

*Australian Army Medical Corps.*  
Captains J. F. G. Fitzhardinge, H. Sutton.

*Indian Subordinate Medical Department.*  
First Class Subassistant Surgeon Abdul Majid.

The list also contains the names of twenty-four warrant and non-commissioned officers and privates of the R.A.M.C. and four of the A.A.M.C.

## England and Wales.

**PHYSICAL TRAINING IN SECONDARY SCHOOLS IN WALES.**  
THE Welsh Department of the Board of Education has issued a hortatory memorandum to educational authorities in Wales on the neglect of physical training in secondary schools in the principality. There is one paragraph indeed which is distinctly minatory, for it informs all the authorities that no school can henceforth be regarded as efficient unless it makes proper arrangements for the physical training in every school of all pupils fit to receive it, or is at least doing all in its power in this direction. The Welsh Department of the Board of Education is a little whimsical in its requirements, inasmuch as it will not accept military drill and insists upon the schools building gymnasiums. A scheme of physical training in a secondary school should include (a) a suitable plan for physical exercises, comprising (1) formal gymnastics on the line of the Swedish system; (2) dancing "suitable for use in schools"; and (3) playground and field games, swimming, etc.; (b) fully qualified teachers of gymnastics; (c) a room or gymnasium containing at least a minimum of Swedish apparatus; (d) arrangements for not less than three lessons a week in formal gymnastics (including team games, dancing, etc.) of thirty to forty-five minutes in duration, according to the age of the pupils. It does not hope at once to attain this ideal, but requires every school to comply with two conditions—namely, that physical training should always be in the hands of a teacher who has had some special training on modern lines, and a minimum of two lessons a week of half an hour's duration, given at a period of the day favourable to the teaching and performing of physical exercises. The supply of expert teachers being limited, the Board is prepared to accept as physical trainer the ordinary class teacher who has received some special training. It urges that greater facilities should be afforded to teachers to improve their qualifications by taking the summer or vacation course of instruction in physical exercises officially recognized by the Board of Education, which for the last two or three years has granted allowances to selected teachers to enable them to attend such courses. The allowances have been travelling expenses and £1 a week for maintenance! The Board's grants, however, are limited, not only in amount but in number, and it urges local education authorities to "be liberal in offering similar inducements to teachers to undertake this training." It also advises that it would be advantageous to allow the organizer of physical training, where appointed, to exercise general supervision over the secondary and technical schools as well as over the public elementary schools. It is pointed out that an urban authority may adopt the Museums and Gymnasiums Act, 1891, under which it can provide a gymnasium and establish classes and grant the exclusive use to any person or body of persons for two hours a day for gymnastic exercises on conditions as to payment, and so on, as may be arranged. The Board is prepared to consider applications for grants under Article 44 of the new Regulations for Secondary Schools in Wales, to enable visits to be paid by teachers of physical training to a school chosen as specially suitable, and expresses the expectation that school governors will avail themselves of the opportunity created by the payment of increased grants to secondary schools to place the teaching of physical exercises on a far higher plane than it occupies at present in Wales, and in particular to appoint well-qualified and adequately remunerated teachers of the subject. The document does not seem to disclose much foresight or insight. The insistence on gymnasiums appears to be an example of the Germanization prevalent before the German war among Government officials. Might not the Secretary have found better employment for his own time and the depleted stock of printing paper?

### THE LIVERPOOL MEDICAL INSTITUTION.

At the annual meeting of the Liverpool Medical Institution on January 17th it was stated that the total membership is now 392 as against 386 at the beginning of 1917. The financial statement, in spite of the fact that no subscriptions have been demanded from members on active service, showed a credit balance, due to various economies by which expenditure has been diminished. As a result of the biennial election Mr. William Thelwall Thomas, M.Ch. Liverpool, F.R.C.S., Honorary Surgeon to the Liverpool Royal Infirmary, was unanimously elected President; Mr. D. Douglas-Crawford, Mr. G. S. Stansfield, Mr. K. W. Monsarrat, and Dr. Llewellyn Morgan were elected Vice-Presidents; Mr. C. Thurstan Holland, Treasurer; Dr. Hubert Armstrong, General Secretary; Dr. Walter Oram, Secretary of Ordinary Meetings, Mr. T. C. Litler-Jones, Secretary-elect; Dr. J. Martin Beattie, Secretary of Pathological Meetings, Dr. H. Leith Murray, Secretary-elect; and Dr. R. W. Mackenna, Librarian and editor of the *Liverpool Medico-Chirurgical Journal*. The customary vote of thanks was passed to the retiring officers.

### CENTRAL MIDWIVES BOARD.

The Board held penal sessions on January 9th and 10th, Sir Francis Champneys presiding. Eleven cases were decided, and of the women cited to appear five were struck off the roll. The most frequent charge was that of not obtaining medical aid for ophthalmia neonatorum. Inability to take the pulse and temperature and technical breaches of the rules also figured largely.

At the ordinary monthly meeting on January 10th the Standing Committee reported a letter from the Child Welfare Inquiry Office, asking the Board to appoint a representative to attend a national conference to be held on February 14th to consider a scheme adopted by the Child Welfare Council recommending changes in the law with regard to unmarried mothers and illegitimate children. The Board decided to appoint Mrs. Salter as its representative. With reference to a letter from the Deputy Medical Secretary of the British Medical Association calling the attention of the Board to an advertisement by a midwife offering to attend patients at their own homes for "twilight sleep" treatment, it was decided that the midwife should be cited to appear before the Board. Eight women were removed from the roll on their own application.

### A MINISTRY OF HEALTH.

On January 17th the executive of the Urban District Councils Association, at the Central Hall, Westminster, recorded its opinion that the Local Government Board should be recognized as the Ministry of Public Health, that the creation of a new Ministry would be undesirable on economic grounds and disastrous to the efficient working of the public health services, and that it was essential that the local administration of public health matters should remain in the hands of local authorities. Three representatives were appointed to discuss the matter with Dr. Addison (Minister of Reconstruction).

## Scotland.

### MOTHER WELL.

THE Carnegie United Kingdom Trust has determined, as a result of its inquiry into the physical conditions of mothers and children in the United Kingdom, to assist in the establishment of model welfare schemes in certain urban centres. It has selected Motherwell, in Lanarkshire, as the town in which to make the first experiment in Scotland. Motherwell has a population of 40,000, and is the centre of a district which includes Bothwell, about three miles nearer Glasgow, engaged in coal-mining and in iron and engineering works. The Town Council of Motherwell has accepted the offer of the trustees to meet the cost of erection and equipment of a building, provided the council supplies a suitable site; that the plans and estimates to be drawn up by the council shall be approved by the trustees; that the council will maintain the welfare centre by means of Government grants and local rates and contributions; that the scheme is made part of a local comprehensive system of physical welfare approved by the Local Government Board for the purpose of imperial grants; and that the council shall make reports on the work of the centre to

the trustees, to be embodied in their annual reports. The town council, after accepting the offer, instructed the Public Health Committee to frame a scheme. A punning correspondent suggests that the scheme should serve to keep the mothers well in Motherwell and the mothers and infants both well in Bothwell.

#### DISABLED SOLDIERS.

At a meeting on January 12th of the Joint Institutional Committee for Scotland, consisting of representatives of the Scottish Joint Disablement Committees, the Red Cross Society, and the War Office, when Sir A. Griffith-Boscawen, Parliamentary Secretary to the Ministry of Pensions, was in the chair, it was reported that the neurasthenic home of recovery at Craighend, Liberton, Edinburgh, would probably be ready at the end of February, and that the epileptic colony at Murieston, Mid-Calder, would be opened in the course of a few days. It was also reported that the Red Cross Society would place a number of small auxiliary hospitals no longer required by the military authorities at the disposal of the Committee for use as convalescent homes. The erection of a sanatorium for consumption at Stornoway was approved and plans were considered for extending the Springfield colony at Polton. A combined hospital and hostel is to be established at Aberdeen to which men can be transferred for the three weeks immediately preceding their discharge from the army. It was stated that the difficulties of the Committee would be considerably increased by a recent order of the War Office forbidding the readmission of discharged men to military hospitals for in-patient treatment. The Scottish section of the Committee, appointed by the Ministry of Pensions to consider the adequacy of hospital accommodation and facilities for treatment both for discharged men and the civil population throughout Great Britain, has held a meeting in Edinburgh, when it was decided to assist the Scottish Insurance Commission in completing the information already in its possession with regard to hospital accommodation, facilities for nursing, and other matters in connexion with treatment before proceeding to any independent inquiry. The Scottish section of the Committee consists of Sir A. Griffith-Boscawen (chairman), Sir Donald MacAlister, Dr. J. C. McVail (Scottish Insurance Commission), Dr. Leslie Mackenzie (Local Government Board), and Sir John Macaulay.

## Ireland.

#### NATIONAL HEALTH INSURANCE IN IRELAND.

The report on the administration of National Insurance during the years 1914-1917 contains, as was stated last week, a section on Ireland. As the result of a circular deprecating during the continuance of the war transfers from one society to another, save in exceptional circumstances, a great and continuous decrease in the numbers has occurred. During the half year before this circular was sent out there were 2,464 such applications for transfer, but in the following six months only 379. A small proportion of the Irish societies, mostly those of small membership, have experienced deficiencies in their administrative accounts. For the period ended January 11th, 1914, there were twenty-six deficiencies, for the period ended December 31st, 1914, there were sixteen, and for the following year thirteen. In twelve cases the deficiencies were small and were carried forward, as permitted by the regulations. The great majority of the remaining deficiencies have been, or are being, made good by other means than levy. The number of approved societies operating in Ireland on December 31st, 1916, was 223; of these 213 were centralized societies, and 10 societies with branches. Immediately preceding the outbreak of war there were in Ireland 716,318 insured persons, 480,028 men and 236,290 women. The total contribution of Irish approved societies towards the financing of the war by investment in war securities of moneys arising through the National Insurance Acts may be taken at approximately £400,000, apart from the National Insurance moneys invested in those securities by the National Debt Commissioners.

Of the thirty-nine Insurance Committee areas in Ireland, the County Councils of thirty have appointed a tuberculosis

officer, and either a partial or a complete scheme for the prevention, detection, and treatment of tuberculosis is in operation. Comprehensive agreements have been entered into between the insurance committee and the council in twenty-two of these areas, and it is hoped that, as a result of negotiations now proceeding, agreements will shortly be completed in five other areas. In eight areas the councils have not yet formulated any schemes for the treatment of tuberculosis. In one area a scheme which was in operation has been abandoned, but on the whole the agreements have so far proved very successful. The number of beds available for the treatment of tuberculous cases in sanatoriums has increased considerably, but further accommodation is necessary if sanatorium treatment is to be provided promptly in each case. The accommodation in institutes for the treatment of advanced cases is still very inadequate, and the position in this respect has been rendered worse in consequence of the war. No change has been made since the last report in the condition governing the provision of domiciliary treatment, but the difficulties existing in certain areas, as regards the fees payable to the medical profession, have, it is stated, to a large extent been removed. As a result of their experience since the commencement of the Insurance Act, the Commissioners are of the opinion that no really satisfactory progress in dealing with the problem of tuberculosis is possible until all forms have been made compulsorily notifiable. There is no doubt that through absence of compulsory notification, application for treatment is, as a rule, made only at a stage of the disease when either a prolonged and costly course of treatment is necessary with uncertain results, or the disease is so advanced that expenditure on treatment cannot be productive of any lasting results.

At present there are 1,412 medical certifiers in Ireland. The new scheme of certification, it is said, has proved a considerable improvement upon the conditions which obtained previous to its coming into operation.

As medical benefit is not available in Ireland, the scheme of benefits for exempt persons differs from that in operation in Great Britain; the qualifications for sanatorium benefit are slightly different, and in lieu of medical benefit a sickness benefit of 6s. a week, commencing from the seventh day of illness, is provided.

#### IRISH COUNTIES WAR HOSPITAL.

At a meeting of the executive committee of the Irish Counties War Hospital, Lieut.-Colonel Pringle, F.R.C.S.I., submitted statistics for the first six months, showing that 817 men had been admitted, of whom 631 had been discharged and 186 remained under treatment. Of the 631 men discharged, no fewer than 146, or about 25 per cent., have been returned to their regiments for service, and 131 sent to command dépôts or a military convalescent hospital, all of whom would probably be able to rejoin their units in less than three months; it thus appeared that 43 per cent. of the patients discharged were able to rejoin the colours either immediately or in the near future. Of the remainder, two died, ten were discharged from the service, and the balance either transferred to other primary hospitals (generally for the purpose of being nearer their homes), to auxiliary convalescent hospitals, or to special hospitals (mental, infectious cases, etc.). A meeting of the general committee will be called at an early date, when a half-yearly report prepared by the finance committee will be presented.

#### IRISH TUBERCULOSIS MEDICAL ASSOCIATION.

A meeting of the members of the Irish Tuberculosis Medical Association was held in Dublin last week. Dr. A. H. Hanley was elected president, Dr. Gillespie and Dr. Cuffe vice-presidents, Dr. Quinlan honorary secretary, and Dr. Timoney honorary treasurer. In the discussion which took place stress was laid on the importance of bringing cases to the notice of the tuberculosis medical officer in an early stage, as at that stage cases invariably yielded good results. It was recommended that opportunities should be given to medical students for seeing cases of disease in an early stage with the tuberculosis medical officer, and that lectures on the early diagnosis of tuberculosis should form part of the curriculum. It was also advised that the time spent by nurse probationers in sanatoriums should count as part of their general training.