

relation to mental health. Psychosomatic illness was also discussed by Dr. ERIC WITTKOWER (Montreal) and Dr. CARLOS SEGUIN (Peru) among others. Other subjects were learning and psychotherapy, and operative factors in effective therapy, in the debates on which Dr. AUBREY LEWIS (London) took part as chairman of the panel.

The round-table discussions included "The Importance of the Teacher in Mental Health," "Mental Health Problems and Human Relations in the Classroom," "Is Teaching a Hazardous Profession from the Mental Health Standpoint?" "Parent Education, its Aims and Objectives," and "The Role of the Volunteer Worker in Mental Health." There was also an interesting programme of mental-hygiene films dealing with such subjects as childhood, group psychotherapy, mental illness and treatment, and cultural and social issues.

Associated Meetings and Closing Session

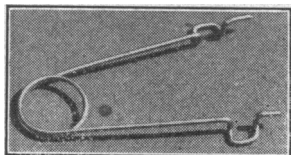
The International Institute on Child Psychiatry held a two-day Congress on August 13 and 14, and the first International Congress on Group Psychotherapy took place on August 12 and 20, both of which were held in association with the main congress. The seventh Annual Meeting of the World Federation for Mental Health was held on August 17, when Dr. FRANK FREMONT-SMITH, Director of the Josiah Macy Jr. Foundation of New York, was inducted as President for 1954-5. Dr. HENRY DICKS was elected as an alternate member of the executive. Professor Dr. F. K. GOKAY, Governor Mayor of Istanbul, Turkey, conveyed an invitation to the World Federation to hold its next annual meeting in Istanbul, probably in the autumn of 1955. This invitation was accepted with acclamation.

At the closing session of the Congress, on August 22, Dr. J. R. REES declared that maintaining mental health was one of the most important contributions to world peace. A mentally healthy nation would be mature and well-balanced enough to be able to understand the problems of other nations without animosity. He felt that the Congress had been of much more scientific value than previous meetings. It had abundantly served the purpose of making valuable personal contacts between peoples of all races, creeds, and disciplines. He believed it would prove a stimulus to all those who had participated in it and would encourage them to return to their homes and spread the gospel of mental health.

Preparations and Appliances

DRIP WOUND RETRACTOR

Dr. A. L. GRIFFITHS, Surgical Registrar, Royal Liverpool Children's Hospital, writes: I am encouraged by Sir Heneage Ogilvie's description of a thyroid retractor (*Journal*, June 5, p. 1319) to describe a rather similar and equally useful retractor which I designed and made several years ago to aid the exposure of the vein when cutting down for transfusions in infants and children. It is made of 15-gauge stainless steel wire by bending to the shape shown with a



fine pair of pliers. Piano wire is more springy but rapidly becomes corroded. The one illustrated is 1½ in. long (3.7 cm.) and intended for neonates, but a slightly larger one is more suitable for larger children with a lot of fat. The need for cheapness is emphasized by the rapidity with which the retractor may be lost—which is inversely proportional to the efficiency of the ward on which it is used. I have also recently seen an ophthalmic instrument on the same principle. *Nihil est dictum, quod non est dictum prius*. I would like to thank Mr. Rodney R. Green for the photograph and Dr. C. H. Jones for the Latin tag.

Nova et Vetera

IN MEMORY OF CAESAR BOECK (1845-1917)

In May, 1954, Dr. Niels Danbolt, professor of dermatology at the University of Oslo, gave an account on the Norwegian wireless of his distinguished predecessor, Caesar Peter Möller Boeck. Everyone has heard of Boeck's sarcoid or sarcoidosis, but few outside the Scandinavian countries know much about the man himself. Professorships were not very rare in the Boeck family. Caesar had two uncles; the one, Christian Boeck, was professor of physiology. The other uncle, Wilhelm Boeck, was the first professor of dermatology at the University of Christiania, his nephew's immediate predecessor. Uncle Wilhelm (often referred to in his nephew's lectures as "the great Wilhelm Boeck") enjoyed an international reputation largely based on a prodigious fallacy. He believed that the soft sore was a mild and harmless form of syphilis, to be employed as a preventive of the serious late complications of syphilis. With the interaction of cowpox and smallpox in mind, he built up an international reputation on his "biological" method of treating syphilis, and in 1865 he was invited to demonstrate it in London, where hospital beds were put at his disposal for this purpose. Uncle Wilhelm's method had been abandoned when his nephew (at the age of 44 years) succeeded him in 1889 as head of the skin department of the Rikshospital in Christiania (the Oslo of to-day).

Caesar Boeck came to dermatology in its "descriptive" phase, and his highly developed sense of form and colour stood him well as he pinned down his impressions on paper. He had inherited from his uncle the fallacy (or what was often held to be a fallacy) that mercury was contraindicated in the early stages of syphilis for fear of impairing the organism's own curative properties. Between 1890 and 1910 close on 2,000 syphilitics were treated at the Rikshospital on this principle, with iron, small doses of quinine, good feeding, and rest displacing mercury. Boeck's successor, Professor Bruusgaard, and others have investigated the subsequent fate of these syphilitics and have shown the extent to which they developed the late sequels of this disease. Boeck combined his hospital work with a large private practice, which cannot have been very remunerative, as his fees were ridiculously small even for those days. His customary fee was two kroner (just over two shillings), but he often reduced it to one-eighth of this sum. However, when patients irritated him by complaining of the inefficacy of his drugs, he took gentle revenge by raising his fee to three kroner. His glowing belief in some of his drugs raised a smile among his students when, in spite of the nakedness of his own billiard-ball scalp, he confidently predicted a cure for patients whose own scalps were threatened by the same complaint. There was no humbug about this. It was just that he let his benevolent optimism run away with him.

It was in 1897 that Boeck first demonstrated a case of the disease which now bears his name. The demonstration took place at a meeting of the Medical Society of Christiania, and the patient was a 34-year-old policeman. Boeck pointed out that the clinical appearance and microscopic structure of the numerous nodules in the skin did not conform to any already recognized condition. He was categorical over the histological features characteristic of this lesion. "A glance through the microscope is sufficient for the diagnosis." Commenting on this claim, Professor Danbolt said: "Boeck was right in so far as the microscopical examination of a suspect process in the skin is a useful aid to the diagnosis." He went on to add: "But later research has shown that there are many cases of this disease in which the microscopic structure of the tissues cannot with certainty be distinguished from morbid processes of quite another character, tuberculosis for example." How simple and straightforward things were in Boeck's days! Boeck was lucky in being allowed to keep going to the end. His latest publication was still in the press when he died of a heart attack after only a few days' illness.

CLAUDE LILLINGSTON.