

the electroscope, and the two features of interest that Mr. Russ noted were, in the first place, a large increase in the yield of x rays produced by a small increase in the current used to heat the electrode, and, in the second place, a relatively large yield of "hard" (or more penetrating) x rays than of "soft" when the heating current was increased. Mr. Russ emphasized the warning already given in our previous article that the precautions which may have sufficed for tubes hitherto used by no means necessarily hold good for this new arrival.

NEARLY two years ago the Metropolitan Water Board and its workmen obtained exemption from the Insurance Act, and the Board undertook to provide gratuitous medical attendance for its 3,000 workmen. It was arranged that each medical officer should receive an inclusive payment of 10s. a year for each man on his list, this sum to include attendance, medicines, and all certificates required by the Board. It was arranged that every practitioner who was attending not less than twenty-five of the permanent employees should be included among the medical officers, and eighty-four district medical officers were so appointed. The scheme has worked well, and the appointments, with a change in one case, were recently renewed.

Obituary.

ROBERT BURNET, M.Sc., M.B., D.P.H.,

M.O.H. COUNTY OF CORNWALL.

THE news of the death, by accident, of Dr. Robert Burnet, medical officer for the county of Cornwall and the Cornwall Education Committee, will have been received with deep regret. He was at the time serving as sanitary officer with the division at Exeter. He had joined the Territorial Force at an early stage, and had served with the 2nd Wessex Field Ambulance, holding the rank of captain. In 1913 he was promoted major upon appointment as divisional sanitary officer. On mobilization he moved with the division first to Salisbury, and was promoted lieutenant-colonel at the early age of 39. He was riding in the neighbourhood of Exeter, where his division was stationed, with a brother officer, when his horse bolted and threw him, causing fracture of the skull, which produced death in a few minutes.

Robert Burnet received his medical education at University College, Liverpool, and graduated B.Sc. in the Victoria University in 1897 with first class honours and a scholarship; M.B., Ch.B. in 1900, and M.Sc. in 1901. We are indebted to Dr. A. Bygott, medical officer of the West Suffolk County Council, for the following sympathetic notice of Dr. Burnet's short career:

I first met Robert Burnet in 1902, soon after his appointment as district medical officer for the parish of Birmingham, and have been very intimately connected with him ever since. The appointment was a somewhat remarkable one, being the result of an attempt by an enlightened board of guardians to organize their outdoor medical department on the best possible lines by availing themselves of whole-time officers at what at that time was considered a substantial salary. Four men holding these offices in Birmingham afterwards became county medical officers—in the West Riding of Yorkshire, Derbyshire, Cornwall, and West Suffolk. Burnet took a keen interest in this work, and did his best to develop it, as far as possible, on the lines upon which it was intended, but he found that he was undertaking a practically impossible task. This is well shown in the very valuable evidence he gave before the Royal Commission on the Poor Law in 1907, in which he suggested that the medical services controlled by the boards of guardians should be transferred to the public health authorities, and when this policy was adopted in the Minority Report he supported it on every available occasion.

In 1908 he obtained the D.P.H. of the University of Birmingham, and within a few days of receiving it was selected for an appointment as M.O.H. for Handsworth, which he did not obtain. Within three months, however, he was elected as M.O.H. for the county borough of Bury, in Lancashire, and was soon afterwards appointed superintendent of the large combined isolation hospital in the neighbourhood. He was especially fortunate in succeeding two such distinguished sanitarians as Dr. Howarth and Dr. Brindley, who had brought the sanitary work there to a very high level, which level he fully maintained. He

developed the work of medical inspection, which had been commenced by Dr. Brindley, and assisted the council in starting a municipal hospital for tuberculosis, which was made possible by the benefaction of a private donor. He also gave evidence before the Parliamentary Committees in support of a comprehensive General Powers Bill.

In autumn, 1910, he was appointed county medical officer for Cornwall, an office presenting considerable difficulties, as this county is large and populous, and does not contain a single large town. Here he found a fitting scope for his very considerable abilities, and from personal knowledge it can be said that he was well fitted for such a herculean task. During his first year of office there was a very serious epidemic of poliomyelitis in the county, in the investigation of which he proved himself indefatigable, and in connexion with which he received a very serious blow. His only son, a brilliant boy who was destined for the navy, fell a victim to this disease; his life was spared, after a very serious illness, leaving him paralysed. Dr. Burnet read a very excellent paper on poliomyelitis at the annual congress of the Royal Institute of Public Health in Paris. He devoted much energy in the inception of the tuberculosis scheme for the county of Cornwall.

Dr. Burnet's early career was brilliant. He was a man of varied talents, and possessed no mean gifts as an artist and musician, though the strenuous life which he led in later years left him little opportunity for following these and other hobbies. He was singularly alert, throwing himself with ardour into every detail of anything he undertook. In his work he was one of the most conscientious men that I ever knew. In 1912 I spent several days with him in Cornwall. We made a housing survey together, and I was struck anew with his capacity for extracting enjoyment from the daily routine. Our busy lives diverged, and though we constantly corresponded, I only met him once again. His life was cut short at its highest point of fulfilment. Success had crowned his efforts in no light measure, and although one can wish a man no happier fate than that he should, in the prime of life, give that life for his country, yet a host of friends will mourn his loss, and the deepest sympathy will be felt for his young widow and his fatherless children.

COLONEL RICHARD EXHAM, C.M.G., A.M.S. (retired), died at Plymouth on February 1st. He was born on September 27th, 1848, the eldest son of the late Thomas Exham, of Monkstown, Cork, and was educated at Edinburgh, where he took the diplomas of L.R.C.S. and L.R.C.P. in 1871. He entered the army as assistant surgeon on April 1st, 1871, became surgeon in March, 1873, and surgeon-major on April 1st, 1883. He was promoted to colonel on November 20th, 1899, and retired on August 19th, 1903. He served in the South African war from 1899-1901 as principal medical officer of the Natal Field Force and of the lines of communication, and took part in the defence of Ladysmith and in the operations in the Orange River Colony, being twice mentioned in dispatches, in the *London Gazette* of February 8th, 1901, and of September 10th, 1901, and receiving the Queen's medal with four clasps and the C.M.G.

Universities and Colleges.

UNIVERSITY OF SHEFFIELD.

MR. ARTHUR J. HALL, M.A., M.D., F.R.C.P., has been appointed Lecturer in Medicine.

TRIPLE BOARD IN SCOTLAND.

War Service in Lieu of Curriculum.

THE Committee of Management of the Triple Qualification of the Royal College of Physicians of Edinburgh, the Royal College of Surgeons of Edinburgh, and the Royal Faculty of Physicians and Surgeons of Glasgow, makes the following announcement: The Committee of Management of the Triple Qualification begs to announce to students who have undertaken approved service with His Majesty's forces that applications for partial recognition of such work in lieu of curriculum will be individually considered. Steps will be taken in each case to grant such concessions as appear to the Committee to be in accordance with the Recommendations of the General Medical Council.