

the translation of Wiedersheim's *The Structure of Man* in 1895. These three books have dominated the teaching from 1880 to the present day. The two earlier compendia of English origin were too bulky and too encyclopaedic to influence teaching to the extent they deserved. Todd and Bowman's *Cyclopaedia of Anatomy and Physiology* (1835-59) in five volumes and Richard Owen's *The Anatomy of Vertebrates* (1866-8) in three volumes did not have the wide distribution and popularity of the later German texts. In a sense they were before their time.

The frank anatomical dissection of living forms was greatly influenced and modified by two antipodal factors. On the one hand the science of palaeontology founded by Baron Cuvier focused the mind of man on the anatomy of the forms of the past which had persisted as fossils. On the other hand the rapid strides in the study of embryology by Pander, von Baer, F. M. Balfour, and many others attracted students away from formal comparative anatomy. Human anatomy became the handmaiden of surgery and comparative anatomy became a hobby for museum minders.

This new book by the distinguished director of the Museum of Comparative Anatomy at Harvard is the work of a master of the subject who is deeply sensitive to the progress made in physiology, experimental embryology, and genetics. In the preface, which he calls his *apologia*, he gives six essentials for an adequate treatment of the subject. They are adequate illustration, truly comparative treatment, proper palaeontological background, a developmental viewpoint, inclusion of histological data, and consideration of function. This is a whole-hearted statement in the good Hunterian tradition.

Little time is wasted on conflicting theories, and so the ground is covered by unusually direct methods. He rids the student of the bugbear of nomenclature in a few lines and castigates the absurdities of the B.N.A. terminology.

The chapters on the skeleton and the muscles are refreshing, and his great palaeontological experience makes for a succinct presentation. It is a pity that the author has not the space to discuss some minutiae such as the epiphysis on the pisiform bone or to present the story of the development of the chondrocranium. Yet it is remarkable to see how closely he sticks to his six desiderata.

There is but little on the subject of man, the primates, and the endocrine glands, for, as he emphasizes, the knowledge of the endocrines is based almost entirely on man and a few laboratory animals. He prophesies that the lower forms will have their endocrine days later, and already the various attempts to control insect pests have directed attention to the internal secretions of these invertebrate forms.

The text and illustrations are excellent. There are three appendices of great value, particularly to the English-speaking student unversed in the classical tongues. The first gives a synoptic classification of vertebrates; the second is a working glossary designed to avoid mental indigestion, and gives the simpler Latin noun and adjective in declension form so that gender, number, and case can be free from hurtful errors. The third gives a select list of references in which the author has dared to sift the dross from the gold.

No teacher of zoology or anatomy can do without this sorely needed book. No medical student should fail to possess it in common with Dorland's *American Illustrated Medical Dictionary*. They will last a lifetime and continue to give pleasures untold.

H. A. HARRIS.

## BOOKS RECEIVED

*Review is not precluded by notice here of books recently received*

*My Life in Three Counties.* By H. W. Pooler. (Pp. 247. 15s.) London: Christopher Johnson. 1950

*Quakers in Science and Industry.* By A. Raistrick, M.Sc., Ph.D. (Pp. 361. 21s.) London: The Bannisdale Press. 1950

*Clinical Examination of Patients.* By J. Forbes, M.D., M.R.C.P., and W. N. Mann, M.D., F.R.C.P. (Pp. 323. 18s.) London: Edward Arnold. 1950.

*Progress in Chromatography 1938-1947.* By L. Zechmeister. (Pp. 368. 45s.) London: Chapman and Hall. 1950.

*Bacterial Infection.* By J. L. T. Appleton, B.S., D.D.S., Sc.D. (Pp. 644. 70s.) London: Henry Kimpton. 1950.

*Urologic Roentgenology.* By M. B. Wesson, M.D. 3rd ed. (Pp. 282. 52s. 6d.) London: Henry Kimpton. 1950.

*Textbook of Bacteriology.* By J. M. Dougherty, A.B., M.A., Ph.D., and A. J. Lamberti, B.S., M.S. 2nd ed. (Pp. 491. 40s.) London: Henry Kimpton. 1950.

*Man in Danger.* By "Credo." (Pp. 94. 2s. 6d.) London: Stanley Paul. 1950.

*Common Diseases of the Ear, Nose, and Throat.* By P. Reading, M.S., F.R.C.S. (Pp. 288. 21s.) London: Churchill. 1950.

*Textbook of Gynaecology.* By J. H. Peel, M.A., B.M., B.Ch., F.R.C.S., F.R.C.O.G. 3rd ed. (Pp. 477. 24s.) London: William Heinemann. 1950.

*Cell Physiology and Pharmacology.* By J. F. Danielli, Ph.D., D.Sc. (Pp. 156. 24s.) London: Elsevier. 1950.

*Movable-Removable Bridgework.* By J. O. McCall, D.D.S., F.A.C.D., F.A.A.P., and I. M. Hugel, D.D.S. (Pp. 221. 56s.) London: Henry Kimpton. 1950.

*A Text-book of X-Ray Diagnosis.* Edited by S. Cochrane Shanks, M.D., F.R.C.P., F.F.R., and P. Kerley, M.D., F.R.C.P., F.F.R., D.M.R.E. Vol. 4. 2nd ed. (Pp. 592. 60s.) London: H. K. Lewis. 1950.

*Bismuth.* By L. Jaenicke, D.Ph. (Pp. 44. No price.) London: Mining and Chemical Products. 1950.

*The Microscopic Diagnosis of Human Malaria.* By J. W. Field. (Pp. 117. No price.) Malaya: Institute for Medical Research. 1948.

*New Discoveries in Medicine.* By P. R. Hawley. (Pp. 134. 16s.) New York: Columbia University Press. London: Geoffrey Cumberlege. 1950.

*Personal Hygiene Applied.* By J. F. Williams, M.D., Sc.D. 9th ed. (Pp. 471. 16s. 6d.) London and Philadelphia: W. B. Saunders. 1950.

*Form- und Wachstumsgesetze Drüsenbildender Karzinome.* By R. Böhmig. (Pp. 105. M. 14.) Stuttgart: Georg Thieme. 1950.

*Personal and Community Hygiene Applied.* By J. F. Williams, M.D., Sc.D., and G. G. Wetherill, M.A., M.D. (Pp. 610. 20s.) London and Philadelphia: W. B. Saunders. 1950.

*Biology: The Human Approach.* By C. A. Villee. (Pp. 580. 25s.) London and Philadelphia: W. B. Saunders. 1950.

*Patients in Mental Institutions 1947.* Prepared by C. C. Limburg. (Pp. 113. 50 cents.) London: Gerald Duckworth. Washington: Superintendent of Documents, U.S. Government Printing Office. 1950.

*Einführung in die pathologische Physiologie.* By F. Grosse-Brockhoff. (Pp. 645. M. 39.60.) Berlin: Springer. 1950.

*The Genealogy of Gynaecology.* By J. V. Ricci, A.B., M.D. 2nd ed. (Pp. 494. \$8.50.) Philadelphia: The Blakiston Company. 1950.

Mr. BEVAN said that if every time a new tax was imposed reliefs were given to meet it there would be no revenue from new taxation.

Mr. A. E. BALDWIN said that there might be greater difficulty in getting doctors for scattered areas as a result.

#### Hospital Beds for Tuberculosis

Brigadier MEDLICOTT asked the Minister on June 29 whether, in view of the fact that 11,000 people suffering from tuberculosis were awaiting hospital beds, he would give favourable consideration to the suggestion that a minimum of 10% of the beds in general hospitals should be set aside for tuberculosis cases.

Mr. BEVAN said that he was doing so, but that there could clearly be no set rule about it.

#### Urine-testing Sets for Diabetics

Mr. W. TEELING asked the Minister of Health on June 29 what steps he had taken to implement his promise to make "clinitest" sets and tablets for diabetics available under the National Health Scheme; and whether he was aware that it was over two months since he had answered a question on this subject by saying something would be done immediately.

Mr. BEVAN said that he was anxious not to make a series of regulations. If a regulation were made about this it would stand by itself, and he wanted to accumulate a number of regulations in one Order. That situation had now been reached, and he was doing it shortly.

#### Difficulties of Entry into Practice

On July 7, Dr. A. D. D. BROUGHTON drew attention to the difficulties being experienced by young doctors wishing to enter general practice. He said there was comparatively little difficulty in obtaining openings as assistants, but after a period the majority wanted greater security. The attempt to enter by means of a partnership presented many difficulties. Vacancies were advertised by executive councils, but there were surprisingly few. In the current issue of the *British Medical Journal* there were three. A practice with a list of reasonable size could attract more than 50 applicants; only one could be successful. After a number of failures some young men felt a sense of inferiority; the majority blamed the executive councils, and claimed that 90% of the openings were "fixed." He did not share that view, but he could readily understand men being driven to believe it.

The difficulties of entering general practice by means of executive council appointments were so great that most people tried to enter as partners with established practitioners. This method had now become far from easy. All too often it was found by applicants that they were up against what could only be called a racket. The principal could not sell his practice, but there was nothing to prevent a principal insisting that the partner should occupy a certain house, and no limit was fixed on the price that could be charged for it. A medical man of his acquaintance answered an advertisement for a partnership. He received no reply from the doctor, but received a communication from a house agent in which it was stated that the partnership was conditional on the purchase as a place of residence of a small bungalow at the price of £6,500; further, during the first three months of the partnership additional expenses would have to be incurred to the amount of £2,500, making a total of £9,000. Certainly, said Dr. Broughton, not all doctors were trying to rob new entrants into general practice in that manner, but he believed that far too many of them were doing this. It was still far more difficult than it should be for young men and women to gain a foothold in general medical practice.

Dr. BARRET STROSS said the problem was not less disturbing because evidence of it might be confined to a few examples. Anything the Minister of Health could do to ensure that there was not this back-door way of making men pay twice for a medical practice would be welcomed.

Mr. BLENKINSOP said that, although there might be only few cases, the matter was a serious one. Opportunities for young men to enter medical practice should be made more available, and not less. There had been many changes to the benefit of

the intending practitioner. For example, the valuable effect of reducing the maximum number of patients on a doctor's list; and the defining by the executive councils of different parts of the country as "under-doctored" or "over-doctored" areas, which had encouraged intending doctors to concentrate attention on those areas where medical attention was needed. There was no doubt that this had been an encouragement in easing the entry of doctors into practice.

There was no special problem about assistantships. The Ministry shared the view put forward in the first report of the Medical Practices Committee that preliminary apprenticeship as an assistant was still the best method of entry, and had done everything they could to encourage that. There was much greater opportunity for entry by merit to-day as a partner or as a sole practitioner than by the chance contact and succeeding to a practice as in the past. There had been criticisms of particular appointments, but on the whole the procedure adopted by the executive councils had brought comparatively little complaint, and was widely regarded as a desirable method of appointing new practitioners. There had been the encouragement of the building up of new practices by payment of a basic salary, and there was the further consideration that claims could be made on the special inducement fund by doctors in particularly difficult areas.

Even so there were still very real difficulties. The problem of accommodation was very difficult for the young doctor. If the house included the surgery accommodation, clearly it should come within section 35 (3) of the Act, and if an excessive price was being charged it was an attempt to evade the Act and should be reported to the Medical Practices Committee. Where the house was separate from the surgery the position was more difficult to define. It was a matter which was largely one of professional conduct, where they would hope to get the co-operation of the medical profession in insisting that this was a type of conduct that should be condemned. They would like to secure the co-operation of the B.M.A. in trying to secure the ending of this practice by voluntary action. It might be rather difficult to interpret the Act in such a way as to bring the ordinary living accommodation of a doctor within its confines if the accommodation was distinct and separate from the surgery, but he was prepared to examine the matter further.

The difficulty of doctors being appointed to a practice and not being able to take it up because of the lack of accommodation was already being discussed with the B.M.A., and he hoped they might be able to find some way round it. They were most anxious to try to help in every way possible, and to encourage in every way they could the setting up of additional practices, either by means of partnerships or sole principals, in the many areas which had been judged open areas where extra medical help was badly needed and existing lists were far too high.

## Universities and Colleges

### NATIONAL UNIVERSITY OF IRELAND

On July 3 the honorary degree of D.Sc. was conferred on Sir Alexander Fleming, F.R.C.P., F.R.C.S., F.R.S., Professor of Bacteriology in the University of London and Principal of the Wright-Fleming Institute of Microbiology, St. Mary's Hospital Medical School, London.

### ROYAL COLLEGE OF SURGEONS OF ENGLAND

On July 6 Mr. A. Hedley Whyte, Mr. E. W. Riches, and Sir Arthur Porritt were elected members of the Council of the College. The result of the poll was as follows:

Elected	Votes
Angus Hedley Whyte (Royal Victoria Infirmary, Newcastle-upon-Tyne)	904
Eric William Riches (Middlesex Hospital)	831
Sir Arthur Porritt (St. Mary's Hospital)	691
<i>Not Elected</i>	
Ian Aird (Postgraduate Medical School of London)	679
Robert Leech Newell (Royal Infirmary, Manchester)	661
Victor Wilkinson Dix (London Hospital)	398
Nils Lovold Bjarne Victor Eckhoff (Guy's Hospital)	296

In all 1,709 Fellows voted; in addition 25 votes were found to be invalid.

addresses of welcome were given by Mme. Gordon Morier, of Geneva (president of the International Union), the Lord Mayor of London, and the mayor of St. Pancras.

#### Honorary Fellowship

The Honorary Fellowship of the Royal College of Surgeons of Edinburgh was conferred by the President, Mr. W. Quarry Wood, on Dr. Donald Church Balfour, director of the Mayo Foundation and past president of the American College of Surgeons, and on Dr. Arthur Wilburn Allan, a former president and now chairman of the Board of Regents of the American College of Surgeons, during their recent visits to Edinburgh.

#### Bagdad Appointment

Dr. A. Michael Critchley, a Principal Medical Officer at the Ministry of Supply, is being seconded to the Iraqi Government to take up the post of professor of public health at the Royal University of Bagdad and adviser in public health to the Ministry of Social Affairs.

#### Pharmaceutical Society

Mr. Adam Meldrum, of Aberdeen, has been elected president of the Pharmaceutical Society and Mr. Frank Wilson vice-president.

#### National Institute for the Deaf

At the annual general meeting of the National Institute for the Deaf on July 5, when Lord St. Audries, vice-president of the institute, presided, Dr. Charles Hill said that the problem of deafness had never been sufficiently recognized. It was not to the public mind as dramatically moving as some other disablements. Most of the registered blind were regarded as unemployable; even those totally without hearing would regard themselves fit for work if they had learned to speak. Greater understanding of the problem was needed from the Government, the public, and every agency in this field. The institute had the job of co-ordinating the work of many separate bodies, of giving advice to Governments, local authorities, welfare societies, and special schools. It could look back on a history of achievement since it was founded in 1911 and of a promise of further achievement. A particularly difficult field was deafness in children. The institute was doing much work here: so also was the Deaf Children's Society. Education of the deaf should begin very early in life, but it had been stated recently in the House of Commons that there was still a waiting-list of 450 to get into deaf schools. The Minister of Education had promised that everything possible was being done to increase accommodation in the next year or two. This should be pressed on with.

#### Register of Chiropodists

The 1950 edition of the *Register of Chiropodists* has now been published by the Board of Registration of Medical Auxiliaries, and medical practitioners may obtain copies free of charge on application to the registrar of the board, Tavistock House North, Tavistock Square, London, W.C.1.

#### COMING EVENTS

##### Princess Tsahai Memorial Hospital

It is hoped that the Princess Tsahai Memorial Hospital will begin work this year, but some of the equipment has still to be paid for. A garden party will therefore be held on behalf of the hospital fund on July 26 at 3.30 p.m.-9.30 p.m. at "The Holme," York Gate, Regent's Park, London. The speakers include Brigadier G. S. Parkinson, formerly of the London School of Hygiene and Tropical Medicine. The cost is 2s. 6d. Donations to the fund will be gratefully acknowledged by the honorary treasurers, Lord Horder and Lord Amulree, c/o Messrs. Gould and Prideaux, 88, Bishopsgate, London, E.C.2.

##### Homoeopathic Congress

A Joint Congress of the Council of the International Homoeopathic League, the Faculty of Homoeopathy, and the British Homoeopathic Congress will be held on July 26-28 at the Royal

London Homoeopathic Hospital, Great Ormond Street, London, W.C.1. The congress fee is four guineas. Particulars may be obtained from the Medical Secretary, Dr. W. Lees Templeton, 146, Harley Street, London, W.1.

#### The British Association

The annual meeting of the British Association for the Advancement of Science will be held at Birmingham on August 30-September 6. The preliminary programme may be obtained from the secretary, the British Association, Burlington House, Piccadilly, London, W.1.

#### Congress of Pathology

The First Argentine Congress of Pathology will be held in La Plata, Buenos Aires, on August 24-27 under the auspices of the Argentine Ministry of Public Health and Social Welfare. Particulars may be obtained from the secretary of the Centro Medico Argentino-Britanico, Buenos Aires, Argentina, South America.

#### SOCIETIES AND LECTURES

A fee is charged or a ticket is required for attending lectures marked ●. Application should be made first to the institution concerned.

##### Tuesday

**EDINBURGH UNIVERSITY.**—At Anatomy Lecture Theatre, University New Buildings, July 18, 5 p.m., "Benjamin Rush, M.D.: His Edinburgh Student Days and What Came of Them," Macarthur Postgraduate Lecture by Dr. G. W. Corner (Baltimore, U.S.A.).

**MIDDLESEX COUNTY MEDICAL SOCIETY.**—At Edgware General Hospital, July 18, 5 p.m., "Success," John Tate Lecture by Sir Alexander Fleming, F.R.S.

**SOCIETY FOR THE STUDY OF ADDICTION.**—At 11, Chandos Street, Cavendish Square, London, W., July 18, 4 p.m., "Biochemistry and Alcoholism," by Mr. Leslie D. Macleod, B.Sc. A discussion will follow.

##### Friday

**BIOCHEMICAL SOCIETY.**—At Department of Biochemistry, University New Buildings, Teviot Place, Edinburgh, July 21, 11 a.m., 288th meeting.

##### Saturday

**KENT PAEDIATRIC SOCIETY.**—At Star Hotel, Maidstone, Kent, July 22, 2.30 p.m., "Mental Deficiency as a Social Problem," by Dr. L. T. Hilliard.

#### APPOINTMENTS

Dr. H. T. P. Young, O.B.E., has been appointed Inspector of Retreats, under the Inebriates Acts, 1879 to 1898.

**BRAMWELL.**—J. B., M.B., B.Chir., D.P.H., Medical Officer of Health and Area Medical Officer, Southern Area, Warwickshire.

**HAMILTON.**—JOSEPH STEWART, M.B., Ch.B., D.P.H., Deputy Medical Officer of Health, City of Stoke-on-Trent.

**HOWAT.**—D. D. C., M.B., D.A., Consultant Anaesthetist, Thoracic Surgery Unit Nottingham Group.

**SHEPLEY.**—WILLIAM HADFIELD, M.D., D.P.M., Consultant Psychiatrist, Warlingham Park Hospital, Warlingham, Surrey. (Corrected announcement.)

#### BIRTHS, MARRIAGES, AND DEATHS

##### BIRTHS

**Bartlett.**—On June 9, 1950, at Bristol, to Anne (formerly Cousins), M.B., wife of Charles Bartlett, F.R.C.S., a daughter—Alice.

**Burfield.**—On July 3, 1950, at Shifnal Cottage Hospital, to Phemie, wife of Dr. George Burfield, a daughter.

**Charlton.**—On July 2, 1950, to Dr. Phoebe Charlton, wife of E. F. Bradford, Esq., Orchard House, Castleton, North Yorkshire, a daughter.

**Evans.**—On July 3, 1950, at 387, Queen's Road, New Cross, London, S.E., to Alexa (formerly Mitchell), wife of Dr. Carlton John Evans, a daughter—Alexa.

**Porritt.**—On July 6, 1950, at the Lindo Wing, St. Mary's Hospital, London, W., to Kay, wife of Sir Arthur Porritt, K.C.M.G., a son—Jonathon.

**Saunbury.**—On July 7, 1950, to Lorna, wife of Edward Saunbury, M.B., Ch.B., 57, Walsall Road, Lichfield, Staffs., a daughter.

**Thomas.**—On June 20, 1950, at Nuffield House, Guy's Hospital, London, S.E., to Jane McQueen, wife of Richard Seymour Thomas, M.R.C.S., L.R.C.P., of 207, Hither Green Lane, London, S.E.13, a son—David Richard Moore.

**Tighe.**—On June 23, 1950, at 101, Ashted Row, Birmingham, to Nora (formerly Cregan), S.R.N., S.C.M., wife of John Robert Tighe, M.R.C.S., L.R.C.P., a son—John Kevin.

##### DEATHS

**Cameron.**—On July 2, 1950, at Exeter, Colin John Norman Cameron, M.R.C.S., L.R.C.P., of Moyvanie, Raddenside Lane, Exmouth, Devon.

**Cooper.**—On July 4, 1950, at The Royal Portsmouth Hospital, Duncan Gordon Cooper, M.D., Major, I.M.S., retired, of Ravelston, 125, London Road, Waterloo, Portsmouth, Hants.

**Dutton.**—On July 5, 1950, at Taplow, Bucks, Hugh Reginald Dutton, C.I.E., F.R.C.P., D.T.M.&H., Lieutenant-Colonel, I.M.S., retired.

**Flintoff.**—Suddenly, at The Mill House, Pateley Bridge, Yorks., Charles Ashley Flintoff, M.R.C.S., L.R.C.P., aged 71.