

leads Selye to conclude that they cannot depend on the action of a single corticotrophic hormone, but that other factors at present unidentified are probably also largely involved.

This is essentially a monograph for the specialist, and workers in this field will find much that is stimulating and of value.

C. L. COPE.

INCONTINENCE

Incontinence in Old People. By John C. Brocklehurst, M.D. With foreword by Stanley Alstead, M.D., F.R.C.P. (Pp. 191; 62 figures. £1 10s.) Edinburgh: E. and S. Livingstone. 1951.

The author of this volume presents a careful and detailed discussion of a difficult and distressing subject. A full and clear description of the mechanism of control of both urinary and intestinal tracts is followed by a discussion of the conditions under which this control may fail. Unfortunately, in spite of elaborate research, the author has found no means by which control can be restored or its loss in any way relieved. He reaches the conclusion that the only way to prevent incontinence is to prevent confinement to bed, and he can point to many cases where a patient's incontinence was abolished by getting him on his feet. The book is well worth the consideration of those who have to care for the aged.

HENRY SOUTTAR.

DAY HOSPITALS

The Day Hospital. An Experiment in Social Psychiatry and Syntho-Analytic Psychotherapy. By Joshua Bierer, M.D., D.Econ. (Pp. 56. 6s.) London: H. K. Lewis. 1951.

In 1947 Professor Ewen Cameron, of the Allan Memorial Institute of Psychiatry, Montreal, described an experimental form of hospitalization for psychiatric patients which he called the day hospital. No building programme, he stated, however ambitious, can hope to meet the increasing demands for treatment in hospital. "If, however, we take as our guiding principle that, as far as is possible, treatment should be provided at the hospital rather than *in* the hospital, we can reasonably expect a series of adaptations and inventions . . . which will permit all hospital centres to give intensive medical care to considerable numbers of patients without the necessity of providing the most expensive form of hospitalization, *in-bed* care."

Every attempt to examine the principles and assumptions on which our hospital services are based is important, and especially so if it suggests new types of institution which will lower the cost of these services. Dr. Bierer and his colleagues are to be congratulated on their appreciation of the need to experiment with the day hospital, and their initiative is all the more praiseworthy when their slender resources are kept in mind. In an account of the early stages of a practical development of this kind there should be a concise statement of the guiding ideas, with a clear picture of the important points brought out by initial experience. There should, in fact, be sufficient to convince others of the importance of the practical problems involved and to help them to start experimental models themselves. It is disconcerting, however, to find that Dr. Bierer has to relate his work to vaguely conceived principles of "social psychiatry and syntho-analytical psychotherapy," and that he has to drag in quite irrelevant pleas for a greater recognition of Adler's

work. It is unfortunate, too, that he has to make statements like the following: "About 500 adults and 150 children have been treated per year by the equivalent of one junior and one and a half senior psychiatrists. This represents about 1/8-1/10 of the psychiatric sessions used in other clinics for treatment of the same number of cases." Psychiatric disorders are as diverse as physical ones, and to imply, as this does, that any of these disorders—for example, psychoneurotic conflicts in the more intelligent sections of the population—can be helped adequately by a doctor who is responsible for 250 new cases per annum is to make a claim that is of little help to psychiatry.

Lastly, it must be seldom that any book has appeared with so many verbal errors. On p. 47 alone, Stekel appears as Steckell and Steckel; Freud's adherence to a causal attitude and to an instinctual basis appears as his *casual* attitude and his *instructional* basis. (It is an unchecked impression, but it seemed that the errors were more frequent in reference to psycho-analysis.) The day hospital is an important idea, for general as well as psychiatric hospitals, and it is to be hoped that the author and others will develop this work; but Dr. Bierer would be well advised to be more careful and more critical about any future publication.

J. D. SUTHERLAND.

BOOKS RECEIVED

Review is not precluded by notice here of books recently received

Science News, No. 20. Edited by A. W. Haslett. (Pp. 128. 2s.) Harmondsworth: Penguin Books. 1951.

A Dictionary of Science. By E. B. Uvarov, B.Sc., A.R.C.S., A.R.I.C., D.I.C., and D. R. Chapman, B.A. (Pp. 240. 2s.) Harmondsworth: Penguin Books. 1951.

Control of Life. By Halliday Sutherland, M.D. (Pp. 282. 15s.) London: Burns, Oates. 1951.

Pioneer Doctor. By M. K. Hughes. (Pp. 163. 10s. 6d.) London: Geoffrey Cumberlege. 1950.

Serology with Lipid Antigen. By R. L. Kahn, M.S., D.Sc. (Pp. 327. 46s. 6d.) London: Baillière, Tindall and Cox. 1950.

Yellow Fever. Edited by G. K. Strode, M.D. (Pp. 710. 81s.) London: McGraw-Hill Book Company. 1951.

Schizophrenic Art: Its Meaning in Psychotherapy. By M. Naumberg. (Pp. 247. 70s.) London: William Heinemann. 1950.

The Medical Register. Published by the General Medical Council. (Pp. 2,433. 42s.) London: Constable. 1951.

The Burden of Diseases in the United States. By A. E. Cohn and C. Lingg. (Pp. 129; 5 coloured charts. 80s.) London: Geoffrey Cumberlege. 1950.

Annotated Bibliography of Vitamin E, 1940-50. Compiled by P. L. Harris and W. Kujawski. (Pp. 184. \$3.) New York: The National Vitamin Foundation. 1951.

La Médecine d'Assurance sur la Vie: Facteurs Biologiques, Médicaux, et Sociaux de la Mortalité et de la Longévité. By H. Stévenin. (Pp. 509. 2,000 francs.) Paris: Masson. 1951.

Confrontations Radio-Anatomo-Cliniques. Edited by M. Chiray and others. Part 4. (Pp. 68. 1,250 francs.) Paris: Masson. 1951.

Fortschritte der Serologie. By Dr. H. Schmidt. Part 5. (Pp. 67. M. 6.) Darmstadt: Dietrich Steinkopff. 1951.

Ärzt und Laboratorium. By Dr. H. Marx. 7th ed. (Pp. 192. M. 8.70.) Stuttgart: Georg Thieme. 1951.

Dr. EVELYN NORA TAFFS (née Murphy) died in King's College Hospital, London, on June 28, at the age of 60 after a brief illness. She was born at Macroom, Co. Cork, and after her formal education studied domestic science for three years at the well-known academy in Edinburgh, from which she received the teaching diploma. She taught domestic science in Co. Clare, but after two years decided to follow her brother and two sisters in the medical profession, and entered the Royal College of Surgeons in Ireland as a student. She studied at the Meath Hospital, Dublin, and was granted the licentiate in 1921. Subsequently she obtained the L.M. at the Rotunda Hospital. After a short assistantship she commenced practice in Camberwell, London, on her own account in 1924. Through her sound professional advice and her shrewd and sympathetic counsel to patients—she was often consulted on matters not connected with medicine—coupled with her Irish good nature and attractiveness, she rapidly built up a successful practice, to which she devoted all her attention, often to her personal detriment, particularly that of her health. Her unremitting work during the six years of the last war, when she had no respite, told its tale and contributed in no small measure to her untimely death. Her loss will be deplored by numbers of her patients and friends, of which the many tributes to her memory that have been received are ample evidence. She is survived by her husband, Mr. Cecil Taffs, a barrister, whom she married in 1930.—M. A. M.

Dr. ARTHUR HERBERT SPICER died suddenly on July 16 while bathing at Barton-on-Sea. He was 79 years of age. The son of Reuben Spicer, of High Wycombe, Buckinghamshire, he was educated at Ley's School, Cambridge, and later at Guy's Hospital. He qualified M.R.C.S., L.R.C.P. in 1896, and took the London M.B., B.S. in the same year. In 1901 he obtained the D.P.H. After holding several residential appointments at Guy's and other hospitals and a clinical assistantship at a hospital in Paris, he went into general practice in Petworth, later moving to London in 1909. During the first world war he served in France and gained the Military Cross and the Order of St. Anne of Russia, retiring with the rank of major. After the war he returned to London, and in 1938 he retired to Graffham, near Petworth. There he became a member of the local rural district council and served on the management committee of Petworth Cottage Hospital. During the second world war he did valuable work as a medical referee for the Ministry of Pensions. Arthur Spicer identified himself with the activities of the village in which he lived. A lover of nature and an ardent bird-watcher, he was instrumental in opening many footpaths. He was much loved in the village and by the neighbouring doctors. He leaves a widow, a daughter, and three grandchildren.—D. C. D.

Medico-Legal

DEATH DURING THIOPENTONE INJECTION

Judge's Comments

[FROM OUR MEDICO-LEGAL CORRESPONDENT]

£1,343 damages were awarded by Mr. Justice Oliver at Manchester Assizes on July 25¹ to the widow of William Jones, a corporation stoker, aged 57. Jones was burned on the face in an accident at a corporation destructor and was admitted to the casualty department at Ancoats Hospital. He was anaesthetized by a house-surgeon, qualified five months before, who first administered nitrous oxide and oxygen. The mask used for this made treatment of the burns difficult, and before he had fully recovered consciousness the house-surgeon injected 5 ml. thiopentone and then, as this apparently had no effect, a further 5 ml. As the second injection was completed Jones died.

¹Manchester *Guardian*, July 21 and 26, 1951.

Dr. F. T. Evans, who gave evidence for the defence and told the judge that he had administered or supervised over 30,000 thiopentone injections, said that it was normal procedure to give thiopentone to someone who had previously had nitrous oxide and oxygen. After hearing the house-surgeon's account of what she had done and of Jones's condition he had no adverse comment to make about the injections. He thought that Jones had died of cardiac failure as a result of the coronary disease from which he suffered, and that a sudden fall in blood pressure had caused the heart to cease beating.

Mr. Justice Oliver gave judgment against the house-surgeon and the Manchester Regional Hospital Board, and awarded the house-surgeon an indemnity against the board. In the course of his judgment he said that he had come to the conclusion that the house-surgeon should not have had access to thiopentone or have been allowed to administer it without supervision. She had failed, through no fault of her own, to exhibit the standard of skill she was bound in law to possess, and the hospital authorities were entirely responsible. To put such a weapon within reach of a girl who had been qualified for only five months and expect her to handle it with sufficient knowledge and to watch the patient was simply asking for trouble, even if it was common practice. He was shocked that Jones should have met his death in this way. He did not blame the house-surgeon. She had not been told she must not use thiopentone on a person who was only half conscious from other anaesthetics.

We understand that an appeal is contemplated in this case, both on behalf of the house-surgeon and of the hospital board.

Universities and Colleges

UNIVERSITY OF LONDON

The following candidates have been approved at the examinations indicated:

M.D.—*Branch I (Medicine)*: J. C. Batten, P. E. Bharucha, Brenda M. Buck, Joyce B. Burke, E. J. M. Campbell, H. M. T. Coles, P. B. Fernando, O. D. Fisher, W. Fox (*Mark of Distinction*), M. E. H. Halford, J. G. Hamilton, B. J. S. Harley, D. H. Isaac, B. A. G. Jenkins, I. A. Kellock, J. M. Ledingham (*Mark of Distinction and University Medal*), J. N. Mickerson, A. A. Morgan, C. J. Zerny. *Branch II (Pathology)*: K. Anderson, A. J. Beale, P. J. Collard, F. V. Flynn, R. A. Goodbody, R. C. Jennings, M. B. King, O. G. Lane, D. MacKinnon, J. D. Manning, P. L. Masters, P. C. Meyer, H. Miller, V. W. Pugh, D. B. Richards, K. T. Weavers. *Branch III (Psychological Medicine)*: J. G. Howells, C. Rose. *Branch IV (Midwifery and Diseases of Women)*: Kathleen A. Dru Drury, G. S. Foster, H. N. Mansfield. *Branch V (Hygiene)*: H. E. A. Carson, P. S. Fuller, P. G. Roads, L. Silverstone.

ROYAL COLLEGE OF PHYSICIANS OF LONDON

At a quarterly comitia of the College held on July 26, with the President, Dr. W. Russell Brain, in the chair, the following Fellows of the College were elected officers for the ensuing year: *Censors*, R. V. Christie, F. J. Natrass, K. E. Harris, C. F. T. East; *Treasurer*, W. G. Barnard; *Registrar*, Sir Harold Boldero; *Harveian Librarian*, E. C. Dodds, F.R.S.; *Assistant Registrar*, M. I. A. Hunter.

Lord Moran was appointed Harveian Orator and Dr. R. R. Bomford Bradshaw Lecturer, both for 1952. The following Lecturers were also appointed: Lumleian (1952), Professor R. Platt; Goulstonian (1952), Dr. J. H. Kellgren; FitzPatrick (1952), Dr. M. Davidson; Oliver-Sharpey (1952), Dr. J. McMichael; Bertram Louis Abrahams (1952), Professor R. A. Peters; Charles West (1952), Professor A. A. Moncrieff; F. E. Williams (1952), Mrs. Margaret Hill; Ernestine Henry (1952), Dr. R. E. Lane; Croonian (1953), Sir Allen Daley.

The President, Dr. W. Russell Brain, was re-elected the College representative on the governing body of the British Post-graduate Medical Federation. Dr. A. G. Yates was appointed representative on the court of the University of Sheffield, and Dr. C. E. Newman was reappointed representative on the examination and tuition advisory board of the Association of Medical Records Officers.

The Moxon Medal was awarded to Dr. A. W. M. Ellis in recognition of his distinguished contribution to the knowledge of diseases of the kidney. The Weber-Parkes Prize was awarded to Dr. P. M. D'Arcy Hart for his contribution to the epidemiology and prevention of tuberculosis. The Baly Medal was awarded to Professor G. de Hevesy for his work on radioactive indicators and their application in biochemistry, animal physiology and pathology. The Murchison Scholarship was awarded to Dr. M. E. Riddoch.

Dr. W. Russell Brain (President), Sir Charles Symonds (Chairman), Dr. Douglas McAlpine, Dr. R. E. Smith, Dr. W. R. Russell (secretary), Dr. W. H. Bradley, Dr. F. S. Cooksey, Dr. W. C. Cockburn, Professor Wilson Smith, F.R.S., Dr. R. B. Bourdillon, and Mr. H. J. Seddon were appointed members of a committee "To provide those working on the aetiology, epidemiology, prevention, and treatment of poliomyelitis with opportunities for the exchange of information and the discussion of common problems; and to make recommendations."

The following, having satisfied the Censors' Board, were elected Members of the College: P. H. Abbott, M.B., E. C. A. Bott, M.B., J. L. Brennan, M.B., Brenda M. Buck, M.B., I. J. Carré, M.B., I. A. B. Cathie, M.D., R. D. G. Creery, M.D., D. C. Deuchar, M.B., Mary P. Dyson, M.B., H. W. Garlick, M.D., R. C. Godfrey, M.B., S. A. H. Haqqani, M.B., E. A. Harris, M.B., C. A. Hopkins, M.B., N. T. Jaco, B.M., J. A. Jamieson, M.B., B. W. Jaslowitz, M.B., J. S. Jenkins, M.B., R. B. F. Khambatta, M.B., G. L. Mackay, M.B., J. W. McLaren, L.R.C.P., L. Murphy, M.D., G. S. Nagy, M.B., Margaret I. E. Neave, M.B., N. M. Newman, M.B., H. I. Obeyesekere, M.B., S. G. Owen, M.B., T. A. J. Prankerd, M.D., J. H. Renwick, M.B., S. E. J. Robertson, M.B., T. I. Robertson, M.B., D. R. S. Saunders, M.B., A. C. Schwieger, M.D., J. A. Scott, M.D., C. S. Shaw, M.B., M. J. Simpkins, M.B., K. Simpson, M.B., K. H. Slatter, M.B., Gwendolen D. Smith, M.B., E. Stengel, M.D., H. D. Steward, M.B., A. J. Taylor, M.B., M. K. Towers, M.B., J. M. Tweed, M.B., H. M. Whyte, M.B., S. Wolff, B.M., P. B. Woolley, M.B., A. R. Yusuf, M.B.

Licences to practise were conferred upon 138 candidates (including 21 women) who have passed the final examination in Medicine, Surgery, and Midwifery of the Conjoint Board and who have complied with the necessary by-laws: M. Altman, J. R. Angwin, J. H. Armstrong, Margaret M. Ashton, S. J. Baldwin, J. Barnes, J. R. Batty, R. J. Bayly, A. O. C. Beattie, J. W. Bishop, D. G. Bluett, R. N. B. Byatt, B. C. Calverley, R. J. O. Catlin, H. D. Cheetam, C. Cohen, H. Cohen, M. R. Coster, J. R. Crews, T. E. Dada, S. T. E. Dan-Jumbo, J. P. H. Davies, R. P. Davies, A. R. Davis, D. W. J. Dean, S. R. A. Dodu, G. D. Downes, E. C. Erokuwu, R. D. Fine, G. P. Flew, D. H. Fox, Katharine M. Fussell, D. H. Gamage, G. T. Gardiner, N. Gee, D. A. L. Gibson, P. C. Glynn-Jones, E. G. Goff, H. Gold, I. J. L. Goldberg, J. Graves, P. G. Haigh, J. D. Hall, R. J. Halpin, J. L. Hanington, Audrey Hardwick, P. Harnarayan, Betty J. Harvey, S. F. Hazelton, P. A. Henderson, Betty O. Hill, B. W. Hill, T. L. Hobday, W. G. Holland, Mildred V. Hope, Cicely P. Hopton, J. A. Howe, J. T. Hughes, C. S. Hunter, C. B. Hyder, E. T. Johns, W. Johnson, Audrey K. Johnstone, K. B. Jones, K. M. Jones, G. M. Karpushev, R. I. Keen, D. A. Knights, J. E. Lee, J. G. G. Leigh, Phyllis G. Lemon, M. M. Levene, J. H. Lewis, J. M. London, M. M. Lubel, S. Lubert, A. M. Luther, A. L. McBean, W. H. McKendrick, Estelle V. Mackrell, I. H. Maine, E. J. B. Mansell, J. W. E. Mark, A. D. Mason, D. T. Matheson, P. D. Matthews, S. G. F. Matts, A. McK. Middleton, N. M. Midgley, D. M. Millar, S. H. Molesworth, Frances M. Mules, A. I. C. Murfitt, E. M. Newton, J. A. Page, M. D. Readett, R. G. Redhead, J. D. Richardson, R. S. Rihan, R. E. Ll. Roberts, J. R. Robinson, J. D. Roche, J. B. Rogers, A. F. Roper, G. Rowlands, Patricia M. Russell, Pamela E. Sarjeant, J. P. Shackleton, Elizabeth C. Shore, F. Simm, B. Sklan, J. A. Snyder, G. C. Stavrakis, R. C. F. Stephens, P. Steward, Aline Sullivan, J. L. Swift, R. H. D. Sykes, E. P. W. Tatford, G. E. M. Thomas, W. B. Tindall, Anna Turyczyn, D. J. C. Walker, T. C. Wall, Freda Walton, Irene M. Watts, R. A. J. Webb, M. P. Weinbren, R. M. Whelan, H. C. White, R. G. B. Willis, Veronica Willis, Dorothy J. Wilson, H. Wilson, J. L. Wilson, Sylvia Woodbridge, E. N. Wright, P. A. C. Wright.

The following diplomas were granted, jointly with the Royal College of Surgeons of England:

DIPLOMA IN LARYNGOLOGY AND OTOLGY.—K. A. McNeill.

DIPLOMA IN PUBLIC HEALTH.—Marjorie J. G. Allan, T. R. Bennett, L. Beukes, S. K. Das, K. P. Giles, Anna M. Keet, A. N. Ray, H. L. Wolfe.

DIPLOMA IN CHILD HEALTH.—A. J. Watson.

Diplomas in Anaesthetics, in Laryngology and Otology, in Psychological Medicine, in Medical Radio-diagnosis, in Medical Radiotherapy, in Pathology, and in Ophthalmic Medicine and

Surgery were also granted, jointly with the Royal College of Surgeons of England, to the successful candidates whose names were printed in the report of the meeting of the Royal College of Surgeons of England in the *Journal* of July 28 (p. 244).

ROYAL COLLEGE OF SURGEONS OF ENGLAND

At a meeting of the Council of the College held on August 2, with Sir Cecil Wakeley, President, in the chair, Mr. L. E. C. Norbury was appointed Hunterian Orator for 1953.

Diplomas of Membership of the College were granted to A. A. Waterman and to the 138 successful candidates whose names are printed above in the report of the meeting of the Royal College of Physicians of London; as are the names of the eight successful candidates for the D.P.H., awarded jointly by the two colleges.

A Diploma in Laryngology and Otology was granted, jointly with the Royal College of Physicians of London, to K. A. McNeill.

Dr. F. Stansfield was appointed Lecturer in Anatomy.

It was reported that the late Sir Thomas Colyer-Fergusson had bequeathed to the College all the case books of his grandfather, Sir William Fergusson.

Hospitals were recognized under paragraph 23 of the Fellowship ship regulations as follows: District Infirmary, Ashton-under-Lyne, continued recognition of resident surgical officer, additional recognition of two house-surgeons, resident casualty officer, and orthopaedic house-surgeon (all four posts for six months only); Horton General Hospital, Banbury, continued recognition of senior house-surgeon and junior house-surgeon (each post for six months); Birmingham Accident Hospital, three resident surgical officers, three house-surgeons (all for six months); Southmead Hospital, Bristol, senior house-surgeon, three house-surgeons (all for six months); St. Luke's Hospital, Bradford (decennial revision), three registrars (for one year), five house-surgeons (for six months); Chesterfield and North Derbyshire Royal Hospital (decennial revision), resident surgical officer (for one year), orthopaedic senior house officer and two house-surgeons (all for six months); Dorset County Hospital, Dorchester, registrar and house-surgeon (both posts for six months); Royal Infirmary, Halifax (decennial revision), surgical registrar for one year, resident surgical officer, house-surgeon, and casualty and orthopaedic officer (all for six months); St. Olave's Hospital, London, general surgical registrar, and general surgical and orthopaedic registrar (both posts for one year), two house-surgeons (for six months); Mansfield and District General Hospital, resident surgical officer and senior house-surgeon (both posts for six months); General Hospital, Nottingham, two senior house officers, four house-surgeons (all for six months), orthopaedic registrar, senior house officer (orthopaedic department), and orthopaedic house-surgeon (all for six months), ear, nose, and throat registrar, senior and junior house-surgeons to ear, nose, and throat department; Salisbury General Hospital (decennial revision), resident surgical officer (for one year), two house-surgeons (for six months), registrar, ear, nose, and throat department; General Hospital, Rochford, surgical registrar, general house-surgeon, house-surgeon (orthopaedic and fractures) (all posts for six months); Scarborough Hospital, senior house officer; General Hospital, Southend, senior surgical registrar for one year, senior house officer (surgical), two orthopaedic registrars, two house-surgeons (all for six months); High Wycombe and District Hospital, senior surgical house officer (for six months); Weymouth and District Hospital, house-surgeon (for six months).

ROYAL COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS

At a meeting of the Council of the College held on July 28 the following officers were re-elected: President, Dame Hilda Lloyd; Vice-Presidents, Mr. J. E. Stacey and Mr. V. B. Green-Armytage; Honorary Treasurer, Mr. A. A. Gemmell; Honorary Secretary, Mr. H. G. E. Arthur; Honorary Curator of Museum, Mr. Aleck W. Bourne.

The following candidates were elected to the Membership of the College: T. L. Adamson, G. W. E. Aitken, G. J. Amiel, D. L. Arnold, K. Baker, J. S. Barr, E. L. G. Beavis, R. McF. Bernard, R. Brown, T. W. Capell, Helen A. Cawson, Lydia Colaco, F. Daubenton, C. H. De Boer, Mary R. Ellis, J. Firth, C. M. Flood, J. Gardiner, J. F. C. Grant, R. G. H. Hall, D. Hay, S. R. Hewitt, P. F. C. Jackson, D. H. McGrath, D. MacVicar, K. A. Makos, R. T. Martin, J. K. Morrison, Margaret B. Noble, J. K. Ogden, H. Roberts, Heather J. S. Ross, G. El D. M. K. Sami, J. C. W. Somerville, N. G. G. Talbot, J. M. Thomas, R. R. Trussell, A. C. H. Wensley, Marion Williams, L. Willoughby, A. E. El S. A. Zikry.

COMING EVENTS

Royal College of Obstetricians and Gynaecologists

The annual dinner of the Royal College of Obstetricians and Gynaecologists will be held at the Dorchester Hotel, Park Lane, London, W., on Friday, September 28, at 7 for 7.30 p.m.

British Council for Rehabilitation

The council is arranging a three-day conference on the British Rehabilitation Service (first day, treatment; second day, industrial resettlement; third day, rehabilitation in industry and accommodation for open and sheltered employment) on September 4-6 in the lecture theatre of the Ministry of Labour's Manpower Exhibition, 97, Horseferry Road, London, S.W.1. The fee for the conference is £1 1s., or 7s. 6d. daily. Tickets must be obtained in advance from the general secretary, British Council for Rehabilitation, Tavistock House (South), Tavistock Square, W.C.1, from whom full information may be had.

Courses in Psychiatry

The Institute of Psychiatry, at the Maudsley Hospital, Denmark Hill, S.E.5, will be holding courses in psychiatric medicine lasting 10 weeks, from October 1. Full details of the syllabus may be obtained from the Institute.

Foot Health Convention

The Foot Health Educational Bureau will hold an annual convention on October 29 at the Royal Empire Society, Northumberland Avenue, W.C.2, from 10.30 a.m. to 5 p.m. Talks will be given on "The Foot in Relation to the Shoe" and "The Shoe in Relation to the Foot," and there will be time for discussion. Tickets (5s. including luncheon) may be obtained from the Secretary, Foot Health Educational Bureau, 121, Ebury Street, S.W.1, and applications should be accompanied by a remittance.

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 POSTGRADUATE BOARD FOR MEDICINE.—At Edinburgh University (Anatomy Lecture Theatre), August 21, 4.30 p.m., "The Intramural Vascular Patterns of the Human Stomach," by Dr. T. E. Barlow.

BIRTHS, MARRIAGES, AND DEATHS

BIRTHS

Daley.—On August 10, 1951, to Alison (formerly Miller), wife of Raymond Daley, M.D., M.R.C.P., a daughter.
Forbes.—On August 3, 1951, to Pamela (formerly Burberry), wife of John Forbes, M.D., M.R.C.P., of Wrexham, a son.
Freeland.—On July 13, 1951, at the London Hospital, to Patricia, wife of Dr. Derek Freeland, a daughter.
Nabarro.—On July 31, 1951, at University College Hospital, London, to Joan (formerly Cockrell), wife of John Nabarro, M.D., a daughter.
Stott.—On August 1, 1951, at Plymouth, to Margaret (formerly Leece), wife of Dr. Donald V. Stott, a daughter.

MARRIAGES

Rowlands—Angus.—On August 11, 1951, at Saint Clements, Leigh-on-Sea, Bryan Cleveland Rowlands, M.B., F.R.C.S., to Joan Louise Angus.

DEATHS

Blewett.—On July 31, 1951, as the result of a motoring accident in Singapore, Graham Livingstone Blewett, M.B., B.S., Flight Lieutenant, R.A.F.
Chopping.—On August 9, 1951, at Hythe, Kent, Arthur Chopping, C.B., C.M.G., M.R.C.S., L.R.C.P., Colonel, late R.A.M.C., aged 80.
Gekkie.—On August 10, 1951, at 8, Alloway Place, Ayr, James Stewart Gekkie, M.D., aged 74.
Gordon.—On August 11, 1951, at a nursing-home, Cambridge, Alec Knyvett Gordon, M.B., B.Ch., aged 80.
Jennings.—On August 7, 1951, Norman Jennings, M.B., Ch.B.Ed., J.P., Hull City Coroner, aged 60.
Johnson.—On August 10, 1951, at Orpington, Kent, Philip Johnson, L.R.C.P.&S.Ed., L.R.F.P.S.

Any Questions?

Correspondents should give their names and addresses (not for publication) and include all relevant details in their questions, which should be typed. We publish here a selection of those questions and answers which seem to be of general interest.

Diphtheria Immunization in the Summer

Q.—In view of the fact that there is said to be some relation between poliomyelitis and immunization against diphtheria, should such immunization be stopped during the summer months, or should it be continued whether cases of poliomyelitis occur or not?

A.—It has been definitely proved that there may be a slight risk of post-inoculation poliomyelitis among children receiving injections of diphtheria prophylactic in areas where poliomyelitis is occurring at the time. This post-inoculation poliomyelitis has been associated particularly with intramuscular injections of alum-precipitated diphtheria toxoid or A.P.T. plus pertussis vaccine, and has occurred mostly in children under 1 year of age. In order to avoid the admittedly slight chance of post-inoculation polio, therefore, it would be advisable to give children under 1 year of age injections of a diphtheria prophylactic such as formal toxoid or P.T.A.P., which are known to produce very little tissue reaction. A recent report by Bousfield (*Lancet*, 1951, 1, 1028) indicates that such a procedure is practicable and gives a high degree of immunity to the infant. It is probably better to continue with immunization in this way rather than to discontinue, even temporarily, the practice which has been so successful in the control of diphtheria.

Seminal Faults and Congenital Malformations

Q.—A woman has had two premature infants, both with serious congenital malformations. Semen analysis of the husband shows a large number of abnormal forms. Is there any known relationship between the presence of abnormal spermatozoa and congenital defects in the foetus?

A.—Although it has often been suggested that habitual abortion or malformation of the foetus might be associated with poor-quality spermatozoa, a relationship between these conditions and seminal faults of any kind has never been demonstrated so far as the human being is concerned. The evidence from animal studies is conflicting. It is most unlikely that the recurrent foetal malformations in the case in question are related to "a large number of abnormal forms" of spermatozoa.

Equilibrium Among the B Vitamins

Q.—In a recent Refresher Course article on "Infective Hepatitis" (May 26, p. 1198) the statement is made about the B complex that "an imbalance of the vitamins may well result from supplementation with the known pure preparations." Is it not accepted that administration of some of the B vitamins merely throws into sharper relief the coexisting deficiency of the other members of the group?

A.—The answer to this question depends on what is meant by the coexisting "deficiency." Thus it has been claimed that rats given excess of vitamin B₁ develop signs of vitamin B₆ deficiency which are absent when no extra B₁ is given. Before the isolation of vitamin B₁₂ patients with pernicious anaemia sometimes showed a slightly improved blood picture, but a greater tendency to nerve lesions, when dosed with folic acid. According to these stories, whatever may be their interpretation, dosing with one vitamin causes the intake of another to become inadequate as evidenced by acute signs of deficiency. It is possible, of course, to argue that the intake of the second vitamin was deficient according to dietetic standards even before dosing with the first