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up under the chairmanship of Lord Horder to co-ordinate the cancer work in the group of hospitals and to advise as to its future expansion.

Functions and Form of the Service

Such then, in outline, is the (Experimental) Cancer Service evolved by the Royal Cancer Hospital in accord with the general principles enunciated by the National Radium Commission. It is designed to perform a dual function. First in relation to the sufferer, by placing freely at the disposal of the staffs and patients of co-operating hospitals all resources of experience, skill, and apparatus in the group. Secondly in relation to research, by furnishing the clinician and research worker with a volume of material of all types of cancer, and especially of the more uncommon types dealt with in numbers by the special hospitals. This allows of the investigation of the course of malignant disease in various stages of development and in every part of the body. Incidentally the service is also invaluable from an educative point of view in that it provides data for refresher courses and for the advanced instruction of postgraduate students.

In form the organization fulfils the essential requirements of a co-operative cancer service. It might well be taken as a pattern for remodelling some other cancer services, since it provides for the examination, diagnosis, and planning of treatment of the patient by a team of experienced men, and offers to patients of the group the advantages of being treated at a well-equipped irradiation centre by experienced radiotherapists. Moreover it provides adequate samples of malignant disease for investigation and research. The number of new cases seen for diagnosis and treatment per annum by the services has already passed the 2,000 mark (which approximately represents the normal incidence of cancer in a population of two millions). Further expansion is at present limited by the number of beds that can be made available.

An important feature of the service is that it has no geographical limits, but is designed to deal with all forms of cancer, including the more uncommon forms which are selected for specialized treatment at the special hospitals, whatever the origin or domicile of the patient may be.

TRANSFER OF ASLIB MICROFILM SERVICE

Since the information contained in scientific and technical periodicals is often of vital importance to research, the cutting off, in the early days of the war, of normal supplies of European journals presented grave problems. To meet these difficulties Aslib (the Associat.on of Special Libraries and Information Bureaux), with the help of the Royal Society, the Rockefeller Foundation, and British industry, organized a microfilm service in April, 1942, to supply, in microfilm or paper enlargements, copies of scientific and technical periodicals published in Germany and countries occupied by Germany during the war years. The service was used by the British and American Governments, by more than 300 scientific institutions and research stations in Great Britain and the Empire, and, under a special agency arrangement, by several hundred institutions in the United States. The library of master negatives accumulated for the purpose contains some 14,000 separate issues of approximately 500 titles, equivalent to a total of over a million copies.

The Aslib Microfilm Service also undertook, on behalf of the British Council, the supply of microfilm copies of British periodicals to China while that country was cut off from ordinary surface transport. The proportions of this scheme grew until during the last year some 170 periodicals were regularly microfilmed and six positive copies of each were flown to China. Chinese scientific and cultural organizations, with the help of 100 microfilm projectors set up in about a dozen reading centres, have been able to keep in touch with developments in the outside world.

The end of the war reduced the demand for the special functions the Aslib Microfilm Service had been set up to fulfil, and it became evident that the demand for documentary reproduction as an aid to science and learning, though potent ally great, needed further time for development in Great Britain. A scheme for the rehabilitation of medical libraries in Europe

was then brought forward by the Royal Society of Medicine. Aslib has agreed, therefore, to the transfer of the Microfilm Service to medical uses and, by arrangement with the Royal Society of Medicine, the Aslib Microfilm Service became on Jan. 1 an integral part of the Central Medical Library Bureau of the Royal Society of Medicine. Requests for copies from existing master negatives and for copies of individual references should be addressed to Aslib, 52, Bloomsbury Street, London, W.C.1.

RESEARCH IN BLOOD DISEASES

The trustees of the Lady Tata Memorial Fund invite applications for grants and scholarships for research in diseases of the blood, with special reference to leukaemia, in the academic year beginning on Oct. 1, 1946. Grants of variable amount are made for research expenses or to provide scientific assistants to senior workers. Scholarships are awarded as personal remuneration; their normal value has been £400 per annum for whole-time research, with proportionate adjustment for work on a parttime basis, where this is approved. The grants and scholarships are open to workers of any nationality, and in any country in which it will be possible to make payments in the coming academic year. The available information on this point, regarding particular countries outside the British Empire, will be supplied to intending applicants on request. Applications must be submitted before March 16, 1946, and the awards will be announced by the trustees in June. Further particulars and forms of application may be obtained from the secretary of the Scientific Advisory Committee, c/o the Medical Research Council, 38, Old Queen Street, Westminster, London, S.W.1.

SHORT-SERVICE COMMISSIONS FOR SPECIALISTS A CALL FOR VOLUNTEERS

The Central Medical War Committee has been informed that, on the recommendation of the Medical Personnel (Priority) Committee, it has been decided that specialists and graded specialists recruited to the medical branches of the Forces will now be accepted for short-term employment for eighteen months if they were born before July 1, 1915. The commissions held will be known as "specialist short-service emergency commissions." They will be granted to those specialists and graded specialists (born before the above date) who are called up under the compulsory recruitment procedure and to those above military age (born before July 1, 1905) who offer their services voluntarily.

The Central Medical War Committee is instructed to carry out specialist recruitment to the extent necessary for the replacement of serving specialists who are due for release in Class A or recommended for release in Class B and who cannot be released unless substitutes are provided. The Committee has been making every effort to increase the yield of specialist recruits but with only limited success, and already there are a considerable number of Service specialists whose release in Class A is being retarded. The Committee therefore appeals for offers of voluntary service, and hopes that specialists above military age who might hesitate to offer their services for an indefinite period will be prepared to accept the new shortservice commissions. Officers holding these commissions will be returned to the United Kingdom before the end of their 18 months' service, and will be eligible for 28 days' leave on full pay on completion of their service.

Volunteers should communicate with their Local Medical War Committees, or, in the London area, with the Committee of Reference at B.M.A. House, Tavistock Square, W.C.1. The need is urgent, and it is hoped that there will be an immediate response to this appeal in order that serious hardship to the Service specialists due for release may be prevented.

The short-service commissions will not be granted to general duty officers, but doctors will no longer be recruited compulsorily for general duty unless they were born on or after July 1, 1915. Civil direction is now applied only to men doctors below the age of 31. Women doctors are no longer liable to direction.