

uterine tumours regularly in animal species other than the guinea-pig, which is singularly susceptible, have been unsuccessful, but this should not detract from the value of these experimental findings. Part II is on what the author terms the "antifibromatogenic action" of different steroids, and particular attention is paid to the prevention of oestrogen-induced fibroids by administration of progesterone, desoxycorticosterone acetate, and testosterone propionate. The hypophysial-ovarian factors in the balance of steroids are discussed at some length in part III, which is perhaps the most controversial section of the book, since the author refuses to accept the current conception that oestrogens can inhibit the gonadotrophic activity of the anterior pituitary. Dr. Lipschutz puts forward evidence based on his experiments that the gonadotrophic function of the anterior hypophysis is regulated by steroids.

Apart from the experimental work described in this volume, it also has its uses as a work of reference. It is well constructed, with clear headings to the several subsections, and the many photomicrographs are of good quality.

E. S. HORNING.

### ENCYCLOPAEDIA OF ANTIBIOTICS

*Handbook of Antibiotics.* By A. L. Baron. (Pp. 303. 52s.) New York: Reinhold Publishing Corporation. London: Chapman and Hall. 1950.

This book is a potted encyclopaedia of antibiotics, 143 of which are tersely described in alphabetical order. Successive sections in each account deal with discovery, methods of production, chemical constitution and other properties, action on bacteria (in the animal or patient as well as *in vitro*, if any such information is available), and pharmacology. A "bibliography" accompanies each item, but when, as in connexion, for instance, with herquein, inolomin, and irpexin, this consists of a single publication, this heading and the stock phrase "first described by" (when "first" may possibly mean "only" for all time) seem perhaps unduly flattering.

It is almost true to say of some of the better-known antibiotics that the space allotted to them varies in inverse proportion to their therapeutic utility. Thus the accounts of penicillin and streptomycin are deliberately made short, because if adequate they would "completely unbalance" the book. They occupy two and three pages respectively, whereas neighbouring accounts of polymyxin and streptothricin get nine and eight. The description of the newer antibiotics in therapeutic use are remarkably good in view of the publication date, but 25 of the 26 items in the bibliography on terramycin are from a single number of one journal, of which the author seems to have had advance proofs, and the account of the clinical use of this drug is incorrect in stating that it is ineffective in staphylococcal infections. Clinical information (of which there is none in connexion with most of the substances described) is not a leading feature, and there is sometimes no hint of what has been hoped of a new antibiotic. No reader would suppose, for instance, that clitocybine had been hailed as a remedy for tuberculosis, or that it was to the treatment of this disease that the discoverer of neomycin had pinned his faith in the drug.

When all this has been said, and when it is appreciated that most clinicians will not find much here to help them, the fact remains that this book is a prolific source of readily accessible information of many kinds, indis-

pensable to an investigator in this field, and invaluable to anyone whose interest in antibiotics extends beyond their clinical use.

L. P. GARROD.

### MARRIAGE OR PROFESSION

*The Encircled Heart.* By Josephine Elder. (Pp. 271. 8s. 6d.) London: Lutterworth Press. 1951.

Contrary to what may be the first thought of the reader of the title of this book, it is not a treatise on a hitherto unchristened form of cardiac disease. It is a novel by a practising doctor writing under a pseudonym. Its chief characters are doctors and most of the rest figure as patients. Its main theme is a problem that has been faced by many doctors, and other professional men and women, with varying success: Is it wise for a professional person to marry one who has a promising professional career of his or her own and is unwilling to give it up?

The heroine of this book is a busy general practitioner and loves her work. Until she meets the man involved (who is a university lecturer on education) she believes she has found in her practice a completely satisfying way of life. They marry, and at first all is bliss, until the husband finds that a busy woman doctor cannot give him the time and attention he thinks a man should expect from his wife. There follows a period of strain, which is temporarily ended when they have two children and the practice is—reluctantly—given up. Later the war takes the husband off to India for some years and the wife jumps at the chance to join the hard-driven local general practitioner. I must not give away the complications which follow, but all ends more or less happily, though I thought the loose ends were not tied up very neatly.

The author is very successful in describing the trials and pleasures of family practice. Her general practitioner may be slightly romanticized, but she has the right conception of what constitutes the good family doctor. I thoroughly enjoyed the book, so can cordially recommend it to doctors—and patients.

ALFRED COX.

### BOOKS RECEIVED

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

*The Formation of Adrenaline in the Body.* By Professor J. H. Burn, M.A., M.D., F.R.S. Sir Jesse Boot Foundation Lecture, 1950-1. (Pp. 19. 1s. 6d.) Nottingham: The University. 1951.

*Der Naturforscher Goethe.* By the Rudolph Virchow Medical Society. (Pp. 77. No price.) New York: Rudolph Virchow Medical Society. 1949.

*Curriculum Vitae e Indice de las Publicaciones Cientificas.* By E. Ingber. (Pp. 48. No price.) Buenos Aires. 1951.

*Über den Blutfarbstoffwechsel gesunder Säuglinge und Kinder.* By W. Künzer. (Pp. 86. 11 Swiss francs.) Basle: S. Karger. 1951.

*Die Anatomischen Schriften.* Edited by Dr. R. Kapferer. (Pp. 55. \$3.50.) Stuttgart: Marquardt. 1951.

*Allgemeinpathologische Schriftenreihe.* Edited by Professor G. Ricker and Professor H. H. Kalbfleisch. Vol. 8. (Pp. 125. No price.) Stuttgart: Marquardt. 1951.

*Die Durchblutungsstörungen der Gliedmassen.* By Dr. W. Block. (Pp. 298. M. 38.) Berlin: Walter de Gruyter. 1951.

Dr. RAY A. PATELSKI, well known for his work on synthetic vitamins and antibiotics, died on September 7 in New York after a short illness. He was 45 years of age. Educated at the University of Michigan, he took the degrees of B.Sc. (Pharmacy) in 1927, M.Sc. in 1933, and Ph.D. (in organic chemistry) in 1936. From 1927 to 1938 Dr. Patelski held a number of university appointments, and he then joined the chemical research department of Chas. Pfizer and Co. Inc. At the time of his death he was co-ordinator of clinical investigations. In the latter phase of his career he became well known to physicians in many parts of the world. During the second world war he served in a civilian capacity with the Office of Scientific Research and Development of the National Research Council (U.S.).

Dr. GEORGE DE SWIET, chairman of the Paddington Division of the British Medical Association, died suddenly on September 23, aged 68. He had been in practice in Paddington for over 30 years. A Pole by birth (he changed his name after settling in this country), he studied medicine at a number of the most famous medical schools in Europe and graduated M.D. at Munich in 1910. After coming to this country and studying at the London and King's College Hospitals he took the Conjoint qualification in 1912. During the first world war he was a civil medical officer to the 4th London General Hospital, Denmark Hill. After settling in Paddington he took a keen interest in political as well as medical affairs. In fact, at the General Election in 1935 he stood unsuccessfully as the Liberal candidate for Paddington North. An active member of the British Medical Association, he acted as the representative of the Paddington Division from 1938 to 1951 without a break, and from 1944 until the time of his death he was chairman of the Division. A post to which he brought his special knowledge and qualifications was the honorary presidency of the Polish Medical Association in the British Empire. Besides publishing a number of letters in this *Journal* on medico-political subjects, he was the author of a book entitled *Mechano-Therapeutics in General Practice* (published in 1914), and he translated Rollier's *Heliotherapy of Tuberculosis*.

Dr. G. M. Gray writes: We in Paddington are very conscious of the loss of our chairman, Dr. George de Swiet. The Paddington Division was largely created by him, when he thought the Hammersmith and Kensington Division was somewhat too circumscribed for all the various opinions in the area. We could always count on a warm breath of salutary radicalism at our meetings, and sometimes what was thought to be a voice in the wilderness proved at a later date to be the considered opinion of earlier critics. There was never any venom, but a spade was a spade and should be so called. While much interested in medicine, and especially in all advances that would help his patients, he had a much wider horizon, and the betterment of mankind, as well as the individual, held his interest and led him into the medico-political world. He had been a member of the London County Council, the Paddington Borough Council, and the Insurance Acts Committees of London for many years. His charm of manner endeared him to many who may not have shared his views. All of us will miss his kindly presence and enthusiasm and mourn him as a most happy friend. Our sympathy goes out to his wife and son, who, as a medical consultant in Wales, is carrying on his father's tradition of service.

The discovery of a plot to export about 80 lb. of streptomycin to Spain led to the arrest of 50 people in Lisbon (*Le Figaro*, September 24). The distribution of the drug in Portugal is solely the responsibility of the Red Cross, and the stolen goods were said to have been obtained through the complicity of several employees, and also by means of faked prescriptions.

## Medico-Legal

### A.I. AND THE JURISTS

[FROM OUR MEDICO-LEGAL CORRESPONDENT]

It has always been the proud boast of English lawyers that the unwritten Common Law of England, expounded but not made by the judges, and to be found not in any written code but in the judges' bosoms and in the reports of their judgments, is flexible enough to meet the substantial changes which have taken place in the everyday life of England since Norman times. One of these changes, a change in what has been one of the lawyers' basic assumptions—namely, that the birth of a child presupposed sexual intercourse between a man and a woman—has been brought about by the growth of the practice of human artificial insemination. The kind of problem this has raised in the English law of nullity of marriage, and how the judges have solved it, was the subject of a report in these columns last week.

Similar problems are now exercising the jurists of Scandinavia, who do not enjoy the English common law. A judicial commission representing the four Scandinavian countries has been specially appointed at the instance of the Danish Minister of Justice to consider them. Two problems in particular are to be submitted to the commission.

A woman during her marriage to Mr. A had a child by artificial insemination without medical supervision by a donor named Mr. B, whose identity she knew. Her marriage to Mr. A was later dissolved, and she married Mr. B. Mr. A and Mr. B each claim the custody of the child on the ground of being its father. Secondly, there is a proposal that unmarried women should in special circumstances be officially allowed to have children by A.I.

The answer to these two problems in English law would undoubtedly be this: if it was proved that the child was born as a result of Mr. B's intervention by artificial insemination and could not have been born as a result of normal intercourse with Mr. A, Mr. B would be found to be an adulterer and father of the child. The single woman could bring successful bastardy proceedings against the artificial-insemination donor, if she could identify him, as putative father of the child.

The answer of the Scandinavian judicial commission has yet to be given.

## Universities and Colleges

### UNIVERSITY OF OXFORD

The University is proposing to offer one scholarship, renewable annually, to a medical student of high academic distinction wishing to take his clinical course at Oxford. The scholar will be free to take the final medical examinations of his own university or, provided he is eligible, the Oxford B.M. degree. The scholarship will be awarded on interview and record and will be of an approximate value of £250 a year for three to five years according to circumstances. It will not be available to enable a student to undertake research and it will cease on medical qualification. Full particulars and application forms may be obtained from the secretary of the Medical School, University Museum, Oxford.

### UNIVERSITY OF LONDON

Professor J. M. Mackintosh will deliver the Heath Clark Lectures on "Trends of Opinion about the Public Health, 1901-1951" at the London School of Hygiene and Tropical Medicine, Keppel Street, Gower Street, W.C., on November 6, 8, 13, 15, and 19, at 5 p.m. The lectures are addressed to students of the University and to others interested in the subject. Admission is free, without ticket.

- INSTITUTE OF ORTHOPAEDICS, Royal National Orthopaedic Hospital, 234, Great Portland Street, London, W.—October 11, 8.30 p.m., "*A Study of 762 Patients with Spinal Cord Injuries*," by Professor Loyal Davis (Northwestern University, Chicago).
- INSTITUTE OF UROLOGY.—At St. Paul's Hospital, Endell Street, London, W.C., October 11, 10 a.m., "*Anuria*," by Mr. F. R. Kilpatrick; 11 a.m., "*Primary Syphilis*," by Dr. W. N. Mascall; 11.15 a.m., "*Tumours of Kidneys and Ureter*," by Mr. H. Rees; 2 p.m., "*Injuries of Kidney and Ureter*," by Mr. A. W. Badenoch; 3.15 p.m., "*Congenital Anomalies of Kidney and Ureter*," by Mr. J. G. Sandrey.
- ROYAL COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS, 58, Queen Anne Street, London, W.—October 11, 5 p.m., "*The Causes and Management of Premature Birth*," John Shields Fairbairn Memorial Lecture by Dr. Nicholson J. Eastman (Johns Hopkins Hospital, Baltimore, U.S.A.).
- ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, London, W.C.—October 11, 5 p.m., "*Thyrotoxicosis*," Cecil Joll Lecture by Sir Thomas Dunhill; 6.15 p.m., "*Practical Considerations in the Surgery of the Hand and Fingers*," by Mr. Eric Farquharson.
- ST. GEORGE'S HOSPITAL MEDICAL SCHOOL, Hyde Park Corner, London, S.W.—October 11, 4.30 p.m., lecture-demonstration in psychiatry by Dr. D. Curran.

### Friday

- EDINBURGH POSTGRADUATE BOARD FOR MEDICINE.—At Anatomy Lecture Theatre, University New Buildings, Edinburgh, October 12, 5 p.m., "*Aureomycin*," by Dr. Benjamin Duggar (University of Wisconsin).
- INSTITUTE OF DERMATOLOGY, Lisle Street, Leicester Square, London, W.C.—October 12, 5.30 p.m., "*Scleroderma, Granuloma Annulare*," clinical demonstration by Dr. G. B. Dowling.
- INSTITUTE OF UROLOGY.—At St. Paul's Hospital, Endell Street, London, W.C., October 12, 10 a.m., "*Marion's Disease and Diverticula of the Bladder*," by Mr. R. Ogier Ward; 11 a.m., "*Secondary Syphilis*," by Mr. A. H. Harkness; 2 p.m., "*Treatment of Tuberculosis*," by Mr. F. R. Kilpatrick; 3.15 p.m., Demonstration of X Rays, by Mr. J. E. Semple; 5 p.m., "*Gonococcal Urethritis*," by Dr. W. N. Mascall. At St. Peter's Hospital, Henrietta Street, London, W.C., October 12, 11.15 a.m., museum demonstration by Mr. H. K. Vernon.
- KENT AND CANTERBURY HOSPITAL, Canterbury.—October 12, 8 p.m., clinical meeting.
- LONDON ASSOCIATION OF THE MEDICAL WOMEN'S FEDERATION.—At Royal Free Hospital School of Medicine, 8, Hunter Street, London, W.C., October 12, 8.30 p.m., annual general meeting.
- LONDON UNIVERSITY.—At University College Hospital Medical School, University Street, Gower Street, London, W.C., October 12, 5 p.m., "*Premature Rupture of the Membranes: Its Bearing on Maternal Fertility and Infant Outcome*," first of two special university lectures in medicine by Professor N. J. Eastman (Johns Hopkins University). (See also October 15.)
- ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, London, W.C.—October 12, 5 p.m., "*Surgical Relief of Pain*," by Professor Lambert Rogers; 6.15 p.m., "*Cancer of the Skin*," by Sir Stanford Cade.
- ROYAL INSTITUTE OF PHILOSOPHY, 14, Gordon Square, London, W.C.—October 12, 5.15 p.m., "*The Status of Brain in the Concept of Mind*," Manson Lecture by Sir Henry Cohen.
- ROYAL MEDICAL SOCIETY, 7, Melbourne Place, Edinburgh.—October 12, 8 p.m., "*Spinal Man*," by Mr. I. G. Lennox.

### Saturday

- INSTITUTE OF UROLOGY.—At St. Paul's Hospital, Endell Street, London, W.C., October 13, 10 a.m., "*Cystic Disease of the Kidney*," by Mr. J. D. Fergusson; 11.15 a.m., "*Neoplasms of the Urethra, Penis, and Scrotum*," by Mr. D. I. Williams.

## BIRTHS, MARRIAGES, AND DEATHS

### BIRTHS

- Cox.—On September 27, 1951, at Nuffield House, Guy's Hospital, London, S.E., to Betty (formerly Padbury), wife of Dr. A. G. Charlton Cox, a son—James George.
- Morgan.—On August 22, 1951, at Galt Hospital, Lethbridge, Alberta, Canada, to Helen (formerly James), wife of John E. Morgan, M.R.C.O.G., a son—David John.
- Murley.—On September 29, 1951, to Elizabeth Mary (formerly Price), wife of Dr. David R. Murley, of Polmenna, Falmouth, Cornwall, a daughter.
- Swan.—On September 21, 1951, at Lady Margaret Nursing Home, London, W., to Diana (formerly Sturges), wife of Dr. John H. Swan, a daughter.

### MARRIAGES

- Caira—Senior.—On September 25, 1951, at St. Andrew's Cathedral, Glasgow, Dr. Eugene G. Caira, of 45, Albert Road, Gaurock, Renfrewshire, to Anne Senior, of Langcliffe Cottages, Kettlewell, Yorks.

### DEATHS

- Card.—On September 23, 1951, at 47, Cassiobury Park Avenue, Watford, Herts, Alfred Herbert Card, M.R.C.S., L.R.C.P., late of Muswell Hill, London, N.
- Davy.—On September 25, 1951, at Melbourne, Philip Claude Tresilian Davy, C.M.G., M.B., Lieutenant-Colonel, R.A.M.C., retired, aged 75.
- Dow.—On September 22, 1951, at Olrig Bank Nursing Home, Kendal, James Fleming Dow, M.D., of Uplands, Arnside, Westmorland.
- Hudleston.—On September 22, 1951, at Eastbourne, Ivor Robert Hudleston, D.S.O., M.R.C.S., L.R.C.P., Lieutenant-Colonel, R.A.M.C., retired.

## 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.

### A Typical Lag Curve

**Q.**—What is the prognosis for a man of 35 in whom glycosuria has been discovered to be due to "a typical lag curve"? He has been rejected for military service because of this finding.

**A.**—The prognosis is very good, but it must be remembered that the patient is as likely, but probably no more likely, than anyone else to develop diabetes. If this does occur, there is usually some delay in making the diagnosis, which can be made only by a sugar tolerance test. A family history of diabetes may be misleading, as the other members may also have had an innocent glycosuria, but if genuine should ensure periodical investigations. The sugar tolerance curve should always be repeated before any operation is performed.

### Linoleic and Linolenic Acids

**Q.**—What are the therapeutic actions of linoleic acid and linolenic acid when given by mouth or injection? A patient who had been taking a capsule containing 0.4 g. of the ethyl esters of these acids once daily for 10 days had an attack of tetany. Is this likely to have been related to the therapy?

**A.**—In 1929 evidence was published by G. O. Burr and M. M. Burr that, when rats are given a diet containing no fat, in course of time they develop skin lesions due to desquamation, and also necrosis of the tail. Investigation showed that these changes were due to the absence of unsaturated fatty acids, and that the most effective ones in preventing the changes were linoleic and linolenic acids. In 1933 Hansen attempted a clinical application of these findings by treating children who were suffering from chronic eczema with fats rich in these two acids. Good results were obtained. Since that time linoleic and linolenic acids have been used with success in some cases of eczematous furunculosis (in adults), in psoriasis, in infantile eczema, in chronic leg ulcers, and in chronic furunculosis. Treatment may have to be continued for three months. It is quite possible that the administration of ethyl esters of these acids might produce tetany. After the esters are split, the free fatty acids may combine with calcium and prevent the absorption of that element in sufficient quantities.

### Medical Treatment of Gallstones

**Q.**—Is there any medical treatment of gallstones which can cause them to dissolve or be passed into the gut? I have heard of practitioners who have given liquid medicine which caused severe pain but resulted in the passage of a number of fairly large gallstones.

**A.**—There is no medical treatment of gallstones which will lead them to dissolve or be passed into the gut. Olive oil has been used extensively, and produces some relief in gall-bladder disease largely by reducing the symptom of flatulence. It quite often results in the passage of faecal concretions *per rectum* that closely resemble calculi and have been regarded by patients as gallstones. Pethidine in acute biliary colic relieves pain and does not cause spasm of the sphincter. Thus small stones may be passed after it has been given, but it has no direct action in expelling them.