#### THE MEDICAL DEFENCE UNION

The annual general meeting of the Medical Defence Union took place on September 30. The report of the council testified to continuing success and prosperity, as evidenced by 1,368 new members elected during the year, a net gain of 688, bringing the total membership up to just over 24,000. It was stated that the war had not brought to medical practitioners any immunity from litigation based on allegations of negligence or malpraxis. Several serving members had been seriously perturbed by the litigious activities of aggrieved patients or their relatives. New problems had emerged from the conflict of partnership and legal obligations with national and local demands for the services of medical practitioners. Partnership deeds had required special amendments and in some cases temporary determination. Arbitration had been resorted to in rare cases when a partner refused to waive, cancel, or amend his legal rights in the partnership deed or to release a junior who desired or was required to join the Forces. Practitioners heavily committed financially by the purchase of their practices and practising in bombed or evacuation areas had been interviewed and advised on their special difficulties. The amount expended by the Union last year on indemnity claims and insurance was £6,117, and on law charges £4,587. Six cases were cited in which the aggregate amount expended in costs and damages was close upon £4,000. and the total received in yearly subscriptions from the six practitioners concerned since they took up membership was only £60. After a long discussion the council had decided to admit to membership practitioners of non-British nationality, provided they satisfy certain criteria and also undertake on the cessation of hostilities to give notice of their intention to withdraw from membership. Mr. St. J. D. Buxton had been elected president of the Union in succession to the late Mr. Eric Pearce Gould, and during Mr. Buxton's absence on military duties Dr. de Bec Turtle had served as acting president. The financial statement for the year 1940 was presented by the treasurer, Mr. E. D. D. Davis, who expressed the view that the report was self-explanatory and did not call for comment on its details. The report was immediately approved and adopted unanimously. A. D. Griffith, Dr. A. Lyndon, and Dr. G. de Bec Turtle were elected members of the council, and at a subsequent meeting of the elected members of council Dr. Turtle was appointed president of the Union for the session 1941-2, and Messrs, Hempsons were re-elected the solicitors to the Union.

# Local News

# ENGLAND AND WALES The Tavistock Clinic

The Tavistock Clinic (the Institute of Medical Psychology) celebrated its twenty-first birthday by a luncheon, over which Lord Alness presided, on September 29. The Marchioness of Reading, in proposing the toast of "The Clinic," sketched its progress from small things until just before the war, when ninety doctors, including clinical students and postgraduate assistants, were working in association with it. She said that the work was being continued in temporary quarters at Westfield College, Hampstead, and the home at Malet Place, Bloomsbury, had been destroyed by enemy action, but it would again have a habitation of its own, for its work would be more needed than ever after the war. Even though the British people did not get neurosis as a result of bombing, they were very likely to get it in the dread of starting life over again on a new basis. Lord Alness claimed that the clinic was an institution of national importance; he knew of no other which had stood up more gallantly to the shock of war. Lord Hollenden, the treasurer, mentioned the need for reducing the debt which weighed so heavily on the work. Colonel J. R. Rees, the medical superintendent, reminded the company that the clinic was started on the understanding that it should run for only three years, by which time it was believed that the hospitals would have developed a sufficient number of out-patient psychiatric clinics to meet the need. In fact, however, the Tavistock Clinic had never been able to catch up with the demand for its services. and indeed one of its problems had been an unshiftable waiting list. Nearly 15,000 patients had passed through the clinic since its foundation, and before the war it was giving 26,000 medical treatments a year, not taking into account the social work and ancillary services. It was also the first child guidance clinic in the country, although it never took that name. He added that of the group of doctors working at the clinic before the war, some twenty were now specialists in the fighting Services, fifteen were in the Emergency Medical Service, and eighteen in the Ministry of Pensions and various other institutions, mostly out of London, leaving about twenty-three, mostly women doctors, carrying on a splendid part-time service at the clinic. More children had been seen during the first eight months of this year than during the corresponding period in any of the previous five years. He, too, believed that after the war there would be a vast increase in psychiatric problems. When once the tension was relaxed signs of strain would appear, and then the clinic would be able to render even fuller service.

#### Queen's Institute Nurses

The Queen's Institute of District Nursing reports that during 1940 maternity cases to the number of 85,242 (in which no doctor had been engaged for the confinement) were attended by 1,530 Queen's nurses and 2,782 village or other nurse-midwives. Rather more than one-fourth of the patients were primiparae. The maternal death rate was 1.74 per 1,000 live births, of which 0.08 was due to non-puerperal causes. The death rate was slightly higher in rural than in urban areas (1.78 and 1.39 respectively). Deaths among the primiparae were 31% of the total maternal deaths. Medical aid was summoned for the mother in 31.311 cases and for the infant in 5,692 cases. An analysis of 138 maternal deaths shows that 31 were due to sepsis, 50 to accidents of labour, 17 to eclampsia, 19 to embolism, and 21 to complications. Of the fatal cases 45 were not delivered by the midwife, as it was necessary to summon medical aid before the birth. The number of forceps deliveries was 4,572, or 5.4% of the total confinements. The need for more frequent ante-natal visits, particularly during the last two months of pregnancy, is emphasized. This is particularly evident from the report on deaths from eclampsia: in 10 out of these 17 cases no symptoms were noted before coming into labour. In addition to these cases in which no doctor was engaged for the confinement, the nurses or nurse-midwives acted as maternity nurses in 36,560 cases in which a doctor had been engaged. The maternal death rate among these was 2.79.

#### **SCOTLAND**

#### Prevention of Eye Injuries: Exhibition in Edinburgh

An exhibition of appliances for the protection of the eyes in industry has been opened in the Eye Department of the Royal Infirmary, Edinburgh. It has been arranged by the W. H. Ross Foundation (Scotland) for the Study of Prevention of Blindness. At the opening of the exhibition, which conveys its information to a great extent by means of a series of enlarged photographs, Dr. Arthur H. H. Sinclair said that it was hoped that it would help workers engaged in industry, particularly in dangerous work, to realize the importance of employing the protective measures which were available. Colonel R. M. Dickson, director of the Foundation, said that under the Factories Act about 8,000 eye accidents were reported each year. Analysis of 1,000 cases of eye injury in the ophthalmic department of the Glasgow Royal Infirmary showed over 70% to be occupational in origin, the great majority of these being among metal workers and coal miners. The hazards to sight had been greatly increased recently by the expansion and speed-up of production, with large numbers of men and women in new jobs, working long hours, often under poor lighting conditions the result of the black-out. The strict enforcement of rules concerning the use of goggles and other protective devices was proving the most effective means of reducing eye injuries.

W. L. Donohue (J. Pediat., 1941, 19, 42) records a fatal case of mumps encephalitis in a girl aged 5 years, with a review of the literature. The fundamental lesion was a perivascular demyelinization similar to that seen in other cases of post-infective encephalitis.

retirement twelve years ago, he became chairman of Donaldson's Hospital, and took a close interest in the work of that institution on behalf of the deaf and dumb. He is survived by his wife and by his son, Dr. Douglas Kerr, principal police surgeon under the Corporation of Edinburgh.

#### ROBERT BRIGGS WILD, M.Sc., M.D., F.R.C.P.

We regret to announce the death at Buxton on October 7 after a long illness of Dr. R. B. Wild, emeritus professor of materia medica and therapeutics in the University of Manchester.

Robert Briggs Wild was born at Holcombe, Bury, in 1862, the son of the late Robert Wild. His scientific education was received at Owens College, Manchester, and he won prizes, scholarships, exhibitions, and medals during his student career. He graduated B.Sc. (with honours in physiology) at the Victoria University in 1883, and in the intermediate M.B. won a gold medal and exhibition in the same subject. His M.D.Lond. (1887) was also passed on gold medal standard. He actually qualified in 1884, before obtaining the London M.B. in 1886, with the L.S.A. diploma, a favourite way in the first instance of earning the means to reach higher professional steps. The M.R.C.S. He proceeded M.Sc.Vict. in 1894. followed in 1885. residence in the Manchester Royal Infirmary as house-physician he began practice in 1886 and, taking a special interest in pathology, was appointed as registrar in this subject at the hospital and for many years carried out all the necropsies himself and demonstrated their lessons. At the same time he assisted Julius Dreschfeld in lecturing on pathology, a chair of which had been established at Owens College as the first of its kind in England (1881). Wild was keenly interested in the work and was a very good teacher, clear, precise, and definite. He helped Dreschfeld in no small way to prove the importance of pathology in medical education and in having it made a subject for the Manchester medical degrees. Other examining boards followed suit. After this pathological work he joined Daniel John Leech in the materia medica and therapeutics department, lecturing and developing the experimental pharmacology laboratory, of which both Leech and he were enthusiastic supporters. Several men obtained their doctorates by research in this laboratory, Wild's scientific mind assisting them greatly in their work. He also was very helpful to Leech in the investigation of the action of the nitrites on the circulation and in getting amyl nitrite made an official preparation. On the death of his chief he succeeded to the chair, which was endowed as a whole-time office by Leech.

Wild was elected an F.R.C.P. in 1912 and was an examiner for the college for four years. He was also for some years dean of the Manchester Medical School and a prominent member of its Faculty with very definite ideas on the medical curriculum. For a time he acted as Pro-Vice-Chancellor of the University, and in later years represented it on the General Medical Council from 1922 until his retirement from Manchester in 1927. He naturally took much interest in scientific discussions and was president of the medical and pathological societies of the city. He also founded one for therapeutics alone, but it died in early infancy from neglect and inanition. Though he had a very good knowledge of general medicine and of the various methods of treating disease, Wild's chief consulting practice was in diseases of the skin, and he was the leading authority and teacher in the city after the death of H. A. G. Brooke. The Manchester and Salford Hospital for Diseases of the Skin was opened in Dale Street as a separate institution from the Lock and Skin Hospital, for the sole treatment of diseases of the skin. Walter Whitehead was the chief actor in this desirable divorce, and one of his junior colleagues helped him for a few months in 1892 in seeing the patients. Wild's name was then suggested as an assistant, and this being agreeable he saw all Whitehead's cases in an unofficial capacity until he was elected honorary assistant physician in 1894. For many years he was the mainstay of the Christie Cancer Pavilion and Home which was founded in 1882 with this title, subsequently changed to that of the Christie (Cancer) Hospital and Home. He took the physician's side of the treatment and played a very active part in the administration of the hospital. He tried every medical remedy with a reputed action for good on cancer that was suggested to the hospital.

He found, however, that few had any value in relieving pains and distress, let alone curing the disease. He wrote many papers on the actions and uses of medicines and on diseases of the skin, including cancer.

Prof. Wild was a member of the British Medical Association for thirty-eight years, and at the Annual Meeting in Manchester in 1902 he served as vice-president of the Section of Pharmacology. In 1909, at the Belfast Meeting, he was vice-president of the Section of Dermatology and Electrotherapeutics; at the London Meeting in 1910 he was vice-president of the Section of Dermatology; and at Bath in 1925 he held office as president of the Section of Therapeutics. He served on the Standing Therapeutics Subcommittee of the Association in 1919-21.

# Universities and Colleges

#### UNIVERSITY OF CAMBRIDGE

Titles of the degrees of M.B., B.Chir. were conferred by diploma during September on J. I. Hallinan of Girton College, and on J. W. Shrimpton of Newnham College.

J. Morton has been approved at the examination for the Diploma in Medical Radiology and Electrology (Part II).

#### Vice-Chancellor's Valedictory Address

At a Congregation of the Senate held on October 1 Mr. E. A. Benians, Master of St. John's College, resigned the office of Vice-Chancellor, and Dr. J. A. Venn, President of Queens' College, was admitted as his successor for the year 1941-2. In the course of an eloquent address Mr. Benians gave a survey of the second year of war in its relation to the academic life of Cambridge, and recorded benefactions, losses by death, and the departure on national service of many university officers. He spoke of a Christmas message from the Universities of Harvard and Yale expressive of the bonds of friendship that unite the two countries and of the common ideals and traditions shared by English and American scholars, adding his own plea for a new consideration by the History Faculty of the educational value of American history. Coming to the general administration of the University he noted the heavy burden caused by depletion of staffs during a year of full activity in which no essential function had been suspended. The many calls made upon accommodation in Cambridge had strained resources to the utmost, and he doubted if university and college buildings had ever been more fully used. Emergency regulations, the absence of many teachers, the addition of special courses, adjustments and readjustments of many arrangements, had imposed a continuous strain on the central administration. Work on new buildings and the reconstruction of old ceased with the outbreak of war, and only what was necessary for the wartime protection of buildings had been undertaken. With regard to the educational activities of the year Mr. Benians said that the decision of the Government that the continuance of university education was essential to the present and future interests of the nation was a call to maintain work to the best of everyone's powers. The results of the examinations showed no falling off in the quality of students' work. With a grateful acknowledgment of the help given him from all sides he said, "Looking back on the two years of war which have now passed years in which we have been so closely occupied with urgent business as to have little time for general reflection—I see the University finding its place in the national effort. I see, too, the growing recognition in all quarters of the importance of the universities as schools of character and schools of professional training, and none who have followed the trend of events in the last two years can fail to see that great tasks will be laid upon them when peace returns. Universities have long ceased to be gardens walled around; more and more are they drawn into the forefront of modern life; more and more is it realized that education, learning, and research are the root of national effort and not merely a splendid efflorescence. . . . The universities will have a great part to play in repairing the national loss. Commerce and industry, as well as education and the public services, will, I believe, look more and more to the universities for men of character and ideals, and connexions made in time of war must not be abandoned in peace. We have to bring our science into close and fruitful contact with industry and administration and to send forth chivalrous leaders into industrial life and fit teachers into all the fields of education. The Empire over-seas will make great claims upon us. Thus, while give all assistance we can to every side of the national effort, it remains vital, for the sake both of present and of future needs, that we should also keep in efficient being the great educational

institutions of which we are at the moment the guardians. We talk of our own affairs, but it is the common task and the common peril that press upon us. History knows no such scene as that in the midst of which we contend to-day, nor was ever more at stake. The pursuit of truth and the dominion of reason are the articles of our faith. All that is ennobling in man's long struggle issues from them. Yet, if freedom perish, they will perish."

# ROYAL FACULTY OF PHYSICIANS AND SURGEONS OF GLASGOW

At a recent meeting of the Royal Faculty of Physicians and Surgeons of Glasgow, the President, Mr. Roy F. Young, in the chair, the following were admitted Fellows of Faculty: James Walker Ferguson, M.B., Ch.B., Hector Ross MacLennan, M.D., M.R.C.O.G., Thomas Semple, M.B., Ch.B., Harry Ellis Charter Wilson, D.Sc., M.B., Ch.B.

### Medical Notes in Parliament

#### Post-war Hospital Policy

Sir Francis Fremantle on October 9 asked the Minister of Health whether he was in a position to indicate the general lines of the Government's post-war hospital policy. Mr. Ernest Brown, in reply, made the following statement:

The question of post-war hospital policy and reorganization, more particularly in relation to the Emergency Hospital Scheme, has for some time been engaging the attention of the Government. While any immediate reorganization must be regarded as impracticable in present circumstances, certain broad principles can be laid down as the basis of Government policy.

It is the objective of the Government, as soon as may be after the war, to ensure that by means of a comprehensive hospital service appropriate treatment shall be readily available to every person in need of it. It is accordingly proposed to lay on the major local authorities the duty of securing, in close co-operation with the voluntary agencies engaged in the same field, the provision of such a service by placing on a more regular footing the partnership between the local authorities and voluntary hospitals on which the present hospital services depend. The Government recognize that to achieve the best results and to avoid a wasteful multiplication of accommodation and equipment it will be necessary to design such a service by reference to areas substantially larger than those of individual local authorities. It will be the aim of the Government also to avoid overlapping and uneconomical expenditure by securing the provision of the more highly specialized services at teaching hospitals and other centres selected to serve these wider areas and by arranging for a proper division of function between hospitals in these areas.

With regard to the financial aspects of the Government's proposals, it is their intention to maintain the principle that, in general, patients should be called on to make a reasonable payment towards the cost, whether through any contributory schemes or otherwise. In so far as any new burden may be thrown upon local authorities in providing or maintaining hospital accommodation, or in contributing towards the expenditure of voluntary hospitals, a financial contribution, the extent of which will be a matter for further consideration, will be made available from the Exchequer. Special arrangements for dealing with the teaching hospitals by way of increased educational grants are in contemplation.

In present circumstances the arrangements for hospital services must be determined by wartime requirements, but the Government are anxious to take every step to avoid any unnecessary delay. I have already had preliminary discussion with the bodies representing the municipal hospital authorities and the voluntary hospital movement, and I am hopeful that these discussions will be continued. With their concurrence I am instituting a survey of hospitals in London and the surrounding area to provide the information needed as a basis for future plans. As regards the remainder of the country, valuable preliminary work has already been done in some areas by bodies representing both the municipal and voluntary hospital authorities, in particular by an organization formed under the auspices of the Nuffield Provincial Hospitals Trust. In any surveys which it may be found necessary to institute in the Provinces, I shall have full regard to

the information already available in this way, which I am glad to know will be at my disposal for the purpose.

I am asked by the Secretary of State for Scotland to take this opportunity of stating that the aims of future policy in Scotland are generally similar, but that certain important differences in the Emergency Hospital Service and in the methods of financing voluntary hospitals in Scotland are being given special consideration.

Sir Francis Fremantle asked if the survey would be carried out simply by the officials of the Department concerned or if officials of the local authorities would be consulted along with professional or other outside persons who were interested. Mr. Brown replied that he would do his best to see that the most competent persons were consulted, including local bodies.

Asked by Dr. Haden Guest if he would consider hospital policy in relation to the future of the medical profession as a whole, with a view to bringing forward a scheme for a general health service in the country, Mr. Brown stated that that was a wider question, and the hospital service must be considered first. The Minister also said that the general control to be exercised by his Department would secure that in the design of the scheme for the future hospital service full opportunity would be given to the voluntary hospitals to play their part.

#### **Invalids' Special Rations**

On September 30 Major LLOYD GEORGE circulated the following table of weekly supplementary allowances of rationed foods for invalids:

Disease	Supplementary Allowance		Coupons to be
	Food	Quantity	surrendered
Diabetes	Butter and margarine Meat	12 oz. (not more than 4 oz. butter) 2s. 4d. adult, 1s. 2d. child under 6	Sugar
Diabetes—vegetarians only Hypoglycaemia Steatorrhoea	Cheese Sugar Meat	8 oz. 16 oz. 4s. 8d. adult, 2s. 4d. child under 6	Sugar  Butter and margarine
Nephritis with gross albuminuria and gross oedema; also nephrosis	Meat	3s. 6d. adult, 1s. 9d. child under 6	_

Lord Woolton's medical advisers are of opinion that, provided adequate supplies of vitamin C are available, there is no need for a special supply of oranges for anyone suffering from any disease or injury. Major Lloyd George could not adopt a suggestion that, during the children's priority period or immediately after, oranges should be made specially available to invalids, and that the special requirements of tuberculous patients should be recognized.

#### Orthopaedic Treatment in Scotland

Mr. Tom Johnston gave an assurance on October 1 that the six new orthopaedic units in Scotland were on the lines recommended by the Delevingne Committee. There were ten orthopaedic surgeons, of whom four were employed whole-time. The junior staff consisted of one junior surgeon, who acted as registrar in each of the units except Peel Hospital, Selkirkshire. Other junior staff were attached to each unit by the medical superintendent up to three per 200 beds.

#### Home Guard Medical Officers

Mr. Ernest Brown explained on October 1 that to avoid undue interference with the medical organization of the locality Army Council instructions provided that no medical practitioner was to be enrolled in the Home Guard unless previous permission had been given by the Local Medical War Committee. It was open to any practitioner aggrieved by the Committee's decision to communicate with the Central Medical War Committee, under whose general directions the local committees acted in this as in other matters relating to the selection of doctors for wartime services. If dissatisfied with the conclusion of the central committee the practitioner could make representations to Mr. Brown, who would be prepared to consider them. There was no representative of the Home Guard as such in the central committee, but an observer attended on behalf of the War Office.

#### Diet of Workers in Heavy Industries

Mr. James Griffiths opened a debate on October 2 about food distribution, and dealt with the special needs of miners and steel workers of South Wales. Prof. A. V. Hill said the man who worked at a level of 6,000 calories a day could not remain healthy and contented on the same diet as the sedentary worker plus extra bread. He needed at least one-fifth of his energy in the form of fat and must have 2½ lb. of fat weekly. That was impossible on the present ration. Vitamins could not replace energy in the diet of heavy workers.

Major LLOYD GEORGE said the nation was better off for staple foodstuffs than last year or, in some cases, than before the war. He hoped that by mid-November a scheme would be introduced for the fair distribution of unrationed commodities. The Government did not propose to alter its policy of giving the maximum ration to all consumers rather than a supplementary ration to particular classes at the expense of the community. They had encouraged the setting up of canteens and British Restaurants, and would increase food supplies to transport cafés on the main roads. Canteens for mine workers were being provided more rapidly. For all canteens in a first priority category, to be decided in consultation with Mr. Bevin, the Ministry of Food hoped to couble the meat ration, to treble the sugar allocation, and to increase the allowance of cheese. Announcements would soon be made on school feeding.

Sir E. Graham-Little said the effort to popularize the national wholemeal loaf had not been highly successful. Compulsion would have effected an immediate result. The wholemeal loaf was not in general supply, and for fourteen months the nation had fed on an inefficient and fallacious diet.

Dr. Edith Summerskill said Lord Woolton should direct his attention to the fact that pulmonary tuberculosis, which often resulted from under-nourishment, was increased in this country, particularly in the age groups between 18 and 40. Expectant mothers working in factories should have equal consideration with those who were doing heavy manual work. Major LLOYD GEORGE promised close attention to the points raised in the debate.

#### Diphtheria Immunization

Replying on October 2 to Mr. W. Leach, Mr. ERNEST BROWN said immunization of children against diphtheria necessitated two, or at most three, injections of the prophylactic. It was considered that immunity, once established, persisted for years and perhaps for life. Inoculation was carried out only with the written consent of the parent or guardian of the child. The Ministry of Health did not accept responsibility for any mishap arising out of inoculation.

#### Rehabilitation of Disabled Persons

Mr. ERNEST BEVIN, in answer to Sir Francis Fremantle, said the Ministry of Labour had started the interviewing of disabled persons in hospital, in conjunction with the hospital authorities. A leaflet had been prepared which described the interim scheme for resettlement and training of disabled persons. He was consulting other Departments in order to develop a wider national scheme.

On October 2 the Minister stated that circulars had been sent to hospital authorities setting out arrangements for treatment, rehabilitation, and subsequent training of fracture cases. Patients had been successfully treated at centres which had been in operation for some time, but statistics were not available.

#### Mustard Gas Decontamination

On October 9 Mr. Groves asked the Parliamentary Secretary to the Ministry of Supply whether he had yet received the report of the re-examination of a basic pharmaceutical ingredient consisting of a dehydrated calcium hypochlorite admixed with a dehydrated sodium perborate; and whether the results of the examination disclosed that such product was an effective decontaminant of the eye from mustard gas. Mr. H. Macmillan said that several reports on the mixture referred to had been received. They showed that it was not an effective decontaminant for the eye after contamination with mustard gas.

## The Services

#### NAVAL AWARD

The D.S.C. has been awarded to Surgeon Lieut, Eric Arthur Penn, R.N. (H.M.S. *Ladybird*), for courage and coolness when his ship was sunk by enemy aircraft.

#### R.A.F. COMMENDATION

The King has ordered the publication of the name of Flying Officer Frederick Alastair Forbes, R.A.F.V.R., as having received an expression of commendation for brave conduct in connexion with civil defence.

#### CASUALTIES IN THE MEDICAL SERVICES

#### ROYAL ARMY MEDICAL CORPS

Wounded

Colonel Cyril Popham.
War Substantive Captain Edward Alexander Robertson.

#### SOUTH AFRICAN MEDICAL CORPS

Lieut.-Colonel John Gerald McMenamin, the eldest son of Mr. J. J. McMenamin of Capetown, died on active service in Abyssinia in April. He received his medical education at 'St. Bartholomew's Hospital, London, and qualified M.R.C.S., L.R.C.P. in 1924. For some years he was honorary assistant physician at Germiston Hospital, Transvaal.

### Medical News

Prof. R. R. Macintosh will deliver a lecture on "Anaesthetics in Wartime" at the Weston Hotel, Bath, on Thursday, October 23, at 5.30 p.m. All Service medical officers and civilian practitioners will be welcome.

The first scientific meeting of the Nutrition Society, the formation of which was announced in our last issue at page 521, will be held at the Physiological Laboratory, Downing Street, Cambridge, to-day (Saturday, October 18), beginning at 11 a.m. Buffet lunch and tea will be provided.

A meeting of the Medico-Legal Society will be held at 26, Portland Place, W., on Thursday, October 23, at 4.30 p.m., when Dr. T. Christie will read a paper on "The Manic-depressive Psychoses (in Relation to the Crime of Murder), with some Medico-Legal Points."

At a meeting of the Leeds and West Riding Medico-Chirurgical Society held on October 3 Dr. A. Massey, C.B.E., Medical Officer of Health for Coventry, gave a lecture on "Emergency Hospital Work—Coventry Experiences."

A war memorial fund is being formed in memory of the four staff masseuses who lost their lives when St. Thomas's Hospital was bombed in September, 1940. Donations should be sent to: Miss M. Randell, C.S.M.M.G., Massage School War Memorial Fund, St. Thomas's Hospital, S.E.1.

Dr. James Macfarlane of the Department of Health for Scotland has been appointed medical liaison officer at the Scottish Office, Fielden House, London. He will maintain liaison with the Ministry of Health and medical branches of the Services Departments and other Government Departments located in London.

At the invitation of Dr. H. Lightstone, the Director-General of Medical Services, Ministry of Pensions, a conference of the orthopaedic surgeons attached to the Ministry of Pensions hospitals was held at Queen Mary's Hospital, Roehampton, from September 24 to 26. Mr. G. R. Girdlestone, honorary consultant to the Ministry, presided. Demonstrations were given in the wards by Mr. George Perkins and Mr. T. Pomfret Kilner, and in the limb-fitting centre by Dr. A. Kelham and Captain Maxwell. Lieut.-Commander J. Bunyan, R.N.V.R., by permission of the Admiralty, showed a cinematograph film illustrating his method of the treatment of burns and other injuries by irrigation envelopes, and demonstrated a number of cases treated in this manner (see *British Medical Journal*, July 5, 1941).