

The patient slides on the shiny flat "bed" of the stiff wire mesh to such an extent that with sudden braking a concussion, or even a fracture of cervical vertebrae, is by no means impossible. This may happen especially on a down-slope when the patient is precipitated head first into the ambulance partition.

The remedies, of course, are slow and careful driving, and, on any other than the shortest journey, fastening the patient securely to the stretcher. These are rules which must, I think, be very firmly insisted on.—I am, etc.,

Oct. 22.

D. G. DUFF, M.O.H., Denbigh.

Our Unused Influence

SIR.—Doctors are queer people. In your issue of October 12 (p. 507) appeared a letter from a medical man in South Africa. It was probably one of the most important letters ever published in the *Journal*, and yet, although I have waited a fortnight to see, there has not been a single reply. Dr. George H. Alabaster pointed out that although the medical profession is concerned with the saving of life (on a comparatively small scale) it has made no concerted effort to preserve peace in the world and thereby save a hundredfold more lives.

This is terribly true. The profession as a whole is reasonably well educated, possibly fairly cultured, yet it is apparently utterly indifferent to the big issues on which depend the lives and happiness of millions of people. Three-quarters of the world's population is now at war, and so far as I know the medical profession in this country have not made a single effort to direct or mould our political or international destiny. We wrangle about fees for medical aid notes, we have committees to discuss whether doctors shall be paid £50 or £70 per annum for some service or other, we send deputations to the Government, but only to the Minister of Health. We never dream of asking the Prime Minister to do this or that in the realm known as political. We made not a single protest against the country's handling of Italy or Japan. We never wrote a single letter to the League of Nations (except to its Health Department).

Without scientists modern war would be impossible, but we never think of bringing pressure to bear on our fellow scientists who devote their lives to making bigger and better bombs and mines. We have a few of our profession in Parliament, but their influence is chiefly devoted to questions of how to keep up practice receipts.

It is time we became less afraid of, or more interested in, the bigger issues of national life; time we realized not only our responsibilities but our power. It is time we read more and pondered more. Plumbers, lawyers, bricklayers, and architects take far more interest in our national life than we do; yet they are, in some ways, less fitted to build a strong and determined British Empire; less fitted to rid the country of the sloth, procrastination, and spinelessness which have landed us in this present ghastly mess. Our example is deplorable. I believe our Colonial colleagues are much more aware of this than are we.—I am, etc.,

Balby, Doncaster, Oct. 30.

ROBT. W. L. WARD.

Pregnandioli

SIR,—In your leading article on pregnandioli (October 26, p. 561) the following statement is made: "Cope in our present issue (p. 545) states that its [i.e., pregnandioli] complete absence is always evidence of serious abnormality."

This gives such an erroneous impression of the conclusions reached by me in the article referred to that I would strongly urge all interested to read the original more carefully before assuming that any such dogmatic generalization was made.—I am, etc.,

Oxford, Oct. 28.

C. L. COPE.

** We regret if we have misrepresented Dr. Cope. The statement in the summary of his interesting article was as follows: "An attempt has been made to assess the diagnostic value of pregnandioli excretion in abnormal pregnancy. Its complete absence is nearly always evidence of serious abnormality, suggesting in early pregnancy the imminence of abortion and in late pregnancy the death of the foetus."—Ed., *B.M.J.*

Closed Plaster Technique for Infected Fractures and War Wounds

SIR.—I must protest once more. We are failing to pay credit where credit is due. In the latest publication, *Surgery of Modern Warfare*, edited by Hamilton Bailey, are these words: "The closed plaster method was developed from Böhler's technique by surgeons engaged in the Spanish war, particularly Trueta. . . . It must be considered to be still on trial."

Nothing could be further from the truth. Trueta did not develop the technique. Böhler abhors it. It is the Winnett-Orr technique. It was developed in the last war, a quarter of a century ago. The cases were fully documented in 1929. Some surgeons may not have heard of it until the Winnett-Orr method was used in Spain, but if so they have only themselves to blame. During the last six years the British Medical Association has been circulating a film which illustrates every detail. Most orthopaedic surgeons in this country have used it routinely for over ten years.—I am, etc.,

Liverpool, Nov. 1.

R. WATSON-JONES.

The Services

ROYAL AIR FORCE AWARD

The Military Cross has been awarded to Flying Officer Courtney Beresford Ingor Willey, R.A.F.M.S.

Flying Officer Willey was buried in the debris of a building which received a direct hit during an intensive air raid on an aerodrome. In spite of slight injuries and shock this medical officer immediately rendered first aid to other injured personnel.

NAVAL COMPASSIONATE FUND

At the quarterly meeting of the directors of the Naval Medical Compassionate Fund, held on October 29, with Surgeon Vice-Admiral Sir Percival Nicholls, K.C.B., K.H.P., in the chair, the sum of £154 was distributed among the several applicants.

CASUALTIES IN THE MEDICAL SERVICES

ROYAL NAVY

The name of Probationary Temporary Surgeon Lieut. ARTHUR GRIFFIN BELLAMY, R.N.V.R., is included as "Killed" in an Admiralty casualty list published on November 4. Dr. Bellamy was educated at the University of Cambridge and St. Thomas's Hospital, and qualified M.R.C.S., L.R.C.P. in 1936. He then took the degrees of M.B., B.Ch. in 1937. He had held the post of senior resident medical officer at the Royal National Hospital for Consumption, Ventnor, and at the outbreak of the war was residing in London. He joined the British Medical Association in April, 1938.

ARMY MEDICAL SERVICES

Prisoner of War

Colonel William Albert Robertson, C.B.E., M.C., A.M.S.

ROYAL ARMY MEDICAL CORPS

Prisoners of War

Major John George Lawson, R.A.M.C.
Captain (War Substantive) Norman Rupert Chamberlain Lansdell, R.A.M.C.
Lieutenant Samuel Thomas Williamson, R.A.M.C.

DEATHS IN THE SERVICES

Lieut.-Colonel RICHARD CRUMP LEWIS, R.A.M.C. (ret.), died at Salcombe on October 23, aged 75. He was born at Kinsale, Co. Cork, on April 15, 1865, the youngest son of the late Mr. Stephen Lewis, was educated at the Carmichael School, Dublin, and took the diplomas of the Irish Colleges in 1888. Entering the Army as surgeon in 1892, he became lieutenant-colonel in 1915 and retired in 1919. He served in the North-West Frontier campaign in India in 1897-8 (medal with clasp); in the South African War in 1902, in operations in Cape Colony (Queen's medal with two clasps); and in the war of 1914-18. He had been a member of the British Medical Association for twenty-two years.

remained a degree of mental instability associated with the confinement.

The jury found the woman not guilty of murder but guilty of infanticide, and she was placed in the care of the probation officer.

EMPLOYMENT OF ALIEN DOCTORS AND NURSES IN HOSPITALS

The Minister of Health, Mr. Malcolm MacDonald, after consulting the other Departments concerned, has issued a circular to hospital authorities withdrawing to a large extent the limitations made earlier in the year on the employment of refugees of German and Austrian nationality in hospitals or similar institutions included in the Emergency Hospital Scheme in areas in England and Wales outside the Protected Areas. In these non-protected areas persons of German, Austrian, and Italian nationality may be employed as doctors (qualified to practise in this country), medical students, nurses, or in other capacities, subject to the following conditions:

(a) In the event of invasion or other serious military situation which would make it necessary for the military authorities to take full control of the area, the military authorities may find it necessary to order the immediate removal from the hospital of the persons in question.

(b) Every effort should be made to segregate Service patients in separate wards, and the aliens must not be employed in wards set aside for this purpose.

(c) Wherever practicable alien doctors and nurses should be employed only in wards where British doctors and nurses are also engaged.

(d) The number of aliens of enemy nationality who may be employed in a hospital must be limited in relation to the total staff. For this purpose account should be taken of the following categories of staff: doctors, nurses (including massage staff), other professional and technical workers (including laboratory and research staff), students and domestic staff (including voluntary workers such as stretcher-bearers). Within any of these categories not more than 10% of the personnel (or 20% in the case of hospitals of less than 100 beds) may be aliens of enemy nationality.

Permits from the Aliens' War Service Department will be required before an alien can be employed, but these are not likely to be refused unless it is found that there is reason to think that the applicant might be a danger to national security. Alien nurses will no longer have to obtain Ministry of Labour or Home Office sanction in addition to this permit.

The circular states that existing limitations will continue to apply in all Protected Areas.

REGIONALIZATION OF SCOTTISH HOSPITALS

An advisory committee on the Regionalization of Hospital Services in Scotland in association with the Nuffield Provincial Hospitals Trust has now been set up with Mr. Thomas Johnston, Regional Commissioner for Scotland, who is also Scottish Trustee for the Trust, as chairman of the committee. A subcommittee to advise upon medical services has been appointed and includes Sir John Fraser (chairman); Prof. J. R. Learmonth, Edinburgh; Prof. Noah Morris, Glasgow; Prof. C. F. W. Illingworth, Glasgow; Prof. Charles McNeil, Edinburgh; Prof. James Hendry, Glasgow; Prof. Adam Patrick, Dundee; Dr. J. Crawford Knox, Aberdeen; Dr. W. G. Clark, medical officer of health, Edinburgh; Prof. J. M. Mackintosh, Glasgow; Dr. A. Greig Anderson, Aberdeen; Dr. Duncan Leys, Inverness; Dr. R. W. Craig, Scottish Secretary, British Medical Association; and Dr. A. S. M. Macgregor, medical officer of health, Glasgow.

Universities and Colleges

UNIVERSITY OF WALES

WELSH NATIONAL SCHOOL OF MEDICINE

The following candidates for the degrees of M.B., B.Ch. have satisfied the examiners at the examination indicated:

A. A. Edwards, *N. E. France, Vera Harris, A. B. J. Hill, Margaret W. Hughes, D. F. V. Johnston, W. M. Jones, Gwenllian M. Lewis, J. Lewis, J. W. Morgan, Monica Parry-Morton, D. K. W. Picken, J. B. Randell, *H. I. Rees, Nest G. Richards, Barbara C. Roberts, Erica M. G. H. Roberts, E. Spickett, J. H. Stranger, E. R. Treasure, J. Williams, O. Williams, G. A. Wright.

* With distinction.

ROYAL COLLEGE OF PHYSICIANS OF LONDON

At the quarterly comitia of the Royal College of Physicians of London, held on October 31, with the President, Sir Robert Hutchison, in the chair, Dr. H. MacCormac, Dr. Hope Gosse, Dr. R. A. Rowlands, and Dr. R. Coope were elected Councillors.

Dr. A. Clark-Kennedy was elected representative of the College on the committee of management of the Conjoint Board.

The President announced the award of the Jenks Memorial Scholarship to Gerald Rees Davies, late of Epsom College, and the appointment of Dr. W. N. Pickles as Milroy Lecturer for 1942.

Dr. Isaac Muende, M.B.Lond., was elected a Member.

Licences

Licences to practise were conferred upon the following 182 candidates (including twenty-three women) who have passed the final examination of the Conjoint Board and have complied with the necessary by-laws:

R. H. Alexander, Sugra M. Ali, W. H. E. Allen, J. L. B. Ansell, O. B. Appleyard, D. J. Ap Simon, W. D. Arthur, P. A. Bachmann, C. F. Ballard, P. S. Barclay, R. C. Barclay, A. Barlow, E. D. Barlow, K. L. Barnes, R. Bauer, G. W. Bellis, F. D. Birks, R. Boggon, J. F. Bourdillon, Ruth E. M. Bowden, P. T. Boyle, J. B. Braithwaite, B. D. Burns, J. S. G. A. Burns, W. Calvert, A. H. Campbell, E. C. R. Campbell, W. R. Clarke, D. P. Cocks, P. W. S. Coghill, L. B. Cohen, R. H. L. Cohen, M. J. Conlon, O. L. C. Cookson, G. O. Cowdy, A. S. Craner, Leonora A. Crawford, Barbara M. Crook, Muriel Crouch, T. Culloty, D. Dangerfield, H. M. Darlow, J. O'C. Davies, Grace T. Dawson, W. G. Daynes, H. E. H. Denham, R. V. Dent, G. Discombe, P. C. Dismorr, D. M. L. Doran, R. E. Dunn, J. G. Eadie, T. E. C. Early, A. H. A. El-Baghadi, J. Faij, A. G. Farr, J. B. Fawcitt, M. A. Fawkes, J. M. Ferguson, J. R. Fletcher, D. C. Fraser, D. N. Fuller, L. Garrett, B. Godwin, H. Greenberg, S. Gruber, J. P. Guthrie, K. A. Hall, R. S. B. Hamilton, F. W. Hanford, G. I. Harding, J. S. Hesketh, C. R. F. Hewlett, Dorothy M. Hicks, R. T. Hinde, H. D. R. Hine, G. S. Hopkins, E. V. Hope, G. Houseman, W. G. J. Hughes, S. O. Hunt, A. D. Husband, D. MacG. Jackson, F. S. Jackson, Muriel E. James, B. D. L. Johnson, Grace A. Johnson, F. T. Jones, J. G. Jones, P. E. H. Jones, M. Kamill, J. G. Koopman, G. Krafft, D. Laing, P. W. W. Leach, Cynthia Lee, J. B. Lee-Woolf, Flora Levy, D. Lewis, T. D. C. Lewis, M. Lipsitz, G. B. Locke, W. J. C. Lord, R. E. McLachlan, A. Maconochie, J. M. Malins, A. Maples, W. W. Marsden, D. V. Martin, D. H. Meldrum, S. P. Millar, R. P. Mills, D. T. Milnes, S. N. Mohan, E. H. Moorhouse, J. E. Morgan, P. S. Norris, Ruth P. Peterson, H. T. Phillips, Florence R. Pillman, G. W. Pinder, J. M. Piney, J. F. Poolman, D. S. Porter, M. Rathnavelu, M. A. Rauf, A. H. Rea, L. Read, R. D. S. Rhys-Lewis, J. Ribeiro, B. G. Rigden, P. A. L. Roberts, G. McC. Robson, J. W. Rogerson, Joan A. Rosmarin, C. M. H. Rotman, T. W. Rowntree, C. A. Royde, R. S. Russell-Smith, Mary M. E. Rutter, Kate E. Rymer, J. E. Ryner, J. Salwey, A. R. Sandford, C. A. Sandle, C. F. Saunders, N. Saunders, E. Shephard, H. Shloimovitz, A. R. Silcock, Margaret C. Smith, P. Smith, A. J. H. Spafford, Kathleen Staynes, J. M. Steinberg, J. Stuppel, Myra Sutherland, N. Swallow, J. F. Swan, P. H. Tasker, D. M. E. Thomas, D. T. Thomas, E. G. Thomas, H. A. Thomas, Beatrice M. Thompson, W. Thomson, A. Toorawa, N. C. B. Trapps, P. D. Trevor-Roper, R. Wadia, Violet E. Waller, Mary J. Walsley, P. Waters, W. F. J. Weston, C. Ll. Wharton, H. W. Wheate, M. W. L. White, J. H. Wildman, Mary U. Wilkin, J. M. Williams, T. N. P. Wilton, J. Woodley.

Diplomas

The following diplomas were conferred, jointly with the Royal College of Surgeons of England, upon the following candidates:

DIPLOMA IN CHILD HEALTH.—A. J. W. Beard, J. Fiddes, A. N. Ganguli, M. J. Parsonage, Cicely Steer, J. Thomson.

DIPLOMA IN PUBLIC HEALTH.—S. D. Arya, B. C. Barua, Mary T. Day, J. M. Gray, I. Kitchlew, M. W. A. Quraishi.

ROYAL COLLEGE OF OBSTETRICIANS AND
GYNAECOLOGISTS

The eleventh annual report of the Royal College of Obstetricians and Gynaecologists states that during 1939 fifty-six new members were admitted and fourteen members promoted to the Fellowship. An application for a Royal Charter was lodged with the Privy Council, but certain modifications were requested, two of which were unacceptable to the council of the College. On the outbreak of war, however, the Privy Council decided that no new charters should be considered. It is now learned that the objecting body has withdrawn its objections, so that it is hoped that when the consideration of charters is resumed the grant may be made without delay. Several hospitals have been inspected by representatives of the College in continuation of the policy of recognizing hospitals suitable for training candidates for the examinations, but as the war has caused so much disorganization of hospital routine and dispersal of staffs, it has been decided that during the war no hospitals shall be added to the list of those already recognized. Nevertheless, applications will be considered from candidates who are working temporarily under the supervision of specialist teachers although in hospitals which may not be on the recognized list. The council appointed a subcommittee to report on the principles which should underlie the planning and organization of an ideal maternity hospital. The recent report of the Departmental Committee on the cost of hospitals contains a section on the planning of maternity hospitals and departments, and this with certain additional observations and modifications has, with the approval of the council, been adopted as representing the view of the College.

Financially the year 1939 was anticipated with some misgiving because for the first time the late Lord Riddell's gift of £1,475 a year, which was on a seven-year covenant expiring in 1938, was no longer forthcoming. The year has, however, ended with a small surplus of income over expenditure. In his address to the annual meeting of the College Prof. W. Fletcher Shaw (who was re-elected President in July, with Prof. Miles H. Phillips and Mr. Eardley Holland as Vice-Presidents) said that the finest testimonial to the work of the College and the position which it had achieved was the way in which the Fellows and Members had rallied to it. Many of them had been hard hit financially, and had had to curtail drastically their personal expenditure, but complaints about the annual subscription had been very few.

The annual report as circulated includes a register, from which it appears that the Fellows number 227, Members 430, and there is a list of 259 diplomates.

At a quarterly meeting of the council, held on October 26, with the President, Prof. W. Fletcher Shaw, in the chair, the following were admitted to the Membership of the College (*in absentia*):

A. F. Anderson, Edinburgh, J. O. E. Apthorp, Capetown, A. L. Deacon, London, W. T. Dingle, Canada, D. B. Fraser, London, G. S. Lester, Walsall, S. W. Liggett, London, R. Murdoch, R.A.M.C., F. J. P. O'Gorman, Sheffield, Coralie W. Rendle-Short, Bristol, I. E. J. Thomas, Tunbridge Wells, L. O. Watt, Canada, S. Way, Newcastle.

The examinations for the Membership and for the Diploma continue to be held, and the library and museum of the College are open daily except Saturdays.

Medical News

The Nutrition Panel of the Food Group of the Society of Chemical Industry is holding a meeting at B.M.A. House at 11 a.m. on Wednesday, November 13, to discuss "The Potato as Food." M. André Simon will be in the chair, and the three opening papers will be read by Dr. R. N. Salaman, F.R.S., on "The Biology of the Potato," the second by Dr. L. H. Lampitt and Mr. N. Goldenberg on "The Composition of the Potato," and the third by Dr. Harriette Chick on "The Nutritive Value of the Potato."

A meeting of the Pharmaceutical Society of Great Britain will be held at 17, Bloomsbury Square, W.C., on Thursday, November 14, at 2.30 p.m., when Prof. A. Fleming will give an address on "Antiseptics in Wartime Surgery."

Mr. T. S. S. Holmes has succeeded Dr. J. M. McCloy as president of the Ulster Medical Society.

The honorary fellowship of the Canadian Public Health Association has been conferred on Dr. E. W. Montgomery, emeritus professor in medicine, University of Manitoba, and formerly Minister of Health and Public Welfare of the Province of Manitoba, and on the Hon. J. M. Ulrich, M.D., Minister of Public Health and Provincial Secretary, Province of Saskatchewan.

Lady Mackenzie, widow of Sir Colin Mackenzie, F.R.C.S., who did much to ensure the preservation of wild life in Victoria, has been commissioned as a captain in the Australian Army Medical Corps Reserve.

The *South African Medical Journal* reports that Capetown's new tuberculosis clinic is rapidly nearing completion. The total cost will be about £14,000, the site costing £2,000, the building £900, and the equipment £3,000.

The *Journal of the American Medical Association* states that "medical pilots," a group in which membership is available to all white male American citizens who are licensed practitioners of medicine and members of their local medical society, were organized in Southern California last June.

The widow of Dr. Wallace C. Abbott, the founder of the Abbott Laboratory at Chicago, has presented the North-Western University and University of Chicago with 1½ and 1 million dollars respectively for medical research.

EPIDEMIOLOGICAL NOTES

Infectious Diseases for the Week

In England and Wales increases were recorded in the incidence of measles, whooping-cough, pneumonia, scarlet fever, and enteric fever; there was a fall in the notifications of cerebrospinal fever and acute poliomyelitis, and those for diphtheria and dysentery remained at approximately the same level. In each instance—with the exception of measles and whooping-cough, for which comparable data are not available for 1939—notifications (notably for cerebrospinal and enteric fevers) were at a higher level than during the corresponding week last year, and, with the exception of diphtheria, higher than in 1938. In Scotland, also, epidemic diseases appear to be spreading—whooping-cough and enteric fever excepted—and generally are more prevalent than in the immediately preceding two years.

Up to date available evidence does not warrant the attribution of the observed increases to unfavourable conditions arising from the war. It is more probable that we are now suffering for the unwonted immunity enjoyed generally last year—presumably from widespread dispersal of non-immunes at a period when infectious diseases normally tend to be rife. In the absence of such control as artificial immunization, infectious fevers recur on an epidemic scale with fairly constant characters, although the time and form of particular epidemics may be modified by external influences.

Attention has lately been focused on the continued prevalence of enteric fever. Damage to water services has not been accompanied by a noticeable increase, and, indeed, apart from the week under review there has been a tendency for notifications to decline. Nevertheless, in view of the risk involved individuals in bombed areas may consider immunization against enteric fevers a wise precaution to take. The observed distribution of the disease throughout England and Wales conforms more or less to that of normal times before the war—in many localities sporadic cases and in a few small outbreaks. At present twenty-two administrative areas record cases, but in only seven were more than 2 cases notified—namely, Yorks, West Riding, 19 (Leeds 9, Bradford 4, Barnsley 1, the urban districts of Baildon, Heckmondwike, Shipley, Swinton, and Wath-upon-Deane, 1 each); Lancaster 12 (Manchester 5, Blackpool, Burnley, Liverpool, Rochdale, Aspall U.D., Prestwich M.B., and Lancaster R.D., 1 each); Salop 9 (Wellington R.D. 5, Oakengates U.D. 2, Dawley U.D., Drayton R.D., 1 each); Warwick 9 (Birmingham 5, Coventry 2, Royal Leamington Spa M.B., Stratford-on-Avon M.B., 1 each); Chester 3 (Chester 1, Wallasey 1, Neston U.D. 1); Durham 3 (Easington R.D. 2, Gateshead 1); London 3 (Hackney, St. Pancras, Wandsworth).