

## Local News

### ENGLAND AND WALES

#### Chadwick Public Lectures

On Tuesday, October 7, at 2.30 p.m., the first lecture in the autumn programme of the twenty-ninth annual series of Chadwick Public Lectures will be given at the Royal Society of Tropical Medicine and Hygiene, 26, Portland Place, W., by Mr. V. Zachary Cope on "The Influence of War on Surgery," with Sir William J. Collins, chairman of the Chadwick Trustees, in the chair. Other lectures, all at 2.30 p.m., have been arranged as follows: October 28, at the Royal Sanitary Institute, 90, Buckingham Palace Road, S.W., Mr. J. C. Dawes (Ministry of Health), "The Cleansing of Towns and Cities"; November 11, at the London School of Hygiene and Tropical Medicine, Keppel Street, Gower Street, W.C., Bossom Gift Lecture by Mr. F. R. Hiorns, "Hygiene Technique in Building, or the Economic, Psychological, and Health Aspects of Surface Treatment"; November 27, at Westminster Hospital Medical School, 17, Horseferry Road, S.W., Dr. S. Ernest Dore, "Advances in Dermatology during the Past Forty Years"; December 9, at the Royal Society of Tropical Medicine and Hygiene, Mrs. Blaise Gillie, "Post-war Housing in the Light of Wartime Experience."

#### Cancer Research in Yorkshire

The Yorkshire Council of the British Empire Cancer Campaign, which owed much of its original stimulus to the late Lord Moynihan, is continuing its work, although limited by war exigencies. The fifteenth annual report embodies an account of the work of the Department of Experimental Pathology and Cancer Research of the University of Leeds, and of the Field Laboratory of the University of Sheffield. The Field Laboratory has been improved during the year, and a new tissue culture laboratory equipped.

At Leeds Prof. R. D. Passey describes experiments following upon an American report of the experimental production of bladder papillomata by the administration of commercial  $\beta$ -naphthylamine, one of the amino-compounds used in the aniline dye industry. The experiment at Leeds began in August, 1937, when four dogs received 100 mg. daily of this specially purified compound. After an initial period of haematuria the dogs remained well for a year, when one male dog died from a generalized lesion resembling Hodgkin's disease, but without bladder tumours. The female has now died (after three and a half years' treatment) with extensive multiple papillomatosis of the bladder with the microscopical characteristics of malignant new growth. The two surviving dogs are in good health. This so far as it goes confirms the American work that bladder tumours are induced by purified amino-compounds. So far in America the condition has been induced in bitches only, and at Leeds also it was in the bitch that it appeared. The possible antagonism between one malignant tumour and the appearance of another in the same animal has also been investigated at Leeds, but the experiments carried out so far suggest that no such antagonism exists.

At Sheffield Prof. H. N. Green and his co-workers have been engaged in studying the complementary action of viruses and chemical carcinogens in the production of malignant mammalian tumours. Thirty-two rabbits bearing Shope papillomata were divided into three groups. One month after the appearance of the papillomata the first two groups received injections of thiorast and methylcholanthrene respectively into the base of the warts. In the third group, which acted as control, some of the animals received injections into the warts of lead peroxide, others of sesame oil, and the remainder were not injected. Fifteen months after the inoculation with virus seven animals treated with the carcinogenic agents survived, but none of these, or of the control animals, had developed a malignant tumour, though all had either growing or stationary papillomata. This is an unusual result, as malignancy generally supervenes in Shope papillomata grown in domestic rabbits, even without interference to the warts, in a much shorter period. It is thought possible that the carcinogen modifies both virus and host cells and that the modification of either of these alone is ineffective; also that the combined application of a chemical carcinogen and material

which should contain the hypothetical modified virus might result in a shortening of the latent period of tumour development. An attempt has been made to test this last hypothesis, but the experiments so far give no support to it.

## Correspondence

### Abortus Fever and Sulphapyridine

SIR,—I have read with great interest Dr. J. Whittingdale's letter (August 9, p. 210) describing a case of undulant fever (*Brucella abortus* infection) treated with sulphapyridine and Dr. J. H. F. Pankhurst's letter (August 30, p. 318) criticizing Dr. Whittingdale for concluding from the results in his case that "*Brucella abortus* infection responds to sulphapyridine." After reading these two letters it occurred to me that a few comments based on my series of 522 cases, of which 63 were treated with sulphonamide compounds, might be useful. Dr. Pankhurst's criticism is based upon the capricious behaviour of "a disease which is notorious for its intermissions and relapses." I agree with him that such a caution is very necessary, and I have repeatedly drawn attention to this point. Thus in an article in the *Lancet*<sup>1</sup> I remarked: "The rapid return of the temperature to normal followed by recovery will often tempt the doctor to ascribe this happy result to the particular treatment which immediately preceded this occurrence; but all experienced observers are agreed that such a sudden termination is common in untreated cases and should therefore be interpreted with great caution"; and again: "Cases in which afebrile and sometimes symptom-free intervals of several months or years were followed by recurrence of the typical disease without any evidence of reinfection present a difficult problem, but various considerations suggest that the *Br. abortus* may lie dormant (e.g., in the spleen or lymph glands) for long periods." My experience since writing the above has only served to confirm these views, and Table I gives a few instances in my series of striking intermissions of the fever in cases of this disease.

TABLE I.—Intermissions of Fever in Cases of Undulant Fever

Case No.	Intermissions
21 <sup>2</sup>	1st intermission .. .. . 2 days
	2nd .. .. . 4 "
	3rd .. .. . 3 "
	4th .. .. . 38 "
	5th .. .. . 45 "
	6th .. .. . 12 "
217	1st .. .. . 37 "
	2nd .. .. . 25 "
372	1st .. .. . 94 "
	2nd .. .. . 111 "
398 <sup>3</sup>	1st .. .. . 28 "
	2nd .. .. . 23 "
480 <sup>4</sup>	1st .. .. . 4 weeks
	2nd .. .. . 1 week
	3rd .. .. . 1 "
493	1st .. .. . 2 months
	2nd .. .. . about 2 "
	1st .. .. . 59 days
504	2nd .. .. . 3 "
	3rd .. .. . 4 "
	4th .. .. . 3 "

It will be clear from these few examples that the effect of any treatment must be extremely difficult to determine in such a capricious disease, as Dr. Pankhurst aptly calls it. What criteria can we use? Obviously the return of the temperature to normal following the administration of sulphonamide compounds is insufficient in itself, as not only might apyrexia have occurred without such intervention but it may merely be a temporary intermission. The complete disappearance of symptoms is a better criterion, as most intermissions are not, in my experience, found to be completely symptomless; but this criterion is certainly not an absolute one. Again, the disappearance of specific agglutinins from the blood serum is a useful guide, but this usually takes many months or even a year or more. For practical purposes I think it is better to avoid any decision as to "cure" and to divide the cases into those in which the drug

<sup>1</sup> Dalrymple-Champneys, Sir W., *Lancet*, 1935, 2, 1449.

<sup>2</sup> MacArthur, W. P., and Wigmore, J. B. A., *British Medical Journal*, 1930, 1, 858.

<sup>3</sup> Kato, D., and Lane, C. R., *Lancet*, 1937, 2, 77.

<sup>4</sup> O'Reilly, T. J., *ibid.*, 1938, 2, 430.

## The Services

### HONORARY PHYSICIAN TO THE KING

Major-General P. S. Tomlinson, C.B., D.S.O., late R.A.M.C., has been appointed Honorary Physician to the King in succession to Major-General R. W. D. Leslie, C.B., O.B.E., late R.A.M.C., who has retired.

### R.N.V.R. OFFICERS' DECORATION

The King has awarded the Royal Naval Volunteer Reserve Officers' Decoration to Surgeon Commanders Thomas Weir Drummond, Harold Oliver Martin, and Hugh Edwin Hall, R.N.V.R.

### AIR FORCE AWARD

The George Medal has been awarded to Group Captain J. A. Gray, D.F.C., and to Acting Squadron Leader Joseph Aidan MacCarthy, M.B. The announcement in the *London Gazette* of September 9 reads as follows:

"One night in May, 1941, the pilot of an aircraft attempted to land with the undercarriage retracted. The aircraft crashed into the main bomb dump and then burst into flames. Group Captain Gray and Squadron Leader MacCarthy immediately went to the scene of the accident. Although there was some delay in getting the fire tender to the spot, owing to wire entanglements at the bomb dump, Group Captain Gray and Squadron Leader MacCarthy entered the burning aircraft and between them succeeded in extricating two members of the crew who were trapped. By the time the first man had been extricated the fire had spread from the starboard tanks to the cabin and on to the port tanks. Ammunition, incendiaries, and flares were burning in the wreckage, whilst numerous explosions erupted from the tanks. In spite of this an attempt was made to rescue the pilot, who was still trapped at the bottom of the fuselage. He was dragged clear, but his harness still held him to the burning aircraft. Before he could be released another petrol tank burst and flames spread to such an extent that any further attempts to rescue him became impossible. Group Captain Gray and Squadron Leader MacCarthy were assisted by two other officers, who both displayed great courage in their efforts. Group Captain Gray received severe burns on his head and his uniform was destroyed, but he continued his efforts until overcome by the fumes. Squadron Leader MacCarthy suffered minor facial injuries caused by burns but, despite this and the strain to which he had been exposed, he would not retire to his quarters until he was satisfied that everything possible had been done for the comfort of the injured. Both Group Captain Gray and Squadron Leader MacCarthy displayed great bravery in the most appalling circumstances."

### CASUALTIES IN THE MEDICAL SERVICES

#### ROYAL NAVY

Surgeon Commander ROBERT WALLACE NESBITT, R.N., lost his life on active service this month. He was the son of the late Mr. Alexander Nesbitt of Dalkey, Co. Dublin, and was educated at the University of Dublin, where he qualified L.M., L.Ch. in 1918. Five years later he took the degrees of M.B., B.Ch., B.A.O. of the University, and in 1928 obtained the F.R.C.P.I. He entered the Royal Navy as surgeon lieutenant in 1921, was promoted to surgeon lieutenant-commander in 1924, and to surgeon commander six years later. He had been a member of the British Medical Association since 1928.

#### ROYAL ARMY MEDICAL CORPS

The name of War Substantive Captain SAMUEL BERNARD GREENBERG is included as "Died" in an Army Council casualty list published on September 18. He was educated in South Africa and took the degrees of M.B., B.Ch. of the University of the Witwatersrand, Johannesburg, in 1930. He was house-surgeon and house-physician at Johannesburg General Hospital, and in 1931 became assistant medical officer at the Springs Mines in the Transvaal. He came to this country in 1935, and in the following year settled in practice in Bath. Soon after the war began he was granted an emergency commission as lieutenant in the R.A.M.C. and was promoted to captain last year. He had been a member of the British Medical Association since 1929.

Lieut. RICHARD MENNIE, who died on September 13, was the only son of Mr. James Mennie, J.P., and Mrs. Mennie of Golspie, Sutherlandshire. He was educated at the University of Edinburgh, where he graduated M.B., Ch.B. in 1927, proceeding M.D. five years later. He had held appointments at the Liverpool Heart Hospital and Chester City Hospital and for a time was in practice at Bradford and later at Liverpool. He was granted an emergency commission as lieutenant in the R.A.M.C. about a year ago.

### Prisoners of War

Temporary Major David Livingstone Charters.  
Captain James Edward Scott Carmichael.  
Captain John Emmerson Gray.  
War Substantive Captain Thomas Ion Victor Ferguson.  
War Substantive Captain Francis Laurence Gerard Malone.

### SOUTH AFRICAN MEDICAL CORPS

Dr. WILLIAM NEIL CAMPBELL, who has died while on active service with the South African Medical Corps in the Middle East, received his medical education at the University of Edinburgh, where he was a member of the rugby XV, and graduated M.B., Ch.B. in 1927, proceeding M.D. in 1939. He was elected a Member of the Royal College of Physicians of Edinburgh in 1935. Dr. Campbell acted as house-physician at Edinburgh Royal Infirmary in 1927-8, before returning to Durban, where he became honorary physician to the King Edward Hospital in 1937. He had been a member of the British Medical Association since 1927.

### DEATHS IN THE SERVICES

Major-General JOHN MACFARLANE SLOAN, C.B., C.M.G., D.S.O., late R.A.M.C., died at Ifield on September 10, aged 69. He was born on July 22, 1872, the son of Samuel Sloan, M.D., and was educated at the University of Glasgow, where he graduated M.B., Ch.B. in 1898. Entering the R.A.M.C. as lieutenant in 1899, he became major in 1910, received a brevet as lieutenant-colonel in 1915, and was promoted to colonel in 1923 and major-general in 1926, retiring in 1929. He served as adjutant to the Territorial Army from 1908 to 1911. He served throughout the South African War of 1899-1902, when he took part in the defence of Ladysmith, in operations in Natal, the Transvaal, and the Orange Free State, was mentioned in dispatches in 1902, and received the Queen's medal with four clasps and the King's medal with two clasps, and the D.S.O. In the war of 1914-18 he served as A.D.M.S. of Indian Expeditionary Force D in 1916-17, and as D.D.M.S. of the Third Indian Army Corps in Iraq in 1917-19, was mentioned in dispatches six times, and received the C.M.G. In 1927 he was made a C.B. He leaves a widow. At the funeral at Crawley on September 13 the Director-General, Army Medical Services, was represented by Brigadier M. J. Williamson.

## Universities and Colleges

### UNIVERSITY OF DURHAM

Frederick John Nattrass, M.D., F.R.C.P., has been appointed to the Chair of Medicine tenable at the Medical School, King's College, Newcastle-upon-Tyne, from October 1.

### UNIVERSITY OF LEEDS

The following candidates have been approved at the examinations indicated:

M.D.—L. A. Westwood.

FINAL M.B., Ch.B.—*Part II*: A. M. Bowler, S. Keidan, Bertha Klempman, E. O. Lawton, J. Lees, D. Levi, J. Lyons, Kathleen M. Packett, C. Reichman, B. Sidman, G. H. Templeman, Jean M. Terry Thomas, D. Velinsky, L. Walsh, J. L. C. Ward, A. Wertheimer.

The West Riding Panel Practitioners' Prize has been awarded to D. L. Richardson.

The medical officer of health for Bury, in submitting his annual report for the year 1940, points out that the estimated population of the borough for that year was four or five thousand less than it had been since 1919, and that this fact would tend to raise such figures as the birth and death rates, and tuberculosis and cancer death rates. In spite of this the tuberculosis death rate was the lowest ever recorded in the borough, being 0.42 per 1,000 population; the cancer death rate, in contrast, was 2.37 per 1,000, the highest so far recorded. Only one maternal death was recorded during the year, the rate being 1.32 per 1,000 total births, a low figure when compared with the general death rate of 17.54 per 1,000 population. This good result may be attributed to the excellent attendance at the ante-natal clinics. At the time of writing the report 3,061 children had been immunized against diphtheria, and as a result only 13 cases were notified in 1940, and there was only one death.