

had gone and the patient appeared better, the calcium chloride was continued until the evening, when it was stopped owing to severe headache. About 9 p.m. the rash reappeared, and in six hours was thick and universal, oedema of the larynx and tongue developed, and there was cyanosis and difficulty of breathing; adrenaline was sprayed on the fauces and 5 minims administered hypodermically; she vomited twice and felt relieved, and the rash diminished, but she was very collapsed.

From this time the condition of the patient improved. On the evening of the fifteenth day she complained of severe pains in her limbs. Calcium lactate was now given instead of calcium chloride (10 grains every four hours until 80 grains had been taken). The temperature and pulse became normal on the sixteenth day, the pains in the limbs disappeared, and convalescence since has been uninterrupted.

This case is of considerable interest from the fact that fifteen years ago antidiphtherial serum was administered during an attack of diphtheria without any reaction. It is probable that this injection rendered her, even after the lapse of so long a time, peculiarly susceptible to the effects of an injection of horse serum. Although no doubt a rare case, this is one of considerable moment and interest to the general practitioner in view of the modern and successful treatment of puerperal fever.

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#### CAESAREAN SECTION.

I HAVE read with interest the article entitled, "A plea for more frequent use of Caesarean section," in the *BRITISH MEDICAL JOURNAL* of July 16th (p. 75), and heartily endorse the remarks made by Dr. Arnold Jones. At the same time I think the latter may be interested to hear the experience of others, particularly from the point of view of future pregnancies.

Of a series of seven cases operated on for various causes I have had the opportunity of observing later pregnancies in two. I may mention that living children were obtained in all cases.

CASE I.—Operated on in October, 1913, and again in September, 1920. After the second occasion the patient was sterilized.

CASE II.—May, 1917. Fourth pregnancy. Obstructed labour. Attempts to deliver by forceps both at home and in hospital having failed, Caesarean section was performed. A large child with a big head was born. December, 1919, the same patient was delivered of a normal child without aid.

On all occasions I have used a longitudinal incision through the anterior uterine wall at about its middle, and closed the wound with deep and superficial catgut sutures, the deep sutures including the uterine muscle, but, of course, passing beneath the decidua, erring on the side of too many rather than too few sutures.

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## Reviews.

### HEART AND KIDNEY.

THE subject of the interesting little book by JOSUÉ and PARTURIER<sup>1</sup> is one of daily importance in general practice; in it close observation at the bedside is combined with careful laboratory analysis. Readers will recognize but too well their experience of cases half renal half cardiac, cases in which the patients suffer from horrible dyspnoea, from dropsies, from hepatic and pulmonary congestion and scantiness of urine, and of the difficulty in many of them to decide how much of the fault is to be attributed to the kidney, how much to the heart. The purpose of this book is to aid us to determine this distribution.

When Ambard's estimation of degrees of non-protein nitrogen in the blood were first published many of us hoped that in this method we should find a constant which would enable us to decide in each case on the proportions of renal and cardiac default. Unfortunately these hopes were soon dashed; the uraemic concentrations proved to be far too variable to serve as a standard for kidney values; the

"constant" was a widely fluctuating inconstancy. The azotaemia was low when we expected it to be high, and high when we had rightly supposed that the renal element of the case was but secondary. The authors tell us that so long as oliguria, relative or positive, persists, so long estimates of azotaemia cannot help us; high as, within limits, the degree may be, it may fall rapidly as soon as free urinary flow is re-established.

The ruling condition is the rate of renal circulation. If the rate falls, then, be the kidneys sound or unsound, retention of urea in the blood will ensue; but if, by therapeutic means, the heart be invigorated a large liberating flow of urine should follow, and thereupon the nitrogen load in the blood would be lightened. If the kidneys be sound it will fall to normal, unless the hepatic function of uric formation be also in default. In this last case of course the azotaemia of the blood may fall below normal, and the patient's life be in the greater peril. But this is another story. The authors' point is the physiological "solidarity" of kidneys and heart, and the infinite gradations between the cardiac and the renal extremes. It is not until an equilibrium be obtained between these organs that we can be in a position to decide their several responsibilities. This anxious question of the degree of renal fault, or of cardiac fault, in these cases comes home to all of us.

Happily, a little patience, and the aid of that wonderful drug digitalis, give a way out, or at worst a means of discrimination. While the authors do not forget to warn us not to begin the use of the drug until by some unloading of the liver and intestinal tract, and perhaps by a venesection, the system is prepared for it, yet then let it be used boldly, and not laid aside until the end is gained. On two points the present writer is in agreement with them—namely, in a preference for digitalin before the leaf or the tincture, and in the need, in some cases, of a continuous use of the drug over long periods of time, subject, of course, to incidental vigilance and intermittence as occasion may require. They urge also that we are not to be content with a "normal" urinary response; the diuresis must be in proportion to the arrears, continuously copious and liberating. In case of kidney default coming into view the authors advise the addition of theobromine as a stimulant to the renal epithelium and blood vessels. They urge, rightly enough, that the collection and measurements of the urine should be made by the physician himself, but few of us are in a position to follow this counsel of perfection.

The authors do not forget the alternatives of renal tests, and discuss some of these; but rightly, in our opinion, they relegate them to a secondary place in diagnosis. In any case their use will be to the best advantage after some equilibrium has first been obtained by the cardio-tonic methods. They remark incidentally how little, if at all, in these fluctuations the urea disturbs the osmotic tension of the cells.

In respect of blood pressures the authors make some valuable observations. They do not express an opinion as to the condition named "hyperpiesia"—high pressures without renal disease; but they properly insist on the importance of records of diastolic pressures and of the relation between systolic and diastolic. It is during periods of high pressures, generally with cardiac hypertrophy, that lapses of myocardial efficiency may gradually steal in unnoticed; and it is in such phases that the digitalis acts so efficiently in restoring diuresis, and that appreciation of kidney values may best be undertaken. In "granular kidney," likewise, a slight lassitude of the heart may first reveal the renal default. An azotaemia of more than 1.50 is suggestive of renal disease. The authors administer also sugar—they use lactose—in cases of failing myocardium. They have never found the confident use of digitalis of any harm in the renal cases, but, on the contrary, of service in promoting elimination.

The behaviour of salt in the dropsical cases is fully discussed; the authors are of opinion that there is a rivalry for the kidney path outwards between the uric and the saline constituent. But, in conclusion, the authors very rightly urge that in all cases the treatment shall be carefully adapted to the needs of the individual patient.

In some allusion to angina pectoris, as a feature of some of these cases, it is of interest to note that they accept the doctrine of the aortic causation of this malady. They say (p. 134): "Certains auteurs attribuent à l'insuffisance du

<sup>1</sup> *Les Cardio-rénaux. Etude Théorique et Pratique.* Par le Docteur O. Josué et le Docteur M. Parturier. Paris: E. le François. 1921. (Post 8vo, pp. 223. 12 francs; post free 13 francs 20.)

cœur gauche les crises d'angine de poitrine. . . . Nous pouvons dire que telle n'est pas la cause de l'angine de poitrine. Celle-ci est en réalité la douleur de l'aorte ascendante, malade et momentanément distendue, par suite d'une augmentation passagère de la pression artérielle." ["Many authors attribute attacks of angina pectoris to insufficiency of the left heart. . . . We are in a position to say that this is not the cause of the angina; it is in reality pain in the ascending aorta, diseased and momentarily distended owing to a temporary rise in arterial pressure."]

This little book may be confidently recommended to every practitioner of medicine; it is highly practical, while also fortifying practice with laboratory verifications. It is written in the lucid and logical manner of our French colleagues, and if rather full of reiterations, well, as teachers they are aware of the importance of repetition in driving their teachings home. C. A.

#### IN-BREEDING AND OUT-BREEDING.

THAT the effects of in-breeding are of necessity bad, particularly when the in-breeding takes place among human beings, is an idea that has been long and persistently held. Marriage between first cousins is very generally condemned. The idea is largely based on prejudice arising probably from the fallacy of arguing from the particular to the general. The progeny of some cousin-marriages are sometimes defective, and such cases are cited as "terrible examples," but other cases, equally if not more numerous, in which the progeny are normal, pass unnoticed.

The whole problem of cross-breeding is ably discussed by Drs. E. M. EAST and D. F. JONES in one of the monographs on experimental biology appropriately entitled *In-breeding and Out-breeding*.<sup>2</sup>

After giving a summary of the probable evolution of the asexual and sexual methods of reproduction in plants and animals, followed by the usual statement of the elements of the principles of Mendelism, the authors proceed to give an account of numerous in-breeding experiments, both in plants and animals, describing the effects on sterility and on the production of heterosis or hybrid vigour. These chapters will be of interest to the agriculturalist and to the stock-breeder. To medical men and sociologists the introduction and the two concluding chapters will make a particular appeal; it is here that the effects on the individual of in-breeding and out-breeding in man and the results of the intermingling of races are discussed. The reader must not be disappointed if he finds no hard and fast statements laid down. In the present very imperfect state of knowledge such statements cannot be made. The problems are too intricate, the evidence too uncertain, and the inability to control experiments makes the difficulties almost insuperable. But the real interest lies in the authors' statement of the problems themselves and the avenues of thought and suggestion which are opened out in the practical treatment of all social questions dealing with race betterment.

As a result of the experimental evidence in the breeding of horses and cattle, the authors conclude that "crossing followed by in-breeding has been the touchstone of success," "cross-breeding to furnish a variety of character combinations from which to select . . . in-breeding to provide the opportunity to isolate the combinations desired." Such statements, valuable as they may be to the agriculturalist and stock-breeder, cannot be applied to the human race since matings cannot be controlled. Nevertheless, the examination of such evidence as exists points in the same direction as the wider and more accurate information derived from horses and cattle.

Heredity and environment are the two potent factors in human evolution. Social reformers are too apt to rely on the latter to the exclusion of the former; they follow the line of least resistance. According to Galton, ancient Attica provided the ablest race in history, and here there must have been much in-breeding. On the other hand, it is difficult at the present time to realize how different was the environment, for we are told that "the great poet was valued more highly than the wealthy merchant."

<sup>2</sup>*In-breeding and Out-breeding: Their Genetic and Sociological Significance.* By Edward M. East, Ph.D., and Donald F. Jones, Sc.D. Philadelphia and London: J. B. Lippincott and Co. 1920. (Post 8vo, pp. 285; 46 figures. 10s. 6d. net.)

Heredity and environment undoubtedly played their parts in the production of so high a percentage of illustrious men. The authors of the volume under consideration fully recognize the importance of both factors, while drawing particular attention to that of heredity. It is just this which is so eminently necessary and which they do so successfully.

The text for the book may be summed up in their own words: "All we would ask is that the physician, the clergyman, the social worker, the penologist, the statesman, give conscientious consideration to the facts of heredity as a guiding principle in the solution of the problems of the family with which they have to do." The book should appeal to a wide circle outside the limited ranks of the professional biologist for whom it is primarily intended.

#### WORK IN MENTAL HOSPITALS.

DR. JOHN MACARTHUR, Senior Assistant Medical Officer, London County Mental Hospital, Colney Hatch, has written a *Mental Hospital Manual*<sup>3</sup> to meet the needs of the medical man who is taking up work for the first time in a mental hospital. There is room for a book of the kind, for the work in a large hospital for the insane necessarily differs in many respects from that in a general hospital, and the assistant medical officer finds himself in an atmosphere to which he is quite unaccustomed, and in which he feels the need of definite guidance. The wide experience of the author of this volume has well fitted him to understand the difficulties of his junior colleagues, and the administrative details therein contained and the practical advice given will be found distinctly serviceable to those for whom it is intended. No attempt is made to give a systematic account of mental disorder. The book is essentially practical and contains a number of useful facts not included in the ordinary textbook of insanity.

An account of the design and structure of a mental hospital is followed by a detailed summary of the duties of the assistant medical officer in relation to the staff and patients. Several chapters are devoted to treatment, both general and medicinal, with particular reference to the routine management of excited, irresponsible and suicidal cases. Dr. Macarthur rightly insists that the medical officer should acquire an intimate individual knowledge of the patients under his charge; there is perhaps no branch of medicine in which the personal influence of the physician is so important. Due emphasis is laid upon the benefit derived from dental treatment in mental hospitals—often sadly neglected—and it is most satisfactory to read in a footnote (p. 100) that the London County Council has recently appointed dentists to all their mental hospitals. A full account is given of the duties of the medical officer in regard to the admission of patients, the various methods of certification are described, copies of the certificates are printed, and the statutory regulations in connexion with lunacy administration are summarized. Certain omissions are perhaps inevitable in a book of this kind, and we miss especially any reference to the parole system which has been utilized with much success in many mental hospitals.

This book may safely be recommended to the assistant medical officers of mental hospitals; a knowledge of its contents will do much to help them in the routine of their daily work.

#### MEDICAL JURISPRUDENCE.

In reviewing earlier editions of Dr. AITCHISON ROBERTSON'S *Manual of Medical Jurisprudence and Toxicology*<sup>4</sup> we described it as an excellent short textbook for students. Perusal of the fourth edition induces us, while still recognizing its merits, to suggest that it now stands in need of revision, at any rate for the use of English students. It is not correct to say that in a case of murder or manslaughter the magistrate depends upon the medical evidence already sworn before the coroner. The statement that the dissipated habits of the lower classes play a large part in the death of infants from overlying has, we believe, been

<sup>3</sup>*Mental Hospital Manual.* By John Macarthur, L.R.C.S., L.R.C.P. London: Henry Frowde, and Hodder and Stoughton. 1921. (Pp. vi+215; charts and diagrams. 15s. net.)

<sup>4</sup>*Manual of Medical Jurisprudence and Toxicology.* By W. G. Aitchison Robertson, M.D., D.Sc., F.R.C.P.E., F.R.S.E. Fourth edition. London: A. and C. Black, Limited. 1921. (Cr. 8vo, pp. 424; 26 figures. 12s. 6d. net.)

disproved. It is not correct to say that the majority of suicides from poisoning in Great Britain are due to carbolic acid, nor that arsenic is a common poison used by suicides, for it is responsible for only about three such deaths a year. The statement that the Mental Treatment Act, 1915, allows the detention for not longer than six months of cases of temporary insanity without certification and permits the detention of cases of mental disorder traceable to wounds, shock, etc., due to warfare, needs revision. There is in fact no such Act. While it may readily be admitted that the coroners' procedure is susceptible of improvement, still if it is "notorious" that "great discredit" is thrown upon the system by ridiculous findings, the author should have supported his indictment by instances more recent than those quoted.

The section on insanity has become out of date. No mention is made of Kraepelin's work on manic-depressive insanity, and acute confusional insanity is omitted. "Moral" insanity, "impulsive" insanity, and the "insanity of pregnancy" are described as though still recognized as definite forms of psychoses. The description of paranoia is inadequate. Under the heading of dementia the author describes dementia praecox (in four lines) and also "acute dementia or stupor" in young persons and adults, which he ascribes chiefly to sexual over-indulgence or masturbation, and may, he states, produce a condition similar to idiocy or imbecility. It is not clear what difference the author draws between dementia praecox and acute dementia in young persons, while stupor is, we believe, usually regarded as a form of melancholia.

We hope that in a future edition the author will deal with the points we have mentioned, for he writes clearly and concisely, and there is room for a book which gives a more complete account of Scottish procedure than is contained in most works on the subject.

#### CHINA AND MODERN MEDICINE.

In *China and Modern Medicine*,<sup>5</sup> by the Dean of the School of Medicine of Shantung, is to be found an attractively written summary of the development in China of medical mission work and of Western medicine. Reason is shown for believing that the pioneer of both was Thomas Richardson Colledge, but whether at the time he began his work he was merely an able, well trained pupil of Sir Astley Cooper, or a formally qualified medical man, can be determined neither from this volume nor yet from the account of Colledge's life in the *Dictionary of National Biography*. What alone seems certain is that the initial stimulus was the sight of so much unrelieved suffering when he first landed in China as a ship's doctor; that in 1827, when he must have been aged about 30, he succeeded in opening at Macao a hospital for eye cases; and that some ten years later he joined hands with Peter Parker, a Yale graduate and newcomer, in founding "The Medical Missionary Society in China." These two and those who followed them were indubitably very successful, as have been so many medical men elsewhere, in putting the outcome of Christianity and Western civilization in an attractive light. These workers recognized, too, from the beginning that their aim must be not alone to treat the Chinese, but also to teach the Chinese how to treat themselves. The extent to which this second aim has been attained is well brought out in the later half of the volume. The general impression left is that eventually the Chinese will adopt the principles of modern medicine as heartily as their neighbours the Japanese and apply them not less skilfully. It will be a great result considering that many even of the present pioneers of scientific medicine in the Far East—the medical mission hospitals—must be severely handicapped in their labours by inadequate equipment. This, however, does not prevent them from offering a fine field for medical men who really love their profession and are thoroughly trained therein.

Also of interest are the sections dealing with nursing questions. The importance of establishing nursing as a reputable and definitely trained profession has not been overlooked. The present outlook in this connexion seems to be promising, and one may readily concede that to help to shape the traditions of the Chinese nurse of the future, and thus to inspire the whole profession with noble ideals,

<sup>5</sup> *China and Modern Medicine*. By Harold Balme, F.R.C.S., D.P.H. With preface by Sir Donald MacAlister, K.C.B. London: The United Council for Missionary Education. 1921. (Post 8vo, pp. 224. 5s. 3d. post free.)

is a task worthy of the very best nurse that the Home-lands can produce.

Interspersed in the text are a number of wise observations on the best way of dealing with Chinese patients, and some stories, one of which makes it clear that, however ignorant of medicine he may be, a purely native physician may yet have nothing to learn in respect of the art of gaining the confidence of a patient's friends. By no means the least useful part of the volume is a series of six appendices, of which one supplies a well arranged bibliography of publications concerning medical and surgical work in China, and another specifies the qualities which should be possessed by any medical man or woman who proposes to take up work in that vast country. On the inside of the cover at each end is an outline map which facilitates comprehension of the written contents of the volume by those indifferently acquainted with the geography of China. The same map also shows the present distribution of all existing medical schools, whether Chinese, Japanese, or Anglo-American.

The book, in short, is well devised and thoroughly worth perusal. Probably its initial purpose was to inspire an active interest and to attract recruits: if that be the case, it deserves, and is likely, to be successful.

#### HISTOLOGY.

PROFESSOR JORDAN'S *Textbook of Histology*<sup>6</sup> shows no little individuality when compared with the other textbooks on this subject in the English language. For not only are the facts of microscopic anatomy set out in a very lucid manner, but their relation to function and theoretical significance are interestingly discussed. And what is more, controversial points, instead of being slurred over as is usually the case in such books, are candidly admitted. The result is that the subject matter is of value not only to the student but to the research worker also. The chapter on the different types of connective tissue and ossification—subjects usually presenting special difficulty to beginners in histology—is a model of clarity. Excellent, also, are the sections on the alimentary canal and the blood vascular system. The book has individuality in another respect. Those who write manuals on histology are usually content to describe tissues without pointing out the differences between them. From the student's standpoint this is no small defect, for his main difficulty consists not so much in recognizing tissues under the microscope, but in distinguishing between those that are superficially similar. Now Professor Jordan has succeeded in writing what is truly a medium-sized textbook of differential histology. Thus he points out how the different types of muscles should be distinguished from one another, also how not to confuse smooth muscle and dense fibrous tissues. All this is reinforced by excellent differential tables. But legitimate criticism can be made regarding some of the microphotographs. The author in his preface to the second edition says that he has "substituted drawings for some of the less satisfactory photographs of the first edition." One can only regret that he did not carry the process further. For while many of the microphotographs are excellent, it is no exaggeration to say that a professional histologist would have difficulty in the exact identification of some of them—were it not for the explanations! There is a very useful section at the end of the volume dealing with technique. Directions for practical work are also provided. We hope that when a third edition is called for Professor Jordan will provide good wash drawings in place of many of the high power photographs; the illustrations will then be up to the level of the text in excellence.

Professor PIERSOL'S *Normal Histology*<sup>7</sup> (twelfth edition) is a standard volume in the United States and is already well known in this country. It is primarily a handbook of microscopic anatomy, and as such furnishes facts rather than ideas. The author rightly contends that readers

<sup>6</sup> *A Textbook of Histology*. By Harvey Ernest Jordan, A.M., Ph.D., Professor of Histology and Embryology, University of Virginia. New York and London: D. Appleton and Co. (Double cap. 8vo, pp. 895; 594 figures, 4 plates. 25s. net.)

<sup>7</sup> *Normal Histology*. With Special Reference to the Structure of the Human Body. By George A. Piersol, M.D., Sc.D., Professor of Anatomy in the University of Pennsylvania. Twelfth edition. Philadelphia and London: J. B. Lippincott Company. (Roy. 8vo, pp. 426; 438 figures. 21s. net.)

(student and other) of histological manuals are often lacking in adequate anatomical knowledge. The result is that they are unable properly to correlate what they see under the microscope with what they have dissected in the body. Therefore Professor Piersol has freely interspersed descriptions and figures of a purely anatomical nature in the text. The exposition is concise and the illustrations excellent. The chapter on the brain and spinal cord is particularly good, and its value is enhanced by the introductory section on the gross anatomy of the brain. But there are certain curious omissions—possibly intentional. Thus only the histology of the normal nerve fibre is described, no reference being made to the changes following its section. Again, the chapter on blood formation is somewhat sketchy when compared to the other chapters in the book; a subject of such importance surely merits an account fuller than can be given in less than two pages. It is a pity that short references to points of physiological importance are not made when occasion arises. The book is of medium size, and one consequently expects to find as much information as is provided in manuals of even smaller calibre. There is an appendix in which limited examples of histological methods are set out in a serviceable manner.

### CHILD WELFARE WORK IN VIENNA.

ADVANTAGE was taken of the meeting in Vienna of the Women's International League Congress to hold an informal conference, under the auspices of the Friends' Relief Mission in that city, on "International aspects of child welfare work." The conference took place on July 18th, and at the first session there was a discussion on child welfare work as a factor in the promotion of international friendship and co-operation, while the second session was devoted to the excellent work for children which is being done by the Austrians themselves.

At the second session, presided over by Dr. HILDA CLARK, the head of the mission in Vienna, one of the speakers was Professor VON PIQUET, who said that the years of under-nourishment had given a new lease to tuberculosis, always rife in the Austrian capital. Ninety per cent. of the children examined at the welfare centres reacted to his cutaneous test, which meant that they were in a condition to become tuberculous if their powers of resistance were sufficiently lowered. It was true that the death rate from tuberculosis among the young had fallen since the conclusion of the war, but it was still greatly above the pre-war normal. Austria, especially the new Austria, lacked sanatoriums; but the situation had been met to some extent by the use of hospital roofs, where, under overhead shelter, many tuberculous patients spent the whole of their time in the open air, winter and summer, with quite amazingly good results.

Miss DALYELL, a member of the mission sent to Vienna in 1919 by the Accessory Food Factors Committee, which was appointed jointly by the Lister Institute and the Medical Research Committee, said that the object of the mission was, in the first place, to find out what results had followed from the extreme scarcity of fats in the diet of the infants of Eastern Europe in the years 1917 to 1919, and to undertake as far as possible remedial measures. It had been of the greatest use to the investigators to have access to the system of exact food measurements worked out in Professor von Pirquet's clinic. The study on a large scale was only started last year, and it would be continued until the results were definite, for it had to be remembered that the deficiency diseases took a long time to develop. The two diseases which had taken the greatest toll of the infant population of Vienna were scurvy and rachitis. The prevalence of these diseases was due to the lack of milk or the unsatisfactory conditions of its supply more than to any other factor. Simple measures, such as using the raw juice of cheap vegetables throughout the winter, had been employed to prevent scurvy, and work had also been carried out on milk substitutes and on seasonal variations in the value of milk itself; but whether these measures had been instrumental in bringing about the marked decrease in rachitis which had taken place within the last year still remained to be proved. It was hoped that from this investigation in Vienna there would be such an increase in the knowledge of infant feeding that the problem of securing the normal growth during the first year of life would be brought appreciably nearer solution.

The experience and statistics collected in Vienna would be of use in every country in dealing with infant nutrition.

Dr. POERNER, principal physician in charge of welfare work for infants and young children in Vienna, said that the death rate for infants was still fifty times, and the death rate for young children five times, that for older children. Study of the death rates during the last decade would help to determine the lines that welfare work should follow.

	1910.	1920.
Infant mortality (per 1,000) ...	215.8	168.6
Mortality of young children ...	21.8	24.4
Mortality of school children ...	3.1	4.05
Mortality of adolescents ...	4.3	6.5
Mortality (all ages) ...	11.5	18.5

The chief causes of death of infants and young children in Vienna during the last decade were given as follows:

	Infants.		Young children	
	1910.	1920.	1910.	1920.
Digestive diseases ...	28.1	23.2	3.7	5.0
Diseases of respiratory organs	26.3	23.2	28.5	23.9
General weakness ...	20.4	25.3	—	—
Epidemic diseases ...	6.5	9.8	28.5	31.0
Tuberculosis (all kinds) ...	4.0	3.7	25.0	28.3
Nervous diseases ...	5.4	4.1	5.5	4.4
Syphilis ...	1.2	1.7	0.1	0.07
Rickets ...	0.4	0.3	1.3	1.0

Dr. Poerner explained the decrease of digestive diseases as mainly due to the fact that in view of the fatal scarcity of fresh milk a far greater proportion of mothers nursed their babies now than in pre-war times, despite their own state of under-nourishment. The decrease of mortality from nervous diseases was attributed to the reduced consumption of alcohol on the part of the parents. General weakness now ranked first among the causes of infant mortality, suggesting an embryonic debility, the result of the war. Infant welfare work (the speaker continued) started in an organized form in Vienna in 1905. Ten years later, under the pressure of war conditions, a large organization was called into existence to help the families of mobilized soldiers, and this so-called *Kriegspatenschaft* established fourteen welfare centres, all of them attached to children's hospitals. In the year of the revolution (1918) the various organizations were safeguarded by uniting all their activities in a common and neutral agency, the Central Board for Children's Health Welfare Work. During the last year, under the auspices of this body, 85,000 young children had been examined in 70 welfare centres and the more under-nourished of them supplied with food rations out of British and American generosity. Fifty-eight of these welfare centres were still continuing their activities, the staff of each centre consisting of a doctor, two lay workers, and an attendant. With the help of the American Red Cross more welfare workers were to be employed in home visitation, and sixty welfare centres were projected for the provinces.

Dr. HORNECK, a chief magistrate, then gave an interesting account of the municipal Jugendamt, or department of child welfare, established in 1916, with branches in every district of the city. The central Jugendamt is a body of lawyers, doctors, teachers, and welfare workers, which is duly recognized as one of the municipal authorities and is given charge of all Government affairs relating to children; the branches, *Bezirksjugendämter*, carry out the administration locally, keeping in touch with the infant welfare centres, which are under medical control, and with the fifty-five municipal kindergartens.

At the other session of the conference child welfare was discussed as an asset in the movement towards peace and internationalism. Dr. HILDA CLARK spoke of the extraordinary response that the appeal for help for children had called forth, alike from countries recently belligerent