

## Universities and Colleges

### UNIVERSITY OF CAMBRIDGE

N. Whittaker, M.B., B.Chir., has been approved for the degree of M.D. in absence. The degrees of M.B., B.Chir. were conferred by proxy upon J. W. Fawcett at a Congregation held on Oct. 30.

### ROYAL COLLEGE OF SURGEONS OF ENGLAND

The Duke of Gloucester has honoured the College by accepting its Honorary Fellowship. This forms a fitting climax to the celebration of the centenary of the F.R.C.S. and is particularly pleasing because it enables the Council to show appreciation of His Royal Highness's work for the sick and wounded in his capacity as President of the War Organization of the British Red Cross and Order of St. John, King Edward's Hospital Fund for London, and the British Empire Cancer Campaign.

### ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH

At the quarterly meeting of the College held on Nov. 2, with the President, Dr. Charles McNeil, in the chair, Dr. Ian Murray (Glasgow) and Dr. Harry Stalker (Edinburgh) were introduced and took their seats as Fellows of the College.

The Hill Pattison-Struthers Bursaries in Anatomy and Physiology, and Clinical Medicine, were awarded to William Rhind Brown and Peter Douglas Kemp, respectively.

### ROYAL COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS

By order of the Council, Regulation 3 for the D.R.C.O.G., relating to practitioners who have not fulfilled the requirements of Regulation 2 in respect of resident appointments, will be suspended after March 1, 1944, for the duration of the present emergency.

## Medical News

The address of the National Smoke Abatement Society is now: Chandos House, Buckingham Gate, Westminster, S.W.1.

The British Institute of Philosophy announces a lecture entitled "Our Knowledge of Other Minds," to be given by Mr. D. M. Mackinnon at University Hall, 14, Gordon Square, W.C., on Friday, Nov. 26, at 3 p.m.

A conference on the causes and prevention of pre-natal and neonatal deaths will be held on Thursday, Nov. 25, at 4.30 p.m. in the Council Chamber, Paddington Town Hall, with Dr. G. de Swiet in the chair.

At its next sessional meeting in Chesterfield Town Hall on Nov. 27, at 10.30 a.m., the Royal Sanitary Institute will hold a discussion on houses of the future, with special reference to the housewife's needs. The honorary local secretary is Dr. J. A. Stirling.

A refresher course in tuberculosis for general practitioners will be held on Thursday afternoon, Dec. 16, and all day Sunday, Dec. 19, at the Medical Society of London, 11, Chandos Street, W.1. The course has been arranged by the Joint Tuberculosis Council and National Association for the Prevention of Tuberculosis Joint Committee on Education, in collaboration with the Local Medical and Panel Committee for the County of London and the London Public Medical Service. The fee is £1 11s. 6d. An applicant who is a member of the London Public Medical Service may have the fee remitted by that body and deducted from his account. Early application should be made to Dr. Harley Williams, Tavistock House North, W.C.1. Lecturers and subjects are as follows: Dr. Joseph Smart, "Modern Methods of Diagnosis"; Dr. James Maxwell, "Some Points in Home Management"; Mr. T. Holmes Sellors, "Collapse Therapy"; Dr. Peter Kerley, "Diagnosis by X Rays"; Dr. C. H. C. Toussaint, "Facilities offered by Local Authorities for the Prevention, Diagnosis, and Treatment of Tuberculosis"; Dr. W. P. H. Sheldon, "Tuberculosis in Children"; Dr. Andrew Morland, "The Peculiarities of Tuberculosis."

The Government of India has appointed a committee, with Sir Joseph Bhore as chairman, to investigate all aspects of public health in India, both curative and preventive. The committee is part of the Government plan for post-war reconstruction. It will first survey the whole field, including health and medical relief services, health education and propaganda, nutrition, industrial conditions in relation to health, and nursing services, and will afterwards suggest a plan for development. Subcommittees have been set up to deal with public health, medical relief, industrial health, medical education, and medical research.

Surg. Cmdr. George A. Mason, F.R.C.S., has been appointed thoracic surgeon to the British Legion Village (Preston Hall, near Maidstone, Nayland Sanatorium, near Colchester, and Douglas House, Bournemouth). His appointment began on Nov. 1. Since the death on service of Mr. Laurence O'Shaughnessy in the early days of the war, there has been an interruption in major thoracic surgery at Preston Hall, but it is now hoped to utilize Preston Hall as a centre for surgical treatment of patients from all three institutions now under the British Legion.

## Letters, Notes, and Answers

All communications in regard to editorial business should be addressed to THE EDITOR, BRITISH MEDICAL JOURNAL, B.M.A. House, TAVISTOCK SQUARE, LONDON, W.C.1.

ORIGINAL ARTICLES AND LETTERS forwarded for publication are understood to be offered to the *British Medical Journal* alone unless the contrary be stated.

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### ANY QUESTIONS?

#### Pernicious Anaemia and having Children

Q.—An apparently healthy woman of 30 has relatives who suffer from pernicious anaemia. (1) Her mother has had it for many years and is under constant liver therapy; she has a proved achlorhydria. (2) Two of her mother's brothers have died from this disease, and a third suffers at present. (3) Her sister at the age of 29 had a subtotal hysterectomy for fibroids and very nearly died after the operation from haemorrhage of haemophilic type; she was saved only by numerous blood transfusions; she was later found to have a colour index over 1 and an achlorhydria. The woman refuses to undergo blood or gastric juice investigation, but insists that it will be quite safe for her to have a child. Should this woman have a child from the point of view of (a) her own safety at parturition, and (b) the child inheriting a tendency to a haemopoietic disorder?

A.—The woman's refusal to undergo investigation of the blood or gastric juice is probably based on the fear that pregnancy will be forbidden if an abnormality is found. In this connexion it should be remembered that precipitation of pernicious anaemia in predisposed subjects during pregnancy is rare, and that not a few patients with known pernicious anaemia have now been safely taken through pregnancy. As regards the argument that the child may inherit a tendency to haemopoietic disorder, surely the choice must be left to the woman. It is no more than even chances that she herself has a tendency to pernicious anaemia. Even if she has, not more than half her children are likely to inherit this tendency, and not all with the tendency will develop the disease. Since pernicious anaemia rarely develops until late in life, and can be completely controlled by treatment, the argument for forbidding conception because of the risk of transmission of suffering is not very strong. The woman should therefore be permitted to have a child if she desires one strongly, but in return she should agree to the examination of her blood monthly during the first seven months, and fortnightly during the last two months of pregnancy. The blood should also be grouped. With these precautions there should be no risk of the development of an uncontrollable state of anaemia.

#### What is a Yawn?

Q.—What is the function, or purpose in Nature, served by the yawn? Information as to the physical mechanism effecting this phenomenon would also be welcomed.

A.—Considering the frequency of occurrence of yawning in the human subject, it is surprising to find so little reference to it in the literature. None of the standard textbooks makes any reference to it, and there does not appear to be any experimental work on the physiology of its causation. Yawning consists of a full and slow inspiration, with wide-open mouth, which is held for a second or two and followed by a fairly rapid expiration. It is usually accompanied by extension—"stretching"—of the limbs and trunk. In man it usually seems to occur when a mild degree of cerebral anoxia is likely and when the respiratory centre may be slightly depressed—e.g., after sitting for some time in a warm, close atmosphere, on waking, or under conditions leading to boredom and relaxation of attention. In these cases it seems likely that there is some reduction of cerebral blood flow, and a consequent anoxia. Yawning is also reported in individuals resting at high altitudes