

prise, and wisdom that we are prepared to witness the unedifying spectacle of the various organizations to which we belong drifting farther and farther apart without raising our voices in protest? Are we to continue on this slippery path to perdition? Will we gain by it, will the public, or will they be the losers as well as ourselves?

I venture to suggest, Sir, that the formation of a British Medical Corporation would be received by Parliament and public alike as an earnest of our intention to put our own house in order. If the suggestion I put forward could be accomplished, we would be in an unassailable position, as a united, authoritative body, to discuss the future medical welfare of the country with the Government. There are difficulties inherent in this suggestion, but are they insoluble? I am not concerned in this letter with actual plans for the future of medicine; I plead for union in the profession under one organization as an absolute necessity.—I am, etc.,

London, S.W.1, Nov. 13.

R. PROSPER LISTON, M.B., Ch.B.

SIR,—There is considerable disquiet among the profession at statements in the Press and in Parliament as to various schemes for altering the terms of both hospital and domiciliary practice without reference to those most intimately concerned with such changes—namely, the medical profession and the public. At a moment when, in the words of the chairman of the B.M.A. Medical Planning Commission, they are “simply exploring the whole field of medical practice” before even attempting to put forward concrete suggestions to the whole profession (which must surely precede consideration by the Government), it would seem necessary to insist that all such unofficial schemes, including those made, for example, by the Nuffield Trust, are not only provisional but indeed premature. It would indeed be fatal if the impression should gain ground that any such suggestions are the considered opinion either of the profession or of the public when neither have been consulted in the matter. That this impression is growing is shown by reports of discussions in Parliament and in the lay press.

One hears from some provincial towns that representatives of the workers have stated that if any attempt is made to regiment them into any State or local government scheme of which they do not approve they will endeavour with the collaboration of the profession to run a voluntary hospital and domiciliary scheme on their own: an interesting commentary on the query of Sir Frederick Menzies as to the essential differences between State and voluntary hospitals as judged by the public.

Another fact which is in danger of being forgotten is that a large number of the younger members of the profession are on Service, and neither the Government nor we who are at home have any right to legislate for them until after the war when they will have returned and can express their views. One hears again that few of them are anxious to see any violent upheaval in the terms of practice, be it hospital or private.

At any rate one would feel reassured to learn that those of our profession in touch with Government circles are making it clear that, while we are interested in any suggestions for post-war medical planning, all schemes adopted and alterations made at the moment must be considered as being purely war measures, which may or may not, as judged by the profession as a whole, remain as part of our peacetime organization.—I am, etc.,

London, N.6, Nov. 13.

W. LEES TEMPLETON.

Medical Education

SIR,—I should like to comment, from the point of view of a schoolmaster who trains about twenty medical students a year, on recent articles on medical education. I fully agree with the view that a physician should have a wide general culture and with the opinion that he is too often without it, but I do not think that “paper changes,” such as postponing the study of pre-medical subjects to the age of 17, or taking the First M.B. only from the medical schools, would really attack the problem. The difficulty which the schools have in educating the future medical student is that the universities will mostly accept men to read medicine whom they would reject from most of their honours schools. We cannot refuse to teach these boys, and the result is that the biological sixth, while it usually contains some very good pupils, also has many who are far

below the normal sixth-form level, both intellectually and culturally. Few schools are large enough to separate the two classes, and the teaching of the good boys is dragged down to the level of the others. In this school a partial separation is possible, and most of the better pupils stay for a third year in the sixth; to them we give a good general education; for the others we do the best we can.

I would suggest three remedies, all linked together, of which the universities could put two into practice almost at once. First, a raising of the standard of entrance to the medical schools to approximately that demanded of the honours student. Second, the provision of more scholarships to make up for the loss in numbers caused by the first. Third, the rapid recognition of the schools as the proper place for the pre-medical subjects and the acceptance of a pass in appropriate subjects in the Higher School Certificate in place of the First M.B. The special examination for the latter might in time cease.—I am, etc.,

Manchester Grammar School, Nov. 10.

BRUNSDON YAPP.

Science and World Order

SIR,—I do not think that Mr. O. J. R. Howarth (November 8, p. 671) is justified in saying that the conference of the British Association was the first attempt at international understanding among scientists made in this country. Since the beginning of the war many British scientific bodies, including the Royal Society of Medicine, have turned their activities in this direction, and although less advertised these have been no less successful. I do not deny in my letter that certain foreign representatives had been given a prominent part in the conference, but these were the distinguished Ambassadors of the United States, Russia, and China. This may give a political but hardly a scientific stamp to the conference. Further, the fact that smaller nations were not treated so bountifully has aroused a certain amount of ill feeling which goes against international understanding, for at scientific conferences representatives should not be treated according to the surface area of their countries. I apologize, however, for having said that out of sixty speakers only one dealt with the principal international problem of to-day—European starvation and threat of epidemics—and I accept Mr. Howarth's assertion that “no less” than four speakers referred to the subject. Even so, the proportion is tragically inadequate.

The object of my letter was not criticism of the British Association conference but a constructive proposal for a really international and strictly scientific conference for examination of actual scientific problems. For convocation of this conference the principal British scientific bodies should come to an understanding, for despite its greatness the British Association is not the exclusive representative of British science. Next, contact with the foreign scientific organizations should be made and the plan of the conference should be arranged by British and foreign representatives jointly. An international conference is not built up by a restricted group of scientists belonging to one nation who direct the activities of all the others as they see fit. This is a method of “new order” which is doomed to failure.—I am, etc.,

London, W.1, Nov. 10.

A. P. CAWADIAS.

“Perfect Sight without Glasses”

SIR,—I have noted your annotation “Perfect Sight without Glasses” (September 13, p. 383) and the letter from Dr. J. Parness (p. 389). The work of the late W. H. Bates, M.D., is carried on by his widow, Emily A. Bates, who classifies herself as a “teacher of eye education, Bates method.” Just over seven years ago a friend of mine became so interested in this method that he arranged for Mrs. Bates to visit this city and hold classes. He and scores of his friends, after two weeks' educational course, decided to give up their glasses. I discussed this method with those who were taking the course. They were very enthusiastic, and were quite convinced that they could get along without their glasses. They were able to do so for varying periods, but, in general, only until the enthusiasm subsided. Within a matter of a few months they were all wearing their glasses again, and have continued to do so.—I am, etc.,

S. J. STREIGHT, M.D.,

Toronto, Oct. 9.

Medical Director, Canada Life Assurance Company.