Lying-in Hospital. In 1896 she took the M.D. and the master-
ship in obstetrics, both with honours, and was appointed an
examiner in midwifery to the Royal College. She wrote a
number of papers on special subjects, and spoke frequently
at the meetings of the Royal College and of the Midwives' Bene-
fit Society. She had an intimate knowledge of obstetrics and
an interest in gynaecology, and in midwifery. She was a
friend of the Institute of Obstetrics and Gynaecology, and her
talks there were always well attended. She was a member of
the British Medical Association, and was one of the first
guests to visit the new headquarters of the Association when
they were opened in 1911. She was also a member of the
Medical Women's Federation, and was a frequent speaker at
its meetings.

She was a member of the Royal College of Surgeons, and
was a fellow of the Royal College of Physicians. She was
also a member of the Royal College of Surgeons of England,
and a fellow of the Royal College of Physicians of Edinburgh.
She was a member of the Royal Society of Medicine, and a
fellow of the Royal Society of Antiquaries. She was a mem-
er of the Royal Society of Tropical Medicine and Hygiene,
and a fellow of the Royal Society of Arts.

She was a member of the Royal Society of Literature, and a
fellow of the Royal Society of Arts. She was a member of the
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Society of Literature, and a fellow of the Royal Society of Arts.
The Parliamentary Medical Committee has changed its title to the "Parliamentary Medical Group."

Dr. Charles Hill, Acting Secretary of the B.M.A., and Dr. George Buchanan (Association of Medical Officers of Health) met the Parliamentary Medical Group on Feb. 14, explained the views of their Associations on the Education Bill, and suggested amendments. A deputation was proposed to the Minister on these amendments, and it is expected that the Group will sponsor certain which are in preparation.

Dr. Hill will meet the Parliamentary Medical Group on March 7 to discuss the White Paper on a National Health Service.

The White Paper

Announcing on Feb. 17 the issue of the White Paper on a National Health Service Mr. Willink said the proposals described were those which the Government believed to be best calculated to achieve an efficient and comprehensive National Health Service. But they were proposals, not decisions, and the Government had promised that they should be discussed with all concerned and would welcome constructive criticism in Parliament and the country.

Incidence of Venerable Diseases

Mr. Willink said on Feb. 10 that figures were not yet available for the year 1943 of the number of new cases of venerable diseases treated at local authority clinics. These diseases are not notifiable. Incidence of these diseases had increased since the beginning of the war, but the rate of increase had recently diminished. Regulation 33B, though this did not require statutory notification, had an appreciable effect.

Infant Mortality

On Feb. 10 Mr. Willink gave the following statement: Deaths per 1,000 live births of infants whose age does not exceed 24 hours, in England, Scotland, and Wales for the years 1935 to 1942, are as follows:

<table>
<thead>
<tr>
<th>Year</th>
<th>England</th>
<th>Scotland</th>
<th>Wales</th>
</tr>
</thead>
<tbody>
<tr>
<td>1935</td>
<td>10-7</td>
<td>11-7</td>
<td>12-1</td>
</tr>
<tr>
<td>1936</td>
<td>10-6</td>
<td>11-9</td>
<td>11-9</td>
</tr>
<tr>
<td>1937</td>
<td>10-9</td>
<td>12-0</td>
<td>11-7</td>
</tr>
<tr>
<td>1938</td>
<td>10-2</td>
<td>11-6</td>
<td>11-0</td>
</tr>
<tr>
<td>1939</td>
<td>10-2</td>
<td>11-3</td>
<td>10-9</td>
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<tr>
<td>1940</td>
<td>9-5</td>
<td>12-0</td>
<td>11-0</td>
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<tr>
<td>1941</td>
<td>9-8</td>
<td>13-0</td>
<td>11-1</td>
</tr>
<tr>
<td>1942</td>
<td>9-5</td>
<td>12-0</td>
<td>9-9</td>
</tr>
<tr>
<td>1943</td>
<td>Figures not available</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

On Feb. 15 Mr. Willink informed Major Markham that the infant mortality rates for England, Wales, and London for 1941, 1942, and 1943 were as follows:

<table>
<thead>
<tr>
<th>Year</th>
<th>England</th>
<th>Scotland</th>
<th>Wales</th>
</tr>
</thead>
<tbody>
<tr>
<td>1941</td>
<td>59</td>
<td>70</td>
<td>58</td>
</tr>
<tr>
<td>1942</td>
<td>50</td>
<td>58</td>
<td>51</td>
</tr>
<tr>
<td>1943</td>
<td>49</td>
<td>51</td>
<td>39</td>
</tr>
</tbody>
</table>

* Provisional.

Major Markham also asked what was the infantile mortality rate for Scotland for 1943; and the latest comparable rates for Iceland, New Zealand, New York, and Chicago. Mr. Johnston said that the infant mortality rate for Scotland for 1943 was 65 per 1,000 live births. The latest figures available for the other places were: New Zealand (1942, Europeans) 29; New York City (1940) 35; Chicago (1940) 29; Iceland (1936, rate calculated by U.S.A.) 46.

Education Bill: Nursery Schools

Consideration of the Education Bill by the House of Commons was resumed on Feb. 15. On Clause 7, which deals with the stages and purposes of the statutory system of education, Mr. Key moved an amendment which, he said, would rectify a grave omission in the Bill—the necessary arrangements for the children who at present attend nursery or infant schools. Under the Bill junior pupils were to comprise all children under 12, and nursery schools were regarded as being outside the normal provisions for children. They were excluded from the system of separate establishments and were specially included in the special schools for mentally and physically defective children. There was very grave danger that those who had been hitherto regarded as infants in the separate establishments between the ages of 5 and 7 would find themselves merged into the general primary arrangements.