

agriculture, of synthetic detergents, and of other chemicals which might get into human food. One of the responsibilities of this laboratory might be the preparation of a type of pharmacopoeia in which all non-nutritive chemical substances that were permitted to be added to food should be listed, with methods of analysis and references to the published literature.

It would be on the basis of the considered findings of this laboratory, which might be financed through one of the research councils or the Ministry of Food, that additions to an official list of chemicals whose presence in food was (within defined limits) permitted might be made. The laboratory, apart from its routine work, would also engage in research on new methods of testing and in related physiological and pharmacological science.

THE KING'S HEALTH

STEADY IMPROVEMENT REPORTED

Below we print the bulletins on the King's health issued since Tuesday, October 2, at 11.30 a.m. All these bulletins have appeared over the signatures of the same five doctors—namely, Sir Daniel Davies, Sir Horace Evans, Dr. Geoffrey Marshall, Mr. C. Price Thomas, and Sir John Weir.

Wednesday, October 3, at 11.30 a.m.:

After another good night the King's condition shows further improvement.

Thursday, October 4, at 10.30 a.m.:

The King continues to make steady progress.

Friday, October 5, at 10.30 a.m.:

The King's improvement continues.

Saturday, October 6, at 11 a.m.:

The King gains strength daily. The post-operative period has passed without complication. In view of the seriousness of the operation, progress towards the convalescent stage must necessarily be slow and gradual.

Sunday, October 7, at 10.30 a.m.:

The King has had another good night. His Majesty continues to make satisfactory progress.

A statement issued on Monday, October 8, read:

Since his Majesty's progress has been maintained steadily and satisfactorily it is not expected that there will be another medical bulletin.

WESTMINSTER MEDICAL SCHOOL

The inaugural address for the new session at Westminster Medical School was given by the VICE-CHANCELLOR of the UNIVERSITY OF OXFORD (Very Rev. John Lowe, D.D.) on October 1. Dr. Lowe discussed the perennial problem of body and mind.

In so far as medicine belonged to the biological sciences, said Dr. Lowe, the medical student would find plenty of reputable company among materialists—those who plumped for the body and relegated the mind to the periphery, if not completely into limbo. All the same he wanted to suggest that they might well be a little hesitant before committing themselves in this direction. It was obvious that if all so-called thinking was merely the resultant of a chain of physical causation no validity whatever could be attributed to human judgment, and if man's freedom was a complete illusion it was not sensible to call any human action either good or bad. The most ardent theoretical materialist was seldom so consistent in his principles as to refrain from praise or blame for his fellows. He acted in practice as if he believed them free in some measure to choose, in spite of his professed conviction that they could not be free. Materialism in establishing its conclusion in effect destroyed itself.

Materialism and the Doctor

Turning to the day-to-day practice of the medical profession, what doctor did not constantly assume and act on the assumption that mental states and thoughts might and often did have physical complements? What physician did not regularly invoke the will power of his patient to work towards a cure? It was extraordinarily difficult to justify such procedures on a purely mechanistic hypothesis. The regular and approved practice of the medical profession in fact ruled out any theory which attempted to explain mind solely and completely in terms of bodily process. Scientific materialism was at variance with common sense and common practice, was in violent conflict with ethics and aesthetics, was insecurely based in physics, and was quite indefensible in logic.

He remarked upon the curious fact that while probably the great bulk of biologists and psychologists to-day adopted or tended towards the materialistic view, this was not nearly so true in the physical sciences. It was an extraordinary paradox that psychology should do its best to demonstrate that mind did not exist, while physics, the basic science of matter, was very far from accepting the standard of mechanical causation upon which materialists relied, and was in fact moving towards a position which was more closely akin to the idealism of Kant than any other type of philosophy.

In conclusion Dr. Lowe said that it looked as if they could not completely explain either the body or the mind in terms of the other. They must somehow hang on to the reality of both, and at least leave the way open for a philosophy of life which comprehended both. "I am convinced that you will not find anything in the work which you are starting to-day which precludes you from at least considering seriously the claims of such a view."

A vote of thanks to the Vice-Chancellor was moved by Professor R. J. V. Pulvertaft and seconded by Mr. D. Levi.

CHARING CROSS HOSPITAL

On October 5 the inaugural meeting of the Charing Cross Hospital Medical School for the new session was held for the first time at the Royal College of Physicians. Sir John Stewart Wallace was in the chair, and the prizes were bestowed by Lady Inman.

LORD INMAN, in an address to the students, recalled the fact that it was just 30 years since he first entered the service of Charing Cross Hospital; it had been a happy and satisfying experience. He explained that he had intended to speak on changes which he would like to see in the National Health Service, but, owing to the impending general election, he refrained from taking that theme. He thought it a great pity that so vital a question as the health of the people should be the subject of party controversy. He desired to see it raised to a plane far above the party arena.

History of the Hospital

Instead of a subject which might be considered political he addressed himself to the history of Charing Cross Hospital. When the hospital was founded Charing Cross had a dense and poverty-stricken population. In Wild Court, near what was now Kingsway, 1,000 people had lived in 13 houses. It was to help such people that Dr. Benjamin Golding, with a friend, John Robertson, who became the first secretary of Charing Cross Hospital, had started the West London Infirmary. In order to provide also in-patient treatment, he took a house in Villiers Street, where 12 patients could be accommodated, and then set out to raise £20,000 to build a hospital. He encountered opposition. The *Morning Herald* suggested a lunatic asylum for those who wanted to build a hospital on land set aside for improvements. After long negotiations with the Department of Woods and Forests a site was granted, and the foundation stone was laid by the Duke of Sussex in 1831. By the terms

of the charter of the new hospital no salary was to be paid to any medical officer until the funds of the institution were sufficient to warrant it. The charter also provided for domiciliary attendance for those too ill to come to hospital, and for money gifts—not to be more than five shillings at a time or a guinea in all—for the purchase of extras to assist recovery. Every medical officer had to sign a declaration promising to conduct himself with openness and goodwill towards his professional colleagues and all other officers.

At the time Dr. Golding died, in 1863, 370,000 patients had been treated, and the hospital was free from debt and had accumulated and invested over £30,000—truly a remarkable achievement.

The Dean of the School, Dr. E. C. WARNER, stated in his report that in October, 1952, preclinical students would be taught at the Royal Veterinary College under teachers from the Medical School. During the session 1950–1 there had been 135 students in the clinical years at the school.

Plans for the new Charing Cross Hospital and Medical School at Northwick Park were on view at the meeting.

Nova et Vetera

JENNER

The modern method of recording the events of the life of a scientific man in terms of his actual achievements—normally expressed in printed books or articles—is an immense advance on the old method of providing a mere list of his works, bibliographically set forth. Bibliography is an indispensable medium for every sort of scientific work, but for the high lights of science, its greater creative figures, it is now effectively replaced by bio-bibliography. Mr. LeFanu gives us here a model for the technique of this relatively new approach.¹ With Mr. LeFanu's book Jenner descends from the clouds of hero-worship and becomes a credible and intelligible human being, who walked the earth and had his recreations and even his weaknesses, much as we all do and have. For truly the great figures of science were neither saints nor gods, but just men with a touch here and there of something that other men have not. The light of genius is, at best, but fitful.

The method of bio-bibliography, when it has been adequately applied to a large enough number of these great men, may have something to tell us about the nature and nurture of the scientific spirit. If and when these conditions are recognized, we may learn how to select and cherish the happy carriers of the illuminant of genius. In this sense bio-bibliography may become the most practical of all social studies.

Mr. LeFanu is in a peculiarly favourable position for undertaking his task. As curator of the great library of the Royal College of Surgeons of England, he has charge of a large number of Jenner relics. That library is indeed replete with memories of Jenner, for he was the favoured pupil of John Hunter, and his work was, from the first, inspired by his mighty master. At the same time the task of Mr. LeFanu has been specially difficult in that much of his bio-bibliography has had to do with manuscripts, and these are more refractory of bibliographical treatment than are printed books. Moreover, the manuscripts themselves are scattered through many other collections. Mr. LeFanu has doubtless drawn many covers that were blank and are therefore not recorded by him, but he does tell of the results of his investigations extended to more than 80 libraries. The amount of labour, of correspondence, and of ordering of the finds that such a research entails must have been enormous. Mr. LeFanu and the library that he adorns have to be congratulated on this admirable achievement, which, unlike many efforts of the kind, is in large part highly readable.

CHARLES SINGER.

¹*A Bio-bibliography of Edward Jenner (1749–1823)*. By W. R. LeFanu. (Pp 176; 28 illustrations. £4 4s.) London: Harvey and Blythe. 1951.

Correspondence

R.M.B.F. Christmas Appeal

SIR,—I appeal to members of the medical profession, whether subscribers or not, to send donations to the Christmas Gifts Fund for beneficiaries of the Royal Medical Benevolent Fund.

The committee generally tries to send a present of £5 to each beneficiary. I therefore hope that there will be a generous response to this appeal. Christmas gifts have a very deep and special significance, for they make the beneficiaries realize that they are being remembered by their more fortunate colleagues. In the present difficult times Christmas gifts are more urgently needed than ever before. Contributions should be sent to the secretary of the Royal Medical Benevolent Fund, 1, Balliol House, Manor Fields, Putney, London, S.W.15, and marked "Christmas Gifts."—I am, etc.,

WEBB-JOHNSON,
Putney, S.W.15. President, Royal Medical Benevolent Fund.

College of General Practice

SIR,—There is a College of Physicians, a College of Surgeons, a College of Obstetricians and Gynaecologists, a College of Nursing, a College of Midwives, and a College of Veterinary Surgeons, all of them Royal Colleges; there is a College of Speech Therapists and a College of Physical Education, but there is no college or academic body to represent primarily the interests of the largest group of medical personnel in this country—the 20,000 general practitioners. Many practitioners sadly felt the lack of such a body when negotiations about the National Health Service were taking place.

Preliminary discussions are now being held in the General Practice Review Committee of the British Medical Association about the possible development of such a College of General Practice, to help practitioners in the same ways that the Royal Colleges have helped their own Fellows. Such a proposal must not interfere at all with the present qualifying examinations or with the many other activities of the Royal Colleges. It should be able to help practitioners in a great many ways—by supervising their education and postgraduate work, by improving the standard and status of general practice, and by acting as a repository for its traditions—all at little or no cost to the taxpayer.

We are anxious to collect evidence upon this subject of a possible College of General Practice. If any of your readers have suggestions or comments to make, for or against this proposal, will they please communicate with us?—We are, etc.,

F. M. ROSE,
99, Fylde Road, Preston, Lancs.
J. H. HUNT,
54, Sloane Street, London, S.W.1.

Injuries in Flying Accidents

SIR,—The post-mortem examination on the body of the pilot of the second ill-fated de Havilland 108 plane, which disintegrated in the air on February 15, 1950, showed traumatic rupture of the aorta as described by Dr. Donald Teare in his article on "Post-mortem Examinations on Air-crash Victims" (September 22, p. 707). In this case the aorta, throughout its course and including the common iliacs, was segmented, each segment corresponding to a vertebral body, the vertebral column having completely "sprung." The calculated disintegration force lay between 30 and 40 g. When found the pilot was still strapped to his seat by his safety belt. In the case of the aeroplane which crashed at Sywell Aerodrome, Sywell, Northants, on June 13, 1948, the accident was caused through the pilot, aged 45, having suffered an anginal attack. On post-mortem examination