

That clinic would be utilized mainly for cases of fracture and other injuries, and would contain a large suite of rooms with theatre, gymnasium, x-ray room, plaster room, etc. Sir James believed that the time had come when the Government must lend a hand to the voluntary hospitals. A first-class nursing service was vital to the State, and this was chiefly provided by voluntary hospitals. Hospital expenses continued to mount, and the State should now step in to share expenditure which had previously been met by voluntary contributions.

## Correspondence

### Air Raid Precautions

SIR,—The circular letter which appeared in the lay press on January 13 signed by a number of the leading physicians and surgeons in the teaching hospitals of London and the provinces deserves the earnest attention of all members of our profession, for it draws attention to a point which is apt to be forgotten in the battle between the advocates of the surface and the underground schools of A.R.P. defence.

The point is that it is quite useless providing skilled personnel and adequate accommodation for severe casualties if these are to be handled in unprotected operating theatres and nursed in unprotected wards. The hospitals ought to be provided with deep bomb-proof operating theatres and a certain number of wards if they are to be any use at all. Everyone knows that doctors and nurses will carry on in unprotected quarters if ordered to do so; but is it either wise from the patients' standpoint or fair from that of the personnel to ask them? Anyone who has seen the after-results of a bomb dropped in the middle of an operating theatre, as I have, will never want to see the same thing happen again.

No one wants to embarrass the Government in its efforts to improve passive defence, but each of us must know people of influence, either in Parliament or in the administrative services, and if this point were put plainly before them much valuable time might be gained. Our hospitals ought to be adequately protected, and it is our duty as doctors to draw repeated attention to the fact.—I am, etc.,

J. JOHNSTON ABRAHAM,  
C.B.E., D.S.O., F.R.C.S.

London, W.1, Jan. 13.

### Manipulation of the Spine

SIR,—I have read with great interest Mr. George Perkins's article on manipulative surgery in your issue of December 10, 1938 (p. 1214), and Dr. W. Hargrave Wilson's comment thereupon in your issue of December 31, 1938 (p. 1394). Like the latter author I cannot agree with Mr. Perkins that minor displacements of bone do not exist and that only major ones are possible. If a bone is capable of being moved pathologically into a position of major displacement or dislocation, it must during the commencement of such movement occupy a position which constitutes a minor displacement, and will persist as such were its onward progress towards becoming a major displacement suddenly arrested at this point. I have practised spinal manipulation for over twenty-five years, during which time I have diagnosed and replaced many thousands of minor displacements of the vertebrae, ilia, and ribs, and have obtained results when other methods had previously signally failed.

I would also like to endorse Dr. Hargrave Wilson's opinion that the profession should recognize the existence of the spinal lesion (which is so frequently associated

with minor displacements) and should acquire the technique of spinal manipulation. With reference to the latter, however, I would like once again to express my disapproval of a method which is fairly common at the present day—namely, of manipulating the spinal column in every direction during general anaesthesia in the hope that something will move somewhere. I have frequently seen this method, which is haphazard and unscientific, lead to disastrous results.—I am, etc.,

London, W.1, Jan. 10.

EDGAR CYRIAX, M.D.

### Compulsory Immunization against Diphtheria?

SIR,—In case of national emergency many districts will have to take into their areas very large numbers of persons the majority of whom will be children, a proceeding which will be accompanied by the danger of the spread of epidemic diseases. I suggest, therefore, since diphtheria is one of the most deadly of them while at the same time it is the most preventable, that either no children should be allowed to be evacuated from danger zones until they have had an adequate dose of diphtheria prophylactic, or, better still, that diphtheria immunization should be compulsory for all children between 9 months and the school-leaving age.—I am, etc.,

Glossop, Jan. 16.

E. H. M. MILLIGAN,  
Medical Officer of Health.

### Mechanical Respirators

SIR,—The suggestion by Sir Frederick Menzies of a "flying squad" to meet the threats of outbreaks of poliomyelitis (*Journal*, January 14, p. 85) becomes of increasing importance with the coming of the mechanical respirator, for one can foresee various unfortunate results for a time from inexperience or too late application. This country has escaped the disease remarkably, but the recent publication of maps in the *Journal* (December 31, 1938, p. 1400) shows existing risks. What an outbreak might become can be seen by examination of serial spot maps of the recent outbreak in Melbourne, although these do not indicate the crippling results of later years. An almost unnoticed outbreak at Plymouth in 1911 was only made evident when ten years later the *Report of the Central Cripples Committee* (1922) gave lists at various ages of crippled children, analysis of which placed eighty-eight children as probably crippled by the 1911 outbreak. Since then voluntary efforts have been made, and local authorities have provided orthopaedic clinics and cripple schools; but too often they still await the onset of the maximum damage before attempting to repair it. Fourteen years ago the story was summed up:

"Neglect of infant palsy in this country is grievous. The greater part of the paralysis could be prevented by early care, which at present is beyond attainment by few except the richest members of the community. It is worth spending very considerable sums on a rapid and effective provision for any outbreak by dispatching units from the central authority to any part of the country to undertake care of even a few cases, till the danger is past. Such a unit would include doctors, nurses, and other workers with the outfit." (*Fundamentals of School Health*, p. 182.)

This provision is almost beyond the duty of local authorities; it is a national or regional requirement. Lord Nuffield has set a noble example by doing what is within his reach. Our ideas should have been so advanced that it will be possible for the Ministry of Health to take powers to organize observation and care at the earliest appearance of this crippling disease, and the complete utilization of the machinery for rescuing the most serious cases, otherwise doomed to early death.—I am, etc.,

Edinburgh, Jan. 14.

JAMES KERR.