloved. There is a general desire among her many colleagues, patients, and friends to perpetuate her memory in a manner expressive of her spirit. A committee representative of her various activities has been formed to institute a memorial fund, which will be applied to some beneficent purpose in keeping with Dr. Campbell's life of service. The chairman of the committee is Professor R. B. Green, Dean of Medicine, the Medical School, King's College, Newcastle-on-Tyne, and the secretaries are Mrs. George Hall and Miss Veronica Nisbet. Anyone who wishes to contribute should send a donation to the treasurer, Dr. Freda Herbert, the Medical School, King's College, Newcastle-on-Tyne.

FRANCE

[FROM OUR CORRESPONDENT]

Settlement of Doctors' Disputes by a "Conseil de Famille"

The French doctors' Conseil de Famille is an informal gathering of medical men before whom disputes between doctors can be brought with a view to a fair and peaceful settlement. The washing of dirty linen in public and the cost of formal litigation are avoided, and the chances of a satisfactory settlement are enhanced by the esprit de corps which reigns at these friendly and conciliatory tribunals. To give a fair example of the type of case brought before the Conseil de Famille reference may be made to a dispute ventilated anonymously in Concours Médical for August 27. A village was served by two doctors and a chemist, whose partiality for one of the doctors would seem to have been offensively demonstrative. One evening a patient with a fracture of the clavicle was given a prescription by the doctor in attendance. When the prescription was taken to the chemist's house the maid said that her master was not at home; she added in the presence of four witnesses that if the prescription had been written by the other doctor the chemist might have been at home. Dr. Paul Boudin, legal adviser to Concours Médical, is of opinion that a chemist is as much within his rights in refusing to serve a potential customer as any other tradesman, with this reservation, that the practice of pharmacy being in a certain sense a monopoly the pharmacist must have some reason for his refusal more valid than a personal animosity. Were such a case to be brought before a court of law the odds are that the maid would deny that she uttered the words reported by the witnesses, and the only result to be prophesied with certainty would be a further lowering of the prestige of the medical profession. Hence Dr. Boudin's advice to the offended doctor to appeal to the local medical society, which would consult with the local pharmaceutical society in order that a conseil de famille composed of members of both societies could arbitrate.

Diphtheria 'Inoculation

At a recent meeting of the French Academy of Medicine a resolution was adopted in favour of enforcing the new law concerning compulsory inoculation against diphtheria. The need for this reform has become pressing on account of mass migrations from France's eastern frontier and Paris to other parts of the country. According to this law the prefect of a commune threatened by an outbreak of diphtheria shall be entitled to prescribe compulsory anti-diphtheria inoculation for all children from the ages of 1 to 14 years. Only an injection *de rappel* of anatoxin would be necessary for those children certified by a doctor as having already been inoculated with anatoxin against diphtheria.

War Items

French medical students who have attained a certain level in the medical curriculum and who have been called to the colours before passing their clinical examinations are to be exempted from them on fulfilling certain conditions. The dossier of every medical student will, however, be scrutinized before such exemption is given.

It is announced that a group of Belgian surgeons are organizing an ambulance service with beds for 100 to 150 surgical cases. This service, fitted out on modern lines, will be called "Ambulance Antoine Depage" in memory of the Belgian surgeon who played so important a part in the last war.

Correspondence

Treatment of War Fractures by the Closed Method

SIR,—In several of your recent issues Dr. Trueta and his supporters, who advocate closed plasters for compound fractures, and his opponents, who fear the risk of encouraging anaerobic infection, have all omitted to mention a very simple modification of technique which enables one to have the best of both worlds.

The method referred to is the use of a plaster slab round two-thirds of the circumference of the limb, attached by a circular bandage of wet book-muslin which completes the remaining third of the tube. If the occurrence of rising temperature, excessive smell, or local discomfort makes the surgeon anxious to inspect the wound, all he has to do is to cut across part of the muslin bandage, anchoring the loose ends with adhesive strapping. If he finds no indication for removing the whole plaster, integrity can be restored by the addition of a new wet bandage. The book-muslin, from which most hospitals manufacture their plaster bandages, contains some starch, and when applied wet it absorbs some of the plaster over which it passes, so that it has none of the tendency to slide which is so troublesome with dry bandages on plaster; also, it is discouraging to the patient's fingers, unless he is quite determined to interfere, but such patients will manage to disintegrate the stoutest plaster.

The method was introduced to me during the last war by Dr. Danforth of Providence, U.S.A., but has long been popular with French surgeons and is used with modifications by Dr. Böhler in Vienna. I have used it ever since, particularly for cases of Dunn's tarsal arthrodesis, which are really compound fractures of special difficulty and in some congenital cases are subject to tiresome blisters, which heal much more quickly when dried by exposure to air.

When it is desirable to expose the wound to more rapid evaporation than can occur through the plaster, I find the best method of protection from dust, etc., is to cover the opening in the plaster loosely with a little box cut from "windowlite" and bound into shape with adhesive strapping. This substance allows ultra-violet light to penetrate to the wound; it is easily cut with ordinary scissors; it is less likely to tear the nurse's hand than wire netting; and it can be washed with antiseptics, so that it lasts for weeks, not needing any gauze or only a strip at the edges. Thus, though it is not cheap to buy, it works out much more economically than the old-fashioned repetition of gauze dressings.—I am, etc.,

Bath, Dec. 17. M. FORRESTER-BROWN, M.D., M.S.

Sterilization and Storage of Dressings

SIR,—In a C.C.S. or base hospital an ample supply of small-sized dressing packages is of great advantage. It is inconvenient to have to search haphazard at a bedside for different materials within assorted bundles. Furthermore, the supply of sterile drums and of towels may be very restricted. For both sterilization and storage of small dressings cigarette canisters have proved very useful. The ration tins of the familiar brands are procurable in unlimited numbers, and may be used again and again.

The tin is converted into a miniature "drum" by piercing about a dozen fine holes in the lid (from without inwards) to provide entry for steam and subsequent vacuum drying. A tin can be packed with at least six large swabs, a few pledgets of wool, and on top a dressing towel twelve inches square. The loaded tins are packed in a large drum (it will take forty or more), and sterilization is carried out in the main appliance. As soon as is convenient each tin is removed from the main drum under aseptic conditions. (the sister or medical officer should wear gloves and gown), and the lid and upper half-inch of each tin is dipped into paraffin wax which has been allowed to cool from 160° C. to 75° C. A completely effective and lasting sealing of the perforations and lid margins results.

In practice it has been found that these dressing preparations may be stored for long periods, and that the wax sealing is not injured by rough handling. In the wards and for minor operations their compactness has proved handy and economical. Sterility of the dressings is assured.— I am, etc.,

BRUCE M. DICK, Major R.A.M.C.; Surgical Specialist, Nov. 28. No. 10 General Hospital.

Stored Blood for Transfusion

SIR,—I am very glad that Dr. A. C. Kanaar (*Journal*, December 16, p. 1206) has so temperately discussed ways of deciding the value of stored blood.

If we suppose for the sake of argument that stored chilled blood has about the same value as an equal quantity of blood serum dyed with congo-red, and that it can improve the colour and pulse of a patient to the same degree, we can see at once what a disastrous thing it would be to allow our present organization for the supply of stored blood to supplant one for the supply of warm fresh blood after an air raid. A recent paper by O'Shaughnessy and others justifies one in presuming that stored blood may be better than dyed serum. since they have shown that a solution of haemoglobin can sustain life, though for a limited period. My small clinical experience of using stored blood has left me anxious and uneasy, and I confess I have reverted to the use of fresh blood when the patient is ill. I should receive the greatest help from such an experiment as the following, but I have no facilities for carrying it out.

Establish what is a constantly fatal blood loss for a suitable given animal.

Compare the effects of transfusion of serum, of chilled stored blood, and of fresh blood on groups of such animals previously bled to the fatal point.

If this experiment has already been done I should be grateful for the reference.

I am inclined to the opinion that we could establish an organization for the early supply of large quantities of fresh blood, which would be practically as good as the present chilled blood supply organization so far as British towns are concerned.—I am, etc.,

Birmingham, Dec. 19.

HUGH DONOVAN.

president of the Punjab Branch of the British Medical Association. He was the only son of the late Bailie James Cairns of Holyrood Crescent, Glasgow, and graduated M.A., M.B., Ch.B.Glas. in 1909. He obtained the D.P.H. of Cambridge in 1914 and the D.T.M. and H. of the English Conjoint Board in 1931. Dr. Cairns was acting M.O.H. for Bombay in 1919 and for some years held the post of principal medical and health officer to the G.I.P. Railway before his appointment to the North-Western Railway. He joined the Glasgow and West of Scotland Branch of the B.M.A. in 1923, was vice-president of the Punjab Branch in 1935-6, and president in 1936-7, and represented the Branch at the Belfast Annual Meeting in 1937.

Readers in Auckland (N.Z.) will learn with regret that Dr. ARTHUR W. T. F. MICKLE died at Harrogate last month at the age of 85, after a trying illness cheerfully and patiently borne. The youngest son of the late Dr. David Mickle of Kirklington, Yorks, he belonged to the Lister era and qualified in Edin-burgh with the L.R.C.S. and L.M. diplomas in 1877. He obtained the degrees M.B., C.M. of the University in Edinburgh in 1882 and proceeded M.D. in 1894. After holding house appointments at Edinburgh and Dundee he took several asylum appointments, and then for some years was in general practice in London. Finally he went to New Zealand and practised for many years in Auckland. "R. W. P." writes: Dr. Mickle loved that sunny island and its people, and must have been dearly loved in return. For family reasons he returned to England about eight years ago, when I first met him. He was so youthful in spirits and looks, so kindly, so simple in heart and tastes, and these qualities with his quiet good humour and his keen interest in medicine and travel and politics made up a singularly attractive personality and a fine old English gentleman.

The Services

DEATHS IN THE SERVICES

Deputy Surgeon General WILLIAM TAIT, R.N. (ret.), died at Alverstoke on December 13, aged 84. He was educated at the University of Edinburgh, where he graduated M.B., C.M. the University of Edinburgh, where he graduated M.B., C.M. in 1878. He entered the Royal Navy soon after qualifying, attained the rank of deputy surgeon general on October 10, 1906, and retired on May 6, 1913. He served as surgeon on H.M.S. *Temeraire* during the Egyptian war of 1882, receiving the medal and the Khedive's bronze star. Later he served as medical officer of the gunboat *Lily* when she was wrecked on the coset of Labrader in 1890, and on H.M.S. *Cleanatics* in the coast of Labrador in 1889, and on H.M.S. *Cleopatra* in 1894, when she landed a party at Bluefields, Nicaragua, for the protection of the inhabitants during a rebellion. He was the author of *The Cruise of the Cleopatra* and of a *History* of Haslar Hospital.

Lieutenant-Colonel WILLIAM LINCOLN BAKER, R.A.M.C. (ret.), died suddenly at Ferndown on December 9, aged 63. He was born on December 2, 1876, and was educated at St. Mary's Hospital, taking the M.R.C.S., L.R.C.P. in 1899. He entered the Royal Army Medical Corps as lieutenant on April 25, 1900, became lieutenant-colonel on December 26, 1917, and retired on April 20, 1920. He served in the South African War of 1899–1902, when he took part in operations in Cape Colony, Orange River Colony, and the Transvaal, and received the Queen's medal with three clasps and the King's medal with two clasps.

Lieutenant-Colonel GERALD AINSLIE KEMPTHORNE, D.S.O., Lieutenant-Colonel GERALD AINSLIE KEMPTHORNE, D.S.O., R.A.M.C. (ret.), died suddenly, after an operation, on Decem-ber 4 at St. Austell, aged 66. He was born on May 10, 1873, and was educated at the University of Cambridge, where he graduated B.A. in 1898, and at St. Thomas's Hospital, taking the M.R.C.S., L.R.C.P. in 1902, and later the D.P.H. of the London Colleges in 1913. After acting as house-surgeon at the Derbyshire Royal Infirmary he entered the Royal Army Medical Corps as lieutenant on August 31, 1903, became lieutenant-colonel on June 3, 1926, and retired on May 10, 1931. He served in the war of 1914–18, when he was twice mentioned in dispatches and received the D.S.O. mentioned in dispatches and received the D.S.O.

Universities and Colleges

UNIVERSITY OF OXFORD

C. Ounsted (Christ's Hospital) has been elected to a War Memorial Medical Scholarship of £100 at University College.

UNIVERSITY OF CAMBRIDGE

The following candidates have been approved at the examination indicated:

tion indicated: FINAL M.B.—Part I (Surgery, Midwifery, and Gynaecology): G. A. Ballance, E. D. Barlow, M. W. Bird, T. R. M. Bristow, P. P. Brown, B. D. Burns, J. C. K. Campbell, G. K. F. Cohen, J. G. Craddock, R. W. Danziger, R. V. Dent, W. R. B. Dickinson, J. A. Elliott, M. A. Fawkes, J. H. P. Gauvain, M. J. Greenberg, T. S. S. Gregory, M. H. K. Haggie, R. T. Hastings-James, K. M. Hay, R. C. Howard, J. H. Humphrey, R. R. Hunter, T. B. Hutton, J. D. H. Iles, R. C. Jack, J. H. Jacobs, D. W. M. James, E. E. Jones, J. Joyce, J. H. Keesey, T. A. Kemp, J. D. Kidd, H. P. König, J. A. N. Lock, B. C. H. Luker, G. T. B. MacKinnell-Childs, W. B. D. Maile, J. E. M. Melville, R. S. Monro, R. Morton, T. L. Oliver, A. Ponder, A. G. Porter, W. L. Price, J. M. Pullan, H. Rabinowitz, J. F. Roberts, D. Scott, J. F. Smith, N. Southwell, G. E. Spear, P. N. Stanbury, G. E. Stein, R. E. Symes-Thompson, J. R. Tasker, A. C. Thackray, C. C. Thomas, G. T. G. Thomas, P. D. Trevor Roper, H. D. S. Vellacott, F. A. Whitlock, H. H. Wolff, M. W. W. Wood. *Women*: J. J. H. Beattie, M. K. Cole, M. C. Simpson.

UNIVERSITY OF LONDON

At a meeting of the Senate, held on December 20, the William Julius Mickle Fellowship for 1940 was awarded to F. G. Young, D.Sc., Ph.D., and the degree of D.Sc. was conferred on T. C. Angus, a recognized teacher at the London School of Hygiene and Tropical Medicine.

UNIVERSITY OF MANCHESTER

The following candidates have been approved at the examination indicated:

FINAL M.B., CH.B.—Peggy Anderson, A. P. Bates, D. Bolchower, R. Cocker, Barbara H. Fiddian, P. Haslam, J. E. Horrocks, E. Lee, D. Livshin, A. Manch, A. S. Ogden, J. C. Ramsden, J. C. A. Renshaw, G. G. Robertson, W. P. Sweetnam, H. E. Thackray. *Part 1:* Eva Abrahamson, I. C. Campbell, A. C. C. Davey, Elisabeth J. Davy, I. Dickson, W. Dickson, H. Diggles, J. W. Emerson, G. R. Ferguson, L. A. Gifford, B. L. Hoffmann, E. W. Jones, F. T. Jones, G. Lancaster, F. L. R. Makin, A. Manch, H. Walmsley, Mary J. Walmsley, C. S. Williams.

H. Walmsley, Mary J. Walmsley, C. S. Williams.
THIRD M.B., CH.B.—Pathology and Bacteriology: E. P. Abson, R. G. Balf, J. Ball, J. K. Brown, D. M. Coates, B. O. Dowdell, Jeanne M. Edwards, E. Feinmann, A. Glass, J. C. Greenwood, P. G. Griffiths, *E. G. Hall, *Frances A. Hepburn, S. H. Jackson, R. P. Jepson, J. D. Johnson, H. Khazam, M. Levinson, N. A. Lewtas, D. C. Little, J. K. McNyn, F. S. Mooney, A. B. Morrison, T. E. Parry, S. S. Rose, Susanne M. Seligsohn, G. J. Shanklin, H. G. B. Slack, J. Thompson, D. H. M. Titcombe, Vera Waine, F. R. Wilde, L. Wise, B. Wolman, P. B. Woolley. Pharmacology: G. Ashe, A. N. Ashworth, Shirley G. Barrett, H. Bolton, D. M. Brierley, W. E. Broughton, P. Cliff, J. G. Coburn, J. A. L. Cooper, G. Grawshaw, Betty J. Dakin, Sheila Egan, D. Eglin, C. J. L. Elsdon, Nora F. M. Falk, S. Falk, A. I. Goodman, S. Grace, K. Heap, Mary W. P. Huddart, Esther Jackson, H. Lempert, R. L. Lunt, Elspeth M. McKechnie, C. W. Marsden, R. W. T. Mason, Eileen T. Sloane, H. F. Smith, *S. W. Stanbury, O. C. Sugden, D. Sutton, M. Swerdlow, R. H. Townshend, H. C. Warrington, J. Whewell, J. K. Wright.

* With distinction.

NATIONAL UNIVERSITY OF IRELAND

UNIVERSITY COLLEGE, CORK

The following candidates have been approved at the examinations indicated:

M.CH.-W. F. Whelton.

M.CH.--W. F. Whelton. M.B., B.CH., B.A.O.--*J. B. Kearney, *P. J. Pugh, M. Bennett, M. A. Carroll, T. F. Coleman, J. J. Hennessy, J. P. Kenefick, T. McCracken, J. B. McKenna, Kathleen M. McSwiney, Anne M. Madden, J. J. Mockler, P. J. Murphy, W. P. Navin, Mary L. Neville, D. J. O'Callaghan, Nora T. U. O'Callaghan, J. S. O'Dwyer, W. P. O'Neill, D. P. F. O'Sullivan, J. V. O'Sullivan, J. A. A. Ryan. Part 11: Winifred P. Fielding, W. P. Lee, T. Nunan, I. Tully.

D.P.H.-Part I: D. C. Lawton,

* With first-class honours.

ROYAL COLLEGE OF SURGEONS OF EDINBURGH At a meeting of the Royal College of Surgeons of Edinburgh held on December 18, with Dr. H. M. Traquair, President, in the chair, the following candidates, having passed the requisite examinations, were admitted Fellows:

Y. M. E. R. Abeyesundere, T. J. Brownlee, H. Cohen, K. Das, B. K. Das Gupta, J. Dickie, A. A. Douglas, M. P. Embrey, D. Engel, M. R. Ewing, W. L. Fulthorpe, W. C. Gledhill, W. Gray, R. F. H. Hinrichsen, H. G. W. Hoare, Sa'd. Khalil, A. G. R. Lowdon, Rosamund M. J. Mackay, A. Y. Mason, W. Michie, A. C. Miller, N. M. Mody, G. H. Moore, A. Naylor, P. G. Rau, F. H. Robarts, T. F. Rose, F. J. Rutter, C. G. Scorer, J. F. Sheehan, H. A. Thomas, R. N. Traquair, L. J. Woodland.

SOCIETY OF APOTHECARIES OF LONDON

The following candidates have passed in the subjects indicated:

SURGERY.—E. J. S. Barthorpe, E. Batley, P. S. Clarke, S. J. P. Ras, E. A. Spouse.

MEDICINE.—D. S. Foster, E. G. F. Skinner.

FORENSIC MEDICINE.-D. S. Foster, E. G. F. Skinner.

MIDWIFERY.-R. S. Holtan, C. M. Isherwood, J. Marks.

The diploma of the Society has been granted to E. J. S. Barthorpe, E. A. Spouse, and E. G. F. Skinner.

Medical News

The council of Epsom College will shortly proceed to elect two or more St. Anne's scholars. Candidates must be fully 9 years of age and must be orphan daughters of medical men who have been in independent practice in England or Wales for not less than five years. The value of each scholarship is dependent upon the means of the applicant and the locality and fees of the school selected. Forms of application for the vacant scholarships can be obtained from the secretary at the secretary's office, Epsom College, Epsom, Surrey, and must be completed and returned by January 20, 1940, at latest.

No. 1 of Volume XI of the *Index to the Literature of Food Investigation* is published on behalf of the Department of Scientific and Industrial Research by H.M. Stationery Office at 4s. 6d. This issue deals with papers received between January 1 and December 31, 1939. Henceforth each annual volume will appear in four quarterly numbers.

The issue of *Schweizerische medizinische Wochenschrift* for October 28 is dedicated to Dr. Alfred Vogt, professor of ophthalmology at Zurich and founder of the Swiss Ophthalmological Society, on the occasion of his sixtieth birthday.

The forty-fifth volume of Uppsala Läkareförenings Förhandlingar is a Festschrift dedicated to Dr. Gustaf Fr. Göthlin, professor of physiology at Uppsala. Of the twenty-nine articles nine are in English and twenty in German.

Dr. Jörgen N. Schaumann, chief physician to the St. Görans Finsen Institute, Stockholm, is to be the recipient of a jubilee number of the *Acta Medica Scandinavica* on the occasion of his sixtieth birthday. His name has been given to a generalized disease of which the skin manifestations are lupus pernio (Besnier) and Boeck's sarcoid.

The thirteenth annual report of the "UFAW" (the Universities Federation for Animal Welfare) has been circulated to members; for reasons of economy it has been drastically reduced in size. Much of the work connected with expansion is hindered by the war, but many activities will be carried on. Sir Peter Chalmers Mitchell, D.Sc., F.R.S., has become president, in succession to the late Sir Frederick Hobday. In March last the offices of the Federation were moved to Gordon House, Gordon Square, W.C.1.

In 1938 New York had the lowest general mortality on record—namely, 10.8 per thousand inhabitants.

An academy of dermatology has recently been founded in New York, with Dr. Howard Fox of New York as president. The King has granted authority to Dr. Leigh Hunt Henderson to wear the Insignia of Officer of the Order of the Nile conferred upon him by the King of Egypt in recognition of valuable services rendered by him in the employment of the Sudan Government.

A library devoted to the history of medicine has been established at Yale University School of Medicine. Its basis will be formed by the collections of the late Dr. Harvey Cushing and of Dr. John F. Fulton, professor of physiology in the Yale Faculty.

The King of the Belgians has raised Professor Corneille Heymans, the Nobel prizeman, to the rank of Commander of the Order of Leopold.

Queen Elizabeth of Belgium has been made a doctor honoris causa of the Medical Faculty of Montpellier.

Announcement is made of the admission by Dr. Barnardo's Homes of the 124,000th child to benefit under their Charter— "No destitute child ever refused admission." The family always numbers about 8,250 boys and girls—a figure that in the near future seems likely to be exceeded by reason of war conditions.

The German Medical Society of New York has had its name changed to the Rudolf Virchow Medical Society of the City of New York.

An Argentine Society of Social Medicine has recently been founded at Buenos Aires.

EPIDEMIOLOGICAL NOTES

Infectious Diseases for the Week

Measles and typhoid fever are the only two important infectious diseases in England and Wales which have increased in prevalence during the week; in the former London has shared to some extent but not in the latter. The expected measles epidemic has been rather slower to appear than usual, but in recent years it has been observed that the biennial epidemics do not enter upon the explosive phase until the latter part of January, reaching the maximum in March, in London in the third week. So far the disease has been widely distributed over England and Wales, affecting rural areas as much as urban centres and avoiding the majority of large towns, including London. Notifications of enteric fever rose from 13 to 29; from eight counties more than one case was reported: Dorset 2 (both in Weymouth and Melcombe Regis M.B.); Hertford 3 (Barnet, St. Albans, and Hemel Hempstead 1 each); Lancaster 3 (Preston, Colne M.B., and Trawden U.D. 1 each); Norfolk 2 (Great Yarmouth 1, Blofield and Flegg R.D. 1); Northumberland 2 (Morpeth 1, Whitley and Monk-seaton 1); Nottingham 2 (both in Sutton-in-Ashfield); Warwick 2 (both in Birmingham); Yorks (West Riding) 4 (Harrogate 2, Bradford 1, Denby Dale U.D. 1).

Although the figures for diphtheria have fallen during the week and are less than two-thirds of the level of last year, reports of a disquieting character have arrived from some centres. In Leicester county there were 27 cases, of which 11 were in the City of Leicester, compared with 31 and 13 respectively in the previous week-apparently a highly virulent strain, probably a starch-permeating or "gravis" type, as the response to serum treatment has frequently been unsatisfactory. Despite an intensive immunization campaign for nearly two years in South Shields cases continue, although usually they are mild or are in carriers. Up to December 9 there have been 476 cases in the town this year, making slightly over 100 fewer for the same period last year. In the Don Valley, in the administrative county of Yorks (West Riding), a severe type has appeared, especially in two districts-Ardwick-le-Street and Armthorpe-and 63 cases have recently been admitted to Conisborough Isolation Hospital, of which 4 patients died. In Sheffield there were 18 cases during the week, compared with 6 in Leeds.