advice was greatly valued by Smith Whitaker, then the chief medical adviser to the Ministry on the Insurance side, and by Sir Robert Morant, its secretary. Fulton's official duties, which were mainly concerned with Yorkshire, were carried out with his usual tact and sound judgment until the time of his retirement. But to me the quality of the man was best shown during the last war when on his Local Medical War Committee and in co-operation with headquarters he organized the doctors in his district in a way which was not surpassed in any other area. The Notts area was exceptionally heavily depleted of doctors, but Fulton and his colleagues met the situation with great ingenuity and courage, and originated many ideas for the more economical use of doctors, which the Central Medical War Committee was preparing to adapt for use throughout the country if the incessant drain of practitioners into the Army had gone on. The Armistice fortunately intervened.

Since his retirement he had lived in Harrogate, where he continued in a quiet way to make himself useful to his profession and his neighbours. The older members of the profession who knew Fulton would, I am sure, agree with me that it was a privilege to know and work with a man who had such a great fund of common sense and good humour. He was always listened to with great respect in any committee in which he took part. Fulton had no family, but no notice of his career which is more than formal would be complete if it did not mention that he often said that but for his wife's interest in his medico-political work he could never have thrown himself whole-heartedly into work for his professional brethren.

### A. I. SIMEY, M.D.

The following appreciation of Dr. Simey, supplementing the memoir published on Sept. 11, has been sent by Dr. J. N. Wheeler of Rugby.

A. I. Simey was an instance of all too rare combinations-a firstclass classic devoting himself to science and medicine, and again a man with the qualifications and attributes of a first-class consulting physician, imbued with the unselfish motive of love of his old school, of which he had been senior classic and head boy in his time, and drawn by an unalloyed interest in youth, devoting his life to the health of that school as its medical officer. A classical education at a public school and university is a fine preparation for our profession, and there are very many of us who feel that it is a retrograde system which rushes a boy into the precocious specialization of First M.B. work while still in the upper forms of school. former gives a man the basis of a maturer mind's wider outlook in the choice of a profession, and we should remember that it was only the expected shortage of doctors to fill the demands of Government services which has introduced the element of far too early

Simey was full of selfless philanthropy in the best sense of the word. Never swayed by selfish ambition, he saw no higher aim than to devote his gifts to the service of the young and of his Alma Mater. He was full of acts of sympathy and kindness to little children, and of friendliness and hospitality to Rugbeians past and present, and in the latter his wife took the share of a true and very gracious When he came to Rugby and was appointed hon. physician to the Hospital of St. Cross, this voluntary hospital was not yet more than a large cottage hospital of 40 to 60 beds. He left it a thriving and growing general hospital of the smaller class with more than double that accommodation. In this metamorphosis he played a large and untiring part as a member of the Board of Management and of its House and Finance Committee, always taking a very friendly interest in the nursing staff and their health and social activities. He was instrumental with Bernard Relton and others in bringing to birth the Rugby and District Medical Society—a happy social and scientific medical association entirely free from political taint. His wide sympathies made him a most patient and wise counsellor and friend to his colleagues in difficulties arising in practice or in hospital work, and his retirement, forcing him as it did to leave the town and start work as a consultant in the South-Western Counties where he already had connexions, meant a really great loss to the rest of the profession in and around Rugby. As a physician he was a most exact clinical observer and accurate diagnostician, as well as an artist in note-taking. Records meant very much to him in the interests of the after-care of his patients, and when he retired he passed on their dossiers most helpfully to their subsequent medical advisers. He would also feed out whole case sheets to his R.M.O.s by bedside dictation at the hospital. His cultured scholar's mind was helped by a wide range of reading and an exceptional memory for the old classics, which were to him a never-failing source of colour and humour that ran through his thought and talk, his letters to his friends, and even these clinical notes.

He was an expert botanist and a born naturalist; the birds and the wild flowers were his friends and his hobby. He knew the haunts of rare wild flowers and ferns in many scattered parts of England. As a friend he was as strong as the Northern fells among which he grew and whose height and breadth he loved.

### WILLIAM PASTEUR, M.D.

Mr. VICTOR BONNEY writes: In the obituary tributes to the late Dr. William Pasteur his chief claim on posterity—namely, that he discovered, described, and put on the map of medicine for all time the condition known as massive collapse of the lungis not made clear. I am sure that all those who served with or under him would wish that this, his outstanding achievement, should be permanently associated with his name.

Dr. G. P. SHERWOOD writes: In the passing of Dr. William Pasteur the profession has lost one of the fast-dwindling members of the top hat and frock coat era who were the pioneers of the profession as it is to-day. Those of us who had the advantage of learning under his tuition must have a sad sense that with him has passed a real friend. To say he had dignity sounds too cold. There was a warmth and kindliness blended with that dignity, a sort of paternal interest that he always seemed to take in his students, that must have left with all of them a life-long affection for "Bill" Pasteur. To this careful teaching and kindly interest many must owe a deep sense of gratitude. There was that in his whole manner, quiet, dignified, and kindly, that only one word, used in its true and unhackneyed sense, can adequately describe, and those students must feel that here has passed a true gentleman and a true friend.

# Universities and Colleges

### UNIVERSITY OF CAMBRIDGE

The list printed last week of those upon whom titles of the degrees of M.B., B.Chir. were conferred during July and August was incomplete. The names should read J. Hardy, V. U. Lutwyche, M. Sidgwick, and Mrs. A. B. Willcock.

# ROYAL COLLEGE OF SURGEONS OF ENGLAND

Arnott and Erasmus Wilson demonstrations and Museum lecturedemonstrations will be given at the College (Lincoln's Inn Fields, W.C.), Monday to Friday, Oct. 18 to Nov. 5. All the demonstrations begin at 4 p.m. and are open to advanced students and medical practitioners.

# The Services

Temp. Surg. Lieut. P. R. C. Evans, R.N.V.R., has been awarded the George Medal for gallantry in services to the wounded after his ship had been damaged by an explosion. Enduring great pain, and with both his ankles broken, Surg. Lieut. Evans continued to

tend the wounded for many hours.

Temp. Surg. Lieut. R. H. Jones, R.N.V.R., has been awarded the

D.S.C. for courage and resolution in enemy coastal waters. Surg. Cmdr. J. V. Williams, R.N., has been appointed a Commander of the Order of Orange Nassau for services to the Royal Netherlands Navy.

Capt. W. K. MacDonald, R.C.A.M.C., has been awarded the M.C. in recognition of gallant and distinguished services in Sicily. Surg. Cmdr. W. T. R. Chapman and Surg. Lieut.-Cmdr. S. B. Levy, R.N.V.R., have been awarded the R.N.V.R. Officers' Decoration.

The Order of Polonia Restituta (Officer) has been conferred on Acting Wing Cmdr. H. P. R. Smith, R.A.F., by the President of the Republic of Poland in recognition of valuable services rendered

in connexion with the war.

Group Capt. W. J. G. Walker, R.A.F., Wing Cmdr. R. M. Outfin, R.A.F.O., and Squad. Ldrs. M. O. Richardson, R.A.F., P. A. Gimson, and J. F. Houlihan, R.A.F.V.R., have been mentioned in dispatches.

### CASUALTIES IN THE MEDICAL SERVICES

Fl. Lieut. Gordon Worsley Bellis, who lost his life on Sept. 17 in a flying accident, was born in March, 1914, studied medicine at Charing Cross Hospital, and qualified M.R.C.S., L.R.C.P. in 1940. After a house post at Ashridge Hospital, Berkhamsted, he was appointed to a commission in the Medical Branch, R.A.F.V.R., on July 25, 1941. At the time of his death he was medical officer to a squadron operating over-seas.

Previously reported missing, believed prisoner, now recorded killed in action, June, 1942.—Major H. M. R. Knight, R.A.M.C.

Prisoners of War.—Fl. Lieuts. D. A. Duthic, R.A.F., F. A. Forbes, C. B. I. Willey, F. R. Philps, A. F. Rutherford, R. R. McSwiney, L. C. Liddell, B. A. Stoll, H. J. Knox, R. G. Blackledge, J. Simpson, P. J. Connolly, B. L. N. Morgan, J. Lillie, F. W. Parke, M. H. Kinmonth, R.A.F.V.R.

Correction.—Capts. (Temp. Majors) A. R. Clarke and W. C. Gledhill and Capt. C. J. Cobbe, R.A.M.C., have been appointed M.B.E. (Military Division) in recognition of gallant and distinguished services in North Africa, and not O.B.E. as stated on Oct. 2, p. 439.

# Medical Notes in Parliament

### Discussion before the White Paper

Sir E. Graham-Little on Sept. 21 asked the Minister of Health whether he would explain in the forthcoming White Paper that the scope of the discussions he had been conducting with the Representative Committee was limited throughout by the stipulation that negotiations must be based on the acceptance of the decision taken by the Cabinet that a unified health service covering 100% of the population would be instituted, and that its local administration would be in the hands of local authorities under the ultimate control of a Minister who would be responsible to Parliament. Mr. Ernest Brown said that while he could not accept all the implications of the question, he agreed that the proposed White Paper reviewing this subject should make clear what preliminary steps (including discussions with the medical profession and others), had already been taken, and in what circumstances.

On Sept. 23 Mr. E. Brown told Mr. Robert Morgan that

On Sept. 23 Mr. E. Brown told Mr. Robert Morgan that a number of other organizations had communicated with him on the subject of a National Health Service besides representatives of the medical profession, local authorities, and voluntary hospitals. He had made it clear, however, that when the White Paper was published he would be ready to receive from organizations and persons interested any representations which they wished to make in the light of their study of it. It would therefore be misleading to publish at the present time a list of those organizations who had communicated with him in advance, other than those whom he especially invited to enter into preliminary discussions.

### Nutrition in Newfoundland

On Sept. 21 Mr. ATTLEE told Mr. Parker that he had recently approved proposals by the Commission of Government for launching a special nutrition campaign under the auspices of the Nutrition Council in Newfoundland. An expert dietitian was being engaged for the purpose, and certain other measures recommended by the council—e.g., for the importation of chemically reinforced flour—were also being introduced. It was hoped by these means to bring about a general improvement in dietary habits and to check at the outset the spreading of deficiency diseases, which, notwithstanding improved economic conditions, had lately tended to reappear.

### Inoculation against Typhus

On Sept. 21 Sir James Grigg, replying to Mr. Leach, said that all inoculations in the Army were voluntary. Every soldier now going to North Africa was, however, encouraged to receive this form of protection against typhus, and the majority of the troops in this theatre of operations had been inoculated. This type of inoculation had only been used for a short time, and statistics were not yet available; but experience indicated that it was valuable both in preventing the disease and in lessening its seriousness if it was contracted. Mr. Leach asked to what experience Sir James Grigg was referring when he said it was justified. Sir James Grigg: Experience in the pathological laboratories and in the few cases where typhus had appeared.

# Medical Care of Civil Defence Casualties

Mr. Ernest Brown informed Sir Ernest Graham-Little on Sept. 21 that casualties occurring in Civil Defence units were treated in the same way as casualties in the rest of the civilian population, at first-aid posts and hospitals included in the Emergency Medical Services, which were staffed by experienced surgeons equipped with the latest methods for the treatment of wounds bacterially infected or contaminated by mustard gas or similar gases. In making these arrangements his officers had consulted the Ministry's consultant advisers, the Medical Research Council, and the experts attached to the Ministry of Supply, and the numerous instructions issued to medical staffs

of first-aid posts and hospitals were based on their advice. The Bunyan-Stannard envelope method of treatment was available for the use of those medical officers who wished to employ it.

#### Registration of Older Women

Opening a debate on Sept. 23 on man-power, Mr. ERNEST Bevin said he had registered every man between 18 and 51 and all women between 18 and 47—10,000,000 men and 10,000,000 women. Of 33,000,000 people between 14 and 64, 22,750,000 were in the Services, Civil Defence, or paid employment. In the country there were nearly 16,000,000 males between 14 and 64, over 15,000,000 of whom were in the service of the country or in paid employment. Of 17,000,000 women between the same ages, 7,750,000 were similarly engaged. Over 1,000,000 other women were doing voluntary work, including Of single women between 18 and 40, 91% were That left only 9% for sickness and various ailments. nursing. working. More than 1,000,000 men and women over 65 were in paid employment. He was unimpressed by the medical arguments against registration of women between the ages of 45 and 50. When he had registered nurses and midwives up to 60 no one made a protest. He recognized that he would have to exercise great care with these women. None of them would be required to live away from home. There would be sympathetic treatment as regards their health and recognition of the difficulties of women in this age group. Sir Henry Morris-Jones said that in women of these age categories inevitable disturbances occurred. The Government should not add anything to their difficulties which could not be proved to be necessary.

When the debate was resumed on Sept. 24, Mr. McCorquodale said that pleas for women between 47 and 50 in respect of physical fitness would be treated sympathetically. Mr. Holdsworth asked if the appeal board would be able to go against a doctor's certificate. Mr. McCorquodale replied that if the doctor's certificate was not clear or if other circumstances presented doubt it might be arranged for the woman to have independent examination, but that was not to be the normal practice. In the main in these age groups a medical certificate would be accepted without hesitation. All the women in these groups would be regarded as immobile; those up to 46 were regarded as mobile.

Dr. RUSSELL THOMAS outlined the symptoms of the physiological and anatomical changes occurring in a woman between 45 and 51. The health fluctuated from week to week, and the question was not one of getting a medical certificate for two or three weeks. Proneness to accident and tendency to suicide were greater at that time of life than at any other. If a woman of that age said she was not up to work she should have the benefit of the doubt.

### Shortage of Staff in Hospitals

Mr. Messer said that, notwithstanding applications to bring hospitals under the Essential Work Order, nothing had been done, and a grave situation was approaching. The Ministry of Health had brought out a scheme to attract people to have treatment for tuberculosis, but wards were closed because there was no staff. At Harefield Sanatorium the domestic staff were in the ratio of two for every 58 patients—70 below establishment. Hillingdon General Hospital was 40 under establishment in the domestic department. He hoped the Minister would not wait for the Hetherington Committee's report before acting. The Middlesex Hospital had required a typist familiar with medical terms. The Minister had confirmed a refusal by the National Service officer to allow such a typist from Essex Insurance Committee to take the job. Yet the local employment exchange provided another typist who knew nothing of medical terms. Special hospital man-power boards might overcome such difficulties. At Clare Hall Sanatorium the pharmacist received his calling-up papers. Arrangements were made for another to take the job, but the Central War Pharmacy Committee said that if the man did so his reservation would be cancelled.

Replying to the debate, Mr. Bevin said that he hoped to receive the Hetherington report in a few days. When he got it he would try to get the domestic side of the hospital service put right out of the registrations he had made and was now making. He knew that present difficulties reduced the efficiency of the trained nurses.

Notification of Venereal Disease.—Mr. ERNEST BROWN, on Sept. 23, told Lord Fermoy that he was not satisfied that the result of making venereal diseases notifiable would be to help in the control of the disease. He was keeping the mattr under consideration, but there had not yet been time to judge the effectiveness of the measures already taken.

T.T. and Accredited Milk.—The proportions of the total sales of milk in England and Wales which are of tuberculin-tested and accredited standards are 6% and 35% respectively.