brought to all he undertook a very high sense of duty, and he was devoted to his Corps, which he served so long and faithfully. In 1903 he married Florence Gipsy, only daughter of Imre Kiralfy, of New York. The sympathy of his many friends and admirers will go out to Lady Ainsworth and his two daughters in their great loss.

Dr. A. Macbeth, of Owston Ferry, near Doncaster, died in Glasgow on December 10, 1951. Archibald Macbeth was born in Carradale, Kintyre, Argyllshire, on October 9, 1889. He was educated at New Cumnock School, Ayrshire, and was dux of his school; after winning a scholarship he passed on to Whitehall School, Glasgow, and remained there until 1917. He then joined up as a combatant at the age of 17. He was badly gassed in France when only 17 years old, and was demobilized in 1919, when he became a medical student at Glasgow University, where he won several medals and prizes in both clinical medicine and clinical surgery. After graduating M.B., Ch.B. in 1924 he held junior posts in the Royal Infirmary, Glasgow, and then became assistant to Dr. James Craig in Glasgow. He married Dr. Craig's daughter, Eileen Gillespie, she also being a medical graduate. Some time later Dr. Macbeth bought his own practice at King's Park, Glasgow, and remained there until 1933. After selling this practice he bought his last practice at Owston Ferry, and remained there up to the time of his illness. This latter practice was a large rural one and required much hard work. His services were always given unstintingly and he was extremely popular with his patients. He was indeed a very sound general practitioner and one who always put his patients first. He was of a quiet, retiring disposition, but he was always a regular attender at meetings and lectures of the local Branch of the B.M.A. "Mac" had a very happy family life. He is survived by his widow, two daughters, and a son, to whom the deepest sympathy is extended. —W. H. B.

Dr. John Isdale Greig, who was for 40 years in general practice in Kirkcaldy, died on January 6, aged 69. Before studying medicine at Glasgow University, where he graduated M.B., Ch.B. in 1905, he had taken the degrees of M.A. and B.Sc. After qualification he held the appointments of house-surgeon and house-physician at the Victoria Infirmary, Glasgow. He came to Kirkcaldy in 1911, where he remained for the rest of his life. As well as practicing there he took an important part in local medical affairs, being honorary secretary of Kirkcaldy panel committee for 36 years, president of the Fife Branch of the B.M.A. from 1928 to 1929, and chairman of the hospital management committee of the East Fife group for a short time. He was also medical superintendent of the Hunter Hospital in Kirkcaldy. His ceaseless and untiring energy in his work won him many friends among the medical profession. During the first world war he served in the R.A.M.C. and was appointed M.B.E. for service in Africa. Dr. Greig was a keen sportsman, and was at one time president both of the Raith and Abbotshall Curling Club and of the Kirkcaldy Rugby Club. He is survived by his widow and three children. His son is a physician in Stornaway, and his younger daughter is also a doctor, and in fact assisted her father latterly in his practice.

In the obituary notice of Dr. George Lestock Thornton (January 12, p. 110) mention has been made of his many years of distinguished service with the Ministry of Pensions. May one who knew him through those years express in some measure the affection and respect in which he was held by all his colleagues? Thornton was of the old school, distinguished in looks, courtly in bearing, gracious in manner. To him you were always a welcome and honoured guest, a valued friend. Should it be your lot to disagree with him, he listened attentively, considered courteously your arguments, and with benign charm acceded here and dissented there. But rarely, if ever, did anyone convince him he was not right, and, whilst duly submissive to authority, none knew better than he how and when to go his own way. And rightly so, for the guiding purposes of his life had a broad charity and vision surpassing regulations. A most lovable man, distinguished in intellect as in heart, bearing good will towards all men, meeting good fortune with modesty and ill with tranquil courage, he was one whom to meet was memorable and whose friendship was precious. —A. S.

Dr. J. A. S. Purvis, anaesthetist to the National Temperance Hospital and Samaritan Hospital for Women, died in London on January 19, aged 53. John Allen Spottiswoode Purvis was educated at Rugby School and went into the Army via the Royal Military Academy, Woolwich. During the first world war he served in France in the Royal Artillery and lost his right leg as a result of a wound received in 1918. He then took up the study of medicine, and graduated M.B., B.Ch. at Queen's University in 1925. Deciding to specialize in anaesthetics, he eventually became anaesthetist to the Samaritan Hospital for Women, the National Temperance Hospital, the West End Hospital for Nervous Diseases, and the Western Ophthalmic Hospital. At the time of his death he still held appointments at the first two of these hospitals. Those whose privilege it was to have his help in their work will miss his regular attendance, unless ill-health prevented, the care, skill, and good judgment which he brought to his duties, his consideration for his patients, and the feeling of support and co-operation which he gave to the surgeons. He made up for the loss of his leg by his interest in his garden, at his riverside residence, and in his car, which it was his pleasure to service. It was also his pleasure to entertain his friends on the river. His kindly, steadfast, and genorous personality will be sadly missed, perhaps not least by hospital residents, to some of the less reverent of whom he was known as "Uncle John," and so-called to his face by a few. The sympathy of his many friends and colleagues goes out to his widow, Mrs. Barbara Purvis. —R. A. K.

The death occurred at Paignton on January 19 of Dr. John Prince Stallard in his 95th year. He was the son of Josiah and Susannah Stallard, of Worcester, and was educated at Rossall School and Edinburgh University, where he graduated M.B., C.M., in 1881. He proceeded M.D. in 1886. He was in general practice for many years near the centre of Manchester, and in addition held several hospital posts, including those of anaesthetist to the Victoria Dental Hospital, honorary surgeon at the Hulme Dispensary, and honorary physician to children at the Southern Hospital before and after its amalgamation with St. Mary's Hospital, where in his later years he took part in the obstetric practice. He published a number of papers on local and general anaesthesia, including one entitled "Removal of Haemorrhoids Rendered Painless by Injection of Cocaine" in this Journal in 1886. He retired in 1914 and went to live in the south-west of England. At the time of his death he had been a member of the British Medical Association for 70 years. He is survived by his second wife and by two sons, both doctors, one of whom has retired from practice.

The Services

Surgeon Captains M. Brown and J. H. B. Crosbie, R.N., have been appointed Honorary Physicians to the King.

Air Commodores F. E. Lipscomb and R. H. Stanbridge, O.B.E., R.A.F., have been appointed Honorary Physicians to the King in succession to Air Commodores C. T. O'Neill, O.B.E., and A. Briscoe, C.B.E., R.A.F., respectively, who have vacated the appointments on retirement from the R.A.F.
The Bill was then read a first time without division.

Efficiency of the Health Service

Sir Herbert Williams asked on January 31 what steps the Minister of Health proposed to take to restore the medical service to the people to the standard of efficiency which prevailed prior to July 1, 1948, in view of the heavy increase in mortality in the first three years of the service as compared with the three previous years.

Miss Pat Hornsby Smith replied that after allowing for relevant factors in each of the periods specified the difference in mortality was extremely small, and Mr. Crookshank was unable to accept the implication in the question.

Smoking and Cancer

Commander C. Fletcher-Cooke asked on January 31 whether the attention of the Minister of Health had been drawn to the report of the Medical Research Council relating to the incidence of cancer of the lung among heavy smokers.

Miss Pat Hornsby Smith replied that after allowing for relevant factors in each of the periods specified the difference in mortality was extremely small, and Mr. Crookshank was unable to accept the implication in the question.

Cortisone.—Special supplies of cortisone are being given by the Ministry of Health to hospitals for treatment of certain eye diseases, but the treatment of rheumatism is still a matter for investigation in which the M.R.C. is co-operating.

Ministry's Annual Report.—It is hoped that the Ministry of Health's next report will cover the 21 months from April 1, 1950, to December 31, 1951, and will appear before autumn, 1952. Thereafter reports will relate to calendar years and be issued more promptly.

Crematoria—In England and Wales some 127 local authorities or groups of local authorities, have applied for permission to build new crematoria since the war. No authorization has been given to any private company.

Medico-Legal

REFUSAL TO INCLUDE OPTICIANS IN LIST

[FROM OUR MEDICO-LEGAL CORRESPONDENT]

Two Glasgow ophthalmic opticians who had practised for 27 and 25 years respectively before the National Health Service (Scotland) Act, 1947, came into force applied for their names to be included in the Health Service list, but had their applications rejected. They therefore brought an action against the Secretary of State for Scotland and the Central Professional Committee for Opticians, on whose advice the Secretary of State acts in accepting or refusing applications, for a declaration that they were entitled to be included in the list.

Lord Sorn dismissed the action on the ground that the Court could not inquire into the way in which the committee prepared themselves to advise the Minister any more than it could into advice coming from his other advisers. The opticians appealed to the First Division of the Court of Sessions.¹ The First Division reversed Lord Sorn's decision.

The Court held that the Secretary of State had no absolute discretion to decide whether an optician who applied for inclusion in the list was qualified or not, but was bound to act on the committee's advice. That meant he must not act against the committee's advice. The Court could therefore investigate whether the committee had acted illegally by directing its attention to the wrong issue or by failing to direct its attention to the right issue, or had acted oppressively by treating the applicants so unfairly and improperly that its finding must be set aside.

The Lord President, in referring the action for trial, criticized the drafting of the regulations, which had inaccurately copied an English model. He said that it was enough for the disposal of the appeal to say that it was impossible to hold that there was not a case for inquiry.

This is a most important decision. It has established that, unlike the National Health Service (Scotland) Act at any rate, opticians who are aggrieved by exclusion from the list are not debarred from challenging their exclusion in the courts.

Universities and Colleges

ROYAL COLLEGE OF PHYSICIANS OF LONDON

At a quarterly comitia of the College held on January 31, with the President, Dr. W. Russell Brain, in the chair, Lord Moran was appointed representative to attend the Health Congress of the Royal Society held at Manchester on February 5 to 8, 1952 to report on Dr. Noel Harris representative on the Council of the National Association for Mental Health; and Dr. C. A. Keele a member of the Poisons Board.

The President announced the award of the Conway Evans prize to Sir Gordon Holmes, F.R.S., and Professor S. P. Boden, F.R.S.


Licences to practise were conferred upon 135 candidates (including 24 women) who had passed the final examination in medicine, surgery, and midwifery of the Conjunct Board and who have complied with the necessary by-laws of the College:


¹ The Scotsman, June 9.
Diplomas were awarded, jointly with the Royal College of Surgeons of England, to the following successful candidates:


**DIPLOMA IN PUBLIC HEALTH.—**J. P. Agrawal, Frances C. Myatt, T. A. Pace, A. C. B. Singleton, W. J. Smither, E. D. H. Williams. Diplomas in Psychological Medicine, in Laryngology and Otology, in Medical Radiodiagnosis, in Anaesthesiology, in Industrial Health, in Pathology, in Ophthalmic Medicine and Surgery, and in Ophthalmoscopy were also awarded, jointly with the Royal College of Surgeons of England, to the successful candidates whose names were printed in the report of the meeting of the Royal College of Surgeons of England in the *Journal of January 19* (p. 168).

**UNIVERSITY OF OXFORD**

The following degrees were conferred in Congregation on January 24:

D.M.—M. Weatherall.

Notices of University scholarships, fellowships, studentships, and prizes are printed in a Supplement to the *Oxford University Gazette* dated January 30. The list includes a number of scholarships, etc., of interest to medical students and practitioners.

**UNIVERSITY OF CAMBRIDGE**

Applications for Bekeley By-Fellowships for research in (a) medicine, or (b) any branch of natural science, excluding medicine, should reach the Registrar, Gonville and Caius College, Cambridge, by April 1. Candidates must be male and not less than 26 years of age. The tenure of the bekeley-fellowship is from one to three years and the emoluments are from £500 to £1,000 according to standing.

The following degrees were conferred in Congregation on January 26:


*By proxy.*

**UNIVERSITY OF LONDON**

The title of Professor of Biochemistry in the University has been conferred on Walter Thomas James Morgan, D.Sc., F.R.S., in respect of the post held by him at the Lister Institute of Preventive Medicine.

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**Vital Statistics**

**Infectious Diseases**

The chief variations in the number of notifications of infectious diseases in England and Wales during the week ending January 19 were increases in scarlet fever by 156 and dysentery by 119, and decreases in acute pneumonia by 187 and whooping-cough by 45.

A small rise in the incidence of scarlet fever was reported from every region except the northern, where a small fall occurred. The largest fluctuations in the returns for whooping-cough were rises in Warwickshire 66 and Yorkshire North Riding 34. There were 11 fewer notifications of diphtheria than in the preceding week; the chief feature of the returns was a decrease of 3 in Cambridgeshire. Large fluctuations were recorded by a few counties in the number of notifications of measles, although the total for the country was only 12 less than in the preceding week. The largest fluctuations were a decrease in Staffordshire of 75 and Cheshire of 73, and a rise of 46 in Warwickshire.

The number of notifications of acute poliomyelitis were 8 fewer for paralytic cases and 7 more for non-paralytic cases than in the preceding week. The cases were more widely spread and involved 25 counties, compared with 19 in the previous week. The largest returns were 3 in each of the counties of London and Kent.

Two fresh outbreaks of dysentery were reported from Wales during the week: Glamorganshire, Cardiff C.B. 22, and Pembrokeshire, Haverfordwest R.D. 12. A further 52 cases were notified from the outbreak in Norwich C.B., a rise of 21 above the total of the previous week. The other large centres of infection were London 56 (Islington 12, Fulham 10); Devonshire 45 (Exeter C.B. 23); Lancashire 58; Yorkshire West Riding 28 (Leeds C.B. 10); Middlesex 25; Southampton County 20 (Portsmouth C.B. 14); Surrey 16; Leicester 15 (Leicester C.B. 10); Durham 15; Kent 13.

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**Graphs of Infectious Diseases**

The graphs below show the uncorrected numbers of cases of certain diseases notified weekly in England and Wales. Highest and lowest figures reported during the nine years 1942–50 are shown thus ————, the figures for 1951 and 1952 thus ————. Except for the curves showing notifications in 1951 and 1952, the graphs were prepared at the Department of Medical Statistics and Epidemiology, London School of Hygiene and Tropical Medicine.
Any Questions?

Correspondents should give their names and addresses (not for publication) and include all relevant details in their questions, which should be typed. We publish here a selection of those questions and answers which seem to be of general interest.

**Attempted Suicide**

Q.—In the event of a patient being seen, examined, and thought to be a possible case of attempted suicide is there a responsibility on the medical practitioner to notify the police of his suspicions?

A.—The attempted suicide problem is a fairly common one, and raises an important issue on the fundamental relationship of mutual trust which is so important in general medical practice. It is true that attempted suicide is a misdeemeanour, and that if information were laid to show that an attempt had occurred the police would have to make inquiries and could, if the evidence were sound, make a charge at the magistrates' court. Little advantage would ensue either to the accused or to the police—and the spectacle is depressing.

No statutory obligation exists to force a doctor's hand in the matter, and the general practice (which has the tacit approval of the law) is for the doctor to treat, rather than report, his patient's unhappiness. A form does exist in the Metropolitan Police stations which asks a hospital to which an attempted suicide has gone for treatment to report the day of anticipated release. This is not obligatory—it is merely a request—which forms a part of the police action already set in motion. It can hardly be ignored, but to reply to a request for information is not the same as to volunteer a breach of the confidence the patient has a right to expect of his doctor. Neither doctor nor hospital authority need start an inquiry.

**A History of Repeated Miscarriage**

Q.—A woman of 42 has had seven pregnancies, with two normal children, four miscarriages, and, in the last pregnancy, a mongol who died shortly after birth. She wishes to have more children. Does this kind of history suggest that future pregnancies are likely to end by miscarriage or perhaps with an abnormal child? How should she be advised?

A.—If other causes have been excluded there is a real possibility that the abortions were due to malformations of the foetuses. At any rate the history is very suspicious, and, bearing in mind that the advanced maternal age also increases the risk, the chance of foetal malformation in the next pregnancy may well be very high. It is impossible to assess the risk accurately without more details about the abortions. The patient should be told that the history suggests that if she embarks on pregnancy she has a much greater than average risk of abortion and foetal malformation, but that a normal child is not impossible. The decision about further child-bearing is then a matter for the couple in question.

**Fits from African Worms**

Q.—What African helminthic infestations can give rise to Jacksonian epilepsy in man? How are they excluded?

A.—Epileptic convulsions may arise from infection with *Schistosoma haematobium* and from cisticercosis (*Taenia solium* infection). The latter is rare in Africa. Infection with *Schistosoma* can be escaped by avoiding exposure in infected water; *Taenia solium* infection by avoiding undercooked pork. The diagnosis of schistosomiasis is made by finding the eggs in the urine or the faeces. Skin sensitivity reactions may help to confirm the diagnosis. The diagnosis

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**BIRTHS, MARRIAGES, AND DEATHS**

**BIRTHS**

**Laws.—**On January 29, 1952, at Sheffield, to Dr. Pamela Laws (formerly King), wife of Dr. John W. Laws, a daughter—Susan.

**Low.—**On February 3, 1952, at Simpson Memorial Maternity Pavilion, to Mrs. Low (formerly Rose), wife of Dr. C. Wilson Low, Hillwood, Cheadle Road, Edinburgh, a son.

**Peters.—**On February 4, 1952, at Alexandria Spa, to Marianné (formerly Burges), wife of Dr. Michael Priest, a daughter.

**Strouding.—**On January 31, 1952, to Peggy Snow, wife of Dr. Peter Strouding, a son.

**Whalley.—**On January 25, 1952, at Newcastle-upon-Tyne, to Joy (formerly Broxson), wife of Dr. G. Hamilton Whalley, twin brothers for Bruce and David.