

We students, however, comfort ourselves with the rationalization that "the founder of the greatest tradition in the Annals of British Surgery"—I quote R. H. Major's *Classical Descriptions of Disease*—was "unable usually to express himself clearly by either written or spoken word." I refer to John Hunter. And, anyway, they were probably grumbling about students' literary style in the days of Hippocrates.—I am, etc.,  
Sheffield.

ROBERT M. ATKINSON.

### Social Services and the State

SIR,—The crucial issue has been raised of the priority of social services in relation to limited resources. A letter which was indeed painful reading, signed by Lieut.-Colonel H. R. Pelly, appeared recently in one of our leading daily papers (*The Times*, March 17). Since this letter has remained unanswered, though questions of the highest moment were involved, I trust you will permit me to draw attention to the serious implications thereof.

The letter which I refer to might have emanated from pre-war Germany rather than from Chelsea, associated in so many of our minds with the fine arts. Colonel Pelly is led to the unhappy conclusion that those social services which do not clearly promote the strength and welfare of the State must either be sacrificed or left to the chance help of friendly people or organizations. He then proceeds to contrast the relative value to the State of children and old people.

Now by all means let us care for the children's teeth (the matter is urgent), but do not let us deprive the aged of the ability to masticate or to read in their leisure hours. Heaven knows they have little enough comfort or consolation in this modern world. Again, Colonel Pelly says that the education of children must have priority over the suitable housing of old people. What sort of education will these children have if they are not taught, both by precept and example, to respect and care for the aged? This correspondent, having subscribed to the un-English doctrine of the State first, the individual second, third, or not at all, ends with this cold and calculating conclusion, "It is not in the interests of the State to prolong the individual's life after he has ceased to be a productive unit, or even to be self-supporting."

May I suggest that a committee of the British Medical Association or of the Fellowship for Freedom in Medicine (Lord Horder's group) could advise the Ministry of Health how to effect very large economies in the working of the National Health Service without hurting either the children or the aged? Colonel Pelly's views have served one good purpose: they have demonstrated how readily the benevolent all-powerful State can degenerate into the ruthless, efficient State.—I am, etc.,

West Clandon, Surrey.

C. P. WALLACE.

### POINTS FROM LETTERS

#### Health and the Soil

Dr. E. K. LEDERMANN (London, W.2) writes: I agree with Dr. E. H. Eason's views (March 25, p. 731) on the fundamental importance of nutrition and the treatment of the soil. I am, however, not surprised at the lack of interest shown by the medical profession in these matters. Scientific medicine has become analytical and specific. The views on organic farming and husbandry and the principles of natural therapy do not fit into the scheme. Non-medical practitioners find it easy to follow the common-sense holistic approach. Who of the teachers of our profession is sufficiently detached from the specialist's outlook and sufficiently aware of the limitations of the scientific-analytical approach to lead the profession and the laity in these fundamental matters of health and disease?

#### Students' Literary Style

Dr. R. DUFF CHALMERS (London, S.E.10) writes: Professor C. Wells and Mr. J. A. Shepherd (January 28, p. 252) comment on the poor vocabulary of modern undergraduates—and use "student" three times in the first thirty words of their letter. They complain of the style of the answers to examination questions—and start their second sentence: "In reading"; it should be: "When reading." They finish with the weak and awkward: "... it might be profitable to try to trace its causes." I suggest that: "... an effort should be made to trace its causes" is stronger and reads more easily. Perhaps they had little time and felt, as any candidate does, that

"— I have fears that I may cease to be  
Before my pen has glean'd my teeming brain."

## Obituary

### SIR ARTHUR BAGSHAWE, C.M.G., M.B., D.P.H.

Sir Arthur Bagshawe, who was well known to all those interested in tropical medicine as the first director of the Bureau of Hygiene and Tropical Medicine, died on March 24 at the age of 78.

Arthur William Garrard Bagshawe, the second son of the Rev. Alfred Drake Bagshawe, was born at St. Leonards-on-Sea in 1871. He was educated at Marlborough, Caius College, Cambridge, and St. George's Hospital, obtaining a first class in Part I of the Natural Science Tripos in 1892. He qualified M.R.C.S., L.R.C.P., and graduated M.B., B.Ch. in 1895, and in 1908 he took the Cambridge D.P.H. After holding a house appointment at the Royal Northern Hospital he joined the Colonial Medical Service in 1898 and was posted to Uganda. As a member of the Lango Expedition in 1901 and of the Anglo-German Boundary Commission which defined the frontiers of what is now Tanganyika he became very familiar with the many medical problems of East Africa. Trypanosomiasis was at that time epidemic in Uganda and was destroying the human population over large areas as well as the cattle on which they lived. All too little was then known of the oecology of the tsetse fly, and the chemotherapy of sleeping sickness was still in its infancy.

Bagshawe quickly became one of the most distinguished workers on trypanosomiasis. In 1907-8 an international conference sat in London at the invitation of the British Government to consider the whole problem of trypanosomiasis, and in the deliberations of this body Bagshawe quickly made his mark. One of the recommendations of the conference was the establishment of a central international bureau "to extract and circulate all new literature on sleeping sickness." The idea of medical collaboration on an international scale for the study and eventual eradication of a particular disease was then a very new conception, and international rivalries were acute enough to prevent this proposed development. Lord Elgin, who was then the Secretary of State for the Colonies, however, saw the absolute necessity for some central organization to keep workers on sleeping sickness informed of the most recent developments in their field. He therefore established a British bureau, with Bagshawe as its first director. Four volumes of abstracts on trypanosomiasis proved such a boon to scientists and medical men in the Tropics that the idea was quickly extended to other diseases, and in 1912 the Trypanosomiasis Bureau became known as the Tropical Diseases Bureau. In 1926 the Bureau, which had then become firmly established, changed its title to "Bureau of Hygiene and Tropical Diseases," a name more in keeping with its wider functions. Bagshawe continued to act as director of the Bureau and as editor of the *Tropical Diseases*

