

is a poor substitute for bedside instruction, which is surely the way to teach methods of examination. The author correlates the disturbance of function and the abnormal signs of disease with the anatomy and physiology of the nervous system, but says little about pathology or differential diagnosis apart from the problems of localization of cerebral and spinal lesions. In successive chapters he considers the various parts of the central, peripheral, and autonomic nervous system, and there are also chapters on the examination of stuporose patients and on the examination of patients suspected of hysteria or malingering. Special methods of examination such as neuro-radiology and electro-encephalography are not considered, but there is a chapter on examination of the cerebrospinal fluid. It is rather surprising in a book of this size that there is no account of quantitative vestibular tests. This book will be a necessity for the collector of eponyms (for example, the syndromes of Garel and Gignoux, of Gerhardt and of Marin Amat), of unusual terms (pallanesthesia as a synonym for loss of vibration appreciation), and of unorthodox reflexes (the little toe reflex of Puussepp).

The book is well produced, the references for further reading are well chosen, and the illustrations, clinical photographs, and anatomical diagrams are clear. But it is a pity that a picture on p. 291 showing a unilateral palatal palsy is said to be taken from a book by S. J. Purves on the *Diagnosis of Nervous Diseases*, when it is in fact from Sir James Purves-Stewart's famous book of that name.

J. W. ALDREN TURNER.

### ALCOHOL AND DRIVING

*Alcohol and Road Traffic.* Proceedings of the First International Conference. Edited by R. Wagnsson, K. Bjerver, G. Nelker, S. Rosell, and J. Akerbladh-Rosell. (Pp. 336. 15 Kronor.) Stockholm: Kugelbergs Boktryckeri. 1951.

Twenty-two countries took part in this conference, which was held during August 30–September 1, 1950, at Stockholm under the patronage of the King of Sweden. It was recognized that the occasion was only a first step taken to survey the ground and obtain a clearer idea of the problem of alcohol and road traffic. It was thought that constructive action on a broader basis could be effected later by continuing international co-operation. The book records essential parts of the medical, legal, and educational communications and the subsequent discussions.

Reports from the participating countries give valuable information about the provisions adopted to deal with such problems as the method of ascertaining the presence and degree of intoxication; the extent to which blood and other chemical tests, clinical tests, medical opinions, and statements of witnesses and police officers are used; and whether a record of sobriety is a condition of receiving a driving licence. Other matters concerning the licence holder's record are considered, as well as propaganda activities against the consumption of alcohol when driving motor vehicles.

Medical articles consider the significance of tolerance (L. Goldberg), estimation of the level of blood alcohol from analysis of breath (R. N. Harger, R. B. Forney, and H. B. Barnes), an indirect method of determining alcohol in blood using samples of breath (H. W. Smith), a comparison with the Widmark method of the determination of ethyl alcohol by crystallized alcohol dehydrogenase (K. Bjerver, R. K. Bonnicksen, L. Goldberg,

and H. Thorell), quantitative analysis of alcohol in the blood by heat reaction (E. Shifferti), the effect of alcohol ingestion on driving ability (K. Bjerver and L. Goldberg), accident contributions of drivers as a function of their blood levels (H. W. Smith and R. E. Popham), and risks of ambiguity in dealing with and solving problems connected with alcohol and traffic (P. Dauphin). The articles are admirably constructed and well documented. The legal articles include studies from the U.S.A., Sweden, Norway, Belgium, and Denmark and deal with various approaches to the subject. It appears that alcohol tests are compulsory only in the Scandinavian countries, in Czechoslovakia, and in certain cantons in Switzerland. The last part of the book is on economic, pedestrian, insurance, temperance, and statistical aspects of the problem. A good index is provided.

This is a unique and valuable contribution to a socially important subject. Workers in this field will constantly refer to it.

W. NORWOOD EAST.

### BOOKS RECEIVED

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

*In a Harley Street Mirror.* By R. Scott Stevenson. (Pp. 278. 15s.) London: Christopher Johnson. 1951.

*The Great Plague in London in 1665.* By W. G. Bell, F.S.A., F.R.A.S. (Pp. 861. 25s.) London: The Bodley Head. 1951.

*Second Sight.* By L. Spence. (Pp. 190. 18s.) London: Rider. 1951.

*Birch's Management and Medical Treatment of Children in Tropical Countries.* By E. H. Vere Hodge, C.I.E., B.A., M.D., F.R.C.P., F.S.M.F. 9th ed. (Pp. 412. Rs. 16.) Calcutta: Thacker, Spink and Company (3, Esplanade East, Calcutta). 1951.

*Handbook of Medical Management.* By M. Chatton, A.B., M.D., and others. 2nd ed. (Pp. 507. \$3.) California: University Medical Publishers. 1951.

*Thyreotoxikosen und antithyreoidale Substanzen.* By Professor H. W. Bansi. (Pp. 99. M. 11.40.) Stuttgart: Georg Thieme. 1951.

*Sensibilitätsschema.* By Professor K. Hansen. 2nd ed. Part A: *Segmentäre Innervation.* (Pp. 50. M. 4.80.) Part B: *Periphere Innervation.* (Pp. 50. M. 4.80.) Stuttgart: Georg Thieme. 1950.

Dr. K. G. Khorozian, author of *The Microkaryocytes, the Fourth Corpuscles and Their Functions* (Boston: Meador Publishing Co.; \$12), is a physician with a general practice in the village of Pineville, West Virginia, who carries on biological research in his spare time. He describes, under the name of microkaryocytes, hitherto unknown corpuscular elements from which the entire structural make-up of all living organisms, both animal and plant, is formed. They are said to be cells with distinct nuclei and cytoplasm. It is claimed that the metabolism of the body is accomplished through the media of these newly discovered cells. The various naturally occurring granules—pigment granules, haemokonia, blood dusts, mitochondria, inclusion bodies, elementary bodies, etc.—are the same and identical bodies, the microkaryocytic cells. "All enzymes are cells, all hormones are cells," and the crystallization of enzymes and hormones is dismissed as a myth. The author has used the principle of enlargement by projection, as used in the moving-picture industry, which is very different from orthodox methods of resolution of fine structure. The first public announcement of the author's views was made at the meeting of the American Medical Association in June, 1944, and they do not seem to have achieved wide acceptance.

## 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.

## Sunday

LONDON JEWISH HOSPITAL MEDICAL SOCIETY.—At Adolph Tuck Hall, Woburn House, Upper Woburn Place, London, W.C.—September 23, 3 p.m., "*The Frontiers of Psychiatry*," Presidential Address by Dr. Emanuel Miller.

## Tuesday

●ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, London, W.C.—September 25, 5 p.m., "*The Use of Bone in Reconstructive Surgery*," by Mr. Rainsford Mowlem; 6.15 p.m., "*The Surgery of the Bile Ducts*," by Mr. Rodney Maingot.

## Wednesday

●ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, London, W.C.—September 26, 5 p.m., "*Non-malignant Surgical Affections of the Cardiac End of the Stomach*," by Mr. Norman Tanner; 6.15 p.m., "*Ureter in Gynaecology*," by Mr. Charles Read.

## Thursday

●ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, London, W.C.—September 27, 5 p.m., "*The Painful Shoulder*," by Mr. Ronald Furlong; 6.15 p.m., "*Pott's Fracture*," by Professor George Perkins.

## Friday

MEDICAL SOCIETY FOR THE STUDY OF VENEREAL DISEASES, 11, Chandos Street, Cavendish Square, London, W.—September 28, 7.30 p.m., "*The Pathogenesis of the Jarisch-Herxheimer Reactions*," by Dr. Albert Heyman. Discussion.

MIDDLESEX COUNTY MEDICAL SOCIETY.—At Chase Farm Hospital, Enfield, Middlesex, September 28, 4.30 p.m., annual general meeting. "*Emergency Surgery*," Chairman's address by Mr. H. O. Blauvelt.

●ROYAL COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS, 58, Queen Anne Street, London, W.—September 28, 2.30 p.m., "*The Princess Charlotte of Wales: A Triple Obstetric Tragedy*," William Meredith Fletcher Shaw Memorial Lecture by Sir Eardley Holland.

●ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, London, W.C.—September 28, 5 p.m., "*The Principles of Treatment in Burns*," by Mr. William Gissane; 6.15 p.m., "*Obstructive Hydrocephalus*," by Mr. J. Pennybacker.

## APPOINTMENTS

Dr. John Marshall, M.C., T.D., has been appointed Honorary Surgeon Oculist to the King in Scotland, in succession to Mr. A. H. H. Sinclair, who has resigned.

EAST ANGLIAN REGIONAL HOSPITAL BOARD.—*Senior Registrar in Chest Medicine at Cambridgeshire Chest Clinic*, Ann H. Willcocks, M.B., B.S., M.R.C.P. *Ophthalmic Registrar at East Suffolk and Ipswich Hospital*, John Monckton, Esq., M.R.C.S., L.R.C.P., D.O.

LASSMAN, L. P., M.B., B.S., F.R.C.S., Assistant Regional Neuro-surgeon, Newcastle-upon-Tyne Regional Hospital Board.

MACKENZIE-WINTLE, HECTOR A., M.R.C.S., L.R.C.P., D.P.H., Medical Officer of Health to South Oxfordshire Combined Districts (Henley Borough and Rural District, Thame and Bicester Urban Districts, Bullingdon and Ploughley Rural Districts).

MANCHESTER REGIONAL HOSPITAL BOARD.—*Consultant Orthopaedic Surgeon, Wigan and Leigh Hospitals*, F. R. Zadik, M.B., Ch.B., F.R.C.S. *Consultant Orthopaedic Surgeon, Withington Hospital, Manchester, and Stockport and Macclesfield Hospital Areas*, J. C. F. Cregan, M.B., B.S., F.R.C.S. *Assistant Anaesthetist, Lancaster and Kendal Hospitals*, A. K. Karfoot, M.B., Ch.B., D.A.

MAWSON, S. R., M.B., B.Chir., F.R.C.S., D.L.O., Assistant Ear, Nose and Throat Surgeon, King's College Hospital Group, London.

## BIRTHS, MARRIAGES, AND DEATHS

## BIRTHS

Gavey.—On September 3, 1951, at Westminster Hospital, London, S.W., to Marjorie (formerly Guille), wife of C. J. Gavey, M.D., F.R.C.P., a daughter.

Goodsir-Cullen.—On August 10, 1951, at Ipswich Maternity Home, to Dr. and Mrs. Ernest Goodsir-Cullen, a son—Niall Jonathan.

Scrivener.—On September 13, 1951, at Aldwick, Sussex, to Patricia, wife of Major J. P. Scrivener, M.B.E., R.A.M.C., a son—John Rupert.

Simons.—On September 11, 1951, at Manygates Maternity Hospital, Wakefield, Yorks, to Joan (formerly Garside), M.B., Ch.B., wife of E. L. Simons, M.B., B.Chir., a daughter.

## DEATHS

Hunter.—On September 16, 1951, at his home, Epsom, Surrey, John Bowman Hunter, C.B.E., M.C., M.Ch., F.R.C.S., aged 61.

Jack.—On September 10, 1951, at Holmwood, Kilwinning, Ayrshire, James Jack, M.D.

McGrath.—On September 15, 1951, Annie Margaret McGrath, M.B., B.S., D.P.M., of St. Christopher's, Wilkin's Green Lane, Hatfield, Herts.

Mathieson.—On September 10, 1951, at his home, 14, Heyham Hall Grove, Heysham, Lancs, James Moir Mathieson, M.B., Ch.B., late of Sheffield.

Wright.—On September 11, 1951, at The Brae, Lower Bourne, Farnham, Surrey, Maurice Beresford Wright, O.B.E., M.D.

## 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.

## Counteracting Action of A.C.T.H.

Q.—Is there any antidote to A.C.T.H.?

A.—An antidote is usually taken to mean a substance which opposes or annuls the action of a poisonous or toxic substance. A.C.T.H. is a physiological hormone, so strictly speaking there is no antidote. The duration of its effect in the body is very brief, and the effect of a single dose probably lasts not longer than four hours, so that treatment is easily withdrawn. The effects of continued dosage are of course cumulative. Untoward responses of moderately acute onset include oedema and potassium deficiency. Usually withdrawal of the hormone is sufficient to combat these troubles, but a mercurial diuretic and possibly digitalis therapy may be needed. The use of the mercurial may aggravate the tendency to potassium deficiency and therefore be dangerous, unless the possible requirement for more potassium is borne in mind. Increased dosage of insulin may be required in diabetics given the hormone. The response to insulin is poor while A.C.T.H. is administered. From the physiological standpoint there is evidence to suggest that the growth hormone has some action opposing that of A.C.T.H.—certainly they have opposite effects on growth. Growth hormone favours nitrogen anabolism, A.C.T.H. nitrogen catabolism. But both hormones favour the development of diabetes under certain conditions.

## Multilingual Upbringing

Q.—In this district Welsh is the medium of instruction in all schools for young children. No English is used until the child is 7, when it is introduced as a secondary language, though many children come from English homes. Are psychological disturbances more common in children whose basic language is changed on going to school, and do they tend to be backward compared with other children?

A.—To have to cope with two different languages is undoubtedly somewhat of a strain, and one might expect emotional disturbances to rise slightly in frequency among children bilingually educated. Though the situation cannot have been uncommon among the children of immigrants in the United States, and in the countries of Eastern Europe, there appears to be no observational study on the point. Smith, M. E. (*J. Genet. Psychol.*, 1949, 74, 305), has reported on Chinese children educated in Honolulu. English was the preferred language. The average total vocabulary of these children was nearly equal to that of monoglot controls; but if words whose meaning was known in both Chinese and English were counted once only, the standard reached was only 80% of that of controls, and in English and Chinese separately 60% and 40%. The author believed that the bilingual child was to some extent handicapped.

## Fluoride Poisoning

Q.—What are the dangers of exposure to the fumes of ammonium bifluoride? A girl of 18 who works with this substance has recently had septic fingers, tonsillitis, and pain over the left lower ribs, with breathlessness on exertion lasting for a month. Are these conditions likely to be related to her employment?

A.—Ammonium bifluoride is an acid salt,  $\text{NH}_4\text{F}\cdot\text{HF}$ , used for glass etching, as a flux in magnesium foundries, and as a disinfecting agent in breweries. The risks in its use are those of hydrofluoric acid and fluorides in general. The hydrofluoric acid (HF), which is a component of this