

"Quite Better"

SIR,—During my military service I was in medical attendance on East African soldiers. When any of these patients was asked, through an interpreter, how he was, very often the reply, as interpreted, was, "A little better." At first I was rather puzzled at the frequency of this apparently grudging admission of improvement, but later I discovered the explanation.

The Swahili language has no comparison of adjectives, so the word *mzuri* means either "well" or "better." To distinguish the comparative and positive senses it may be modified by the adverbs *kidogo* ("a little") or *sana* ("very"). Thus *mzuri kidogo*, translated literally as "a little better," means "improved" as distinct from "recovered," or "better" in the correct sense of that word as distinct from "well." If the patient answered simply "*mzuri*," the interpreter would at once ask, "*Kidogo au sana?*"

Swahili speakers, realizing the ambiguities liable to arise from the lack of a system of comparison of adjectives, are careful to avoid such difficulties by the use of adverbs. Our language is blessed with such a system; but, as Dr. Allan Finn (May 6, p. 1323) reminds us, we deprive ourselves of this advantage, without such compensation and with resulting ambiguity, when we use "better" for "well."—I am, etc.,

Glasgow W.2.

W. J. PATTERSON.

SIR,—I have had a patient say to me, "I'm not *better*, but of course I'm better." The use of the word "better" when "well" is meant is quite indefensible, though I regret to say that I have more than once heard "quite better" used by colleagues, both G.P. and consultant. It would be as sensible to refer to deceased as being "quite worse."—I am, etc.,

Frensham, Surrey.

E. M. TOWN-JONES.

Influenza Vaccination

SIR,—As medical officer to an engineering company I offered to vaccinate the employees against influenza. Of a total number of 10,600 employees, there were 600 volunteers, and these were vaccinated with types A + B influenza virus, and the total number of certificated cases until the end of February was three. The number of certificated cases in the remaining 10,000 was 289, and also several of those vaccinated did not, for the first time in years, catch cold.

These figures may prove of interest to other factory medical officers.—I am, etc.,

Edgbaston,
Birmingham 16.

JOSEPH RADNOR.

Contact with German Measles

SIR,—In view of the danger of German measles to unborn babies, would it not be a good plan for doctors to hang in their surgeries a notice saying plainly that they would prefer patients with undiagnosed rashes to call them in at home? Timid women can be so reluctant to make a fuss and give trouble that they will take their spotty, feverish children for inspection during surgery hours, apparently without realizing that this may condemn someone else's infant to a lifetime of physical or mental defect.—I am, etc.,

London N.W.6.

RENÉE HAYNES.

Obituary

P. A. GORER, D.Sc., M.R.C.P., F.R.S.

Dr. Peter Gorer, reader in experimental pathology, Guy's Hospital Medical School, died suddenly at Haywards Heath on May 11 after a short illness at the age of 54. A year ago he was elected to the Fellowship of the Royal Society for his work on immunology in relation to tissue transplantation.

Peter Alfred Gorer was born on April 14, 1907, and was educated at Charterhouse and Guy's Hospital Medical School. After taking his B.Sc. in 1929 he qualified in medicine in 1932. In 1940 he proceeded to the degree of D.Sc.(Lond.) and became M.R.C.P. in 1950. Gorer's early work was carried out in the department of genetics at University College, London, where he was associated with Professor J. B. S. Haldane, F.R.S., and later he worked for the British Empire Cancer Campaign at the Lister Institute. In 1940 he returned to Guy's and served until 1946 as acting morbid anatomist and haematologist. At the close of the war he returned to scientific work, and after spending a year as senior research fellow at the Roscoe B. Jackson Memorial Laboratory at Bar Harbor, Maine, he was appointed reader in experimental pathology at Guy's Hospital Medical School in 1948. Earlier this year the Medical School proposed to the University of London that a chair and a department of immunology be established for him.

In 1941 he married Gertrude Kahler. She died four years later and in 1947 he married Elizabeth Bruce Keucher. He had one son and one daughter by his second marriage.

R. H. S. T. writes: Gorer's work in immunology, and in particular in the difficult field of the immunology of tumours, had won him an international reputation. Perhaps his most outstanding work was the discovery of a system of tissue antigens, the H-2 system, somewhat analogous to the rhesus system of blood groups in man, although more complex in the number of antigens involved. His serological and genetical analysis of this intricate system by ingenious and elegant methods has led to a rational explanation for the transplantability of tissues. The use of neoplastic tissue in the analysis of this H-2 system led him on to a study of the complex subject of the antigens of tumours. In the course of this work he was one of the first to distinguish between normal tissue antigens present on malignant cells and those peculiar to the state of malignancy. Recently he and his colleagues had discovered a series of antigens specific for mouse leukaemia cells. One of the tragedies of his early death is that he was unable to complete the important work which he had recently started on the significance of these antigens.

No account of Dr. Gorer would be complete without a reference to his warm and endearing personal qualities. His wisdom and knowledge won him high respect from his colleagues, and his friendly and unassuming manner made him a very real source of inspiration and help to the younger postgraduates who came both from this country and from overseas to work with him. He had that faculty of being able to impart to those working with him a sense of excitement in the concepts being tested by this new approach to the cancer problem.

He was a man of broad interests, and by his conversation and his wit he enlivened any gathering. He possessed that wide sense of curiosity that exhibited itself in his love for and knowledge of natural history. As a younger man he had been a cricketer and had fenced for Guy's, and was also a keen and skilful fly-fisherman.

He will be remembered with respect and affection by all his many friends, colleagues, and students.

M. F. A. W. writes: The sudden death of Peter Gorer at the age of 54 has deprived British medicine of a scientist

of the first rank, and has inflicted on his friends in many parts of the world a grievous personal loss. Nearly twenty-five years ago he published an important paper in the *Journal of Pathology and Bacteriology* entitled "The Genetic and Antigenic Basis of Tumour Transplantation," and having thus defined his chosen field of research he explored it with single-minded devotion and became the leading authority on all that pertains to the serological analysis of transplantation reactions.

Gorer's work was founded on his observation that tumour transplants in mice often evoke the formation of haemagglutinating antibodies. After the war he worked for a time with Snell and his colleagues at Bar Harbor, and there he was able to confirm his belief that in mice some of the genes which determine histocompatibility (i.e., whether or not a graft from a particular donor to a particular recipient will be rejected) determine also antigens responsible for the formation of haemagglutinins. In the course of this analysis he developed an improved technique for the detection and titration of haemagglutinins, and he exploited brilliantly the linkage which he discovered between a histocompatibility gene and another gene, not concerned with histocompatibility, which determined an easily recognizable somatic character. He inclined at first to the view that haemagglutinins played a major role in the destruction of tumour homografts of all kinds, but subsequently concluded that this was true only in the special case of the leukoses, immunity to which, he showed, could be transferred passively by means of serum.

Though he worked primarily with tumours Gorer was interested also in the immunological reaction to homografts of normal tissues, and with some of his colleagues reported that haemagglutinins appeared in the serum of mice which had received homografts of whole skin or epidermis, and in the serum of a young girl who had received homografts of skin from her father. Latterly Gorer devoted much time to studying cytotoxic antibodies and their role in transplantation immunity, and again he greatly improved the technique used for their detection. His most recent work, on the synergistic action of antibodies and sensitized lymphoid cells, represents a most important step towards a unified theory of the homograft reaction.

For a long time the importance of Gorer's work was not fully appreciated by those whose chief concern was with the surgical uses of homografts, though it was clear enough to geneticists and immunologists. In recent years his true stature became recognized throughout the world, but, though he could be trenchant in his criticism of sloppy thinking or of complacent acceptance of the rather inelegant jargon which he nicknamed "transplantese," he remained as modest and charming as ever, a helpful and generous colleague and a stimulating companion. We shall miss him very much.

GEORGE H. STEVENSON, C.B.E., M.C., M.B.
B.Ch., F.R.C.S.Ed., M.R.C.P.Ed., F.R.F.P.S., D.P.H.

Mr. G. H. Stevenson, honorary consulting surgeon to the Glasgow Royal Infirmary, died suddenly on May 8 while on a fishing trip to Melvich, Sutherland. He was 73 years of age.

George Stevenson graduated M.B., Ch.B. at the University of Edinburgh in 1910. He had a distinguished academic career, taking the M.R.C.P. of Edinburgh in 1914, the D.P.H. of the English Royal Colleges in 1913, and the F.R.C.S. of Edinburgh in 1921. From 1914 to 1919 he served with the British Expeditionary Force in France as surgical specialist with No. 2 Casualty Clearing Station. This experience directed and influenced his whole career. He was one of the first surgeons to treat successfully gunshot wounds of the abdomen when multiple resection of small bowel was necessary. When Harvey Cushing arrived in France he gained his initial experience of a casualty clearing station working alongside George Stevenson, whose services

were rewarded by the M.C., the O.B.E. (Mil.), and the Médaille de la Reconnaissance Française.

After the war George Stevenson was sent to Glasgow by the Ministry of Pensions to Bellahouston Hospital, and in 1922 he became a member of the surgical staff of the Royal Infirmary of Glasgow. This was the beginning of a most distinguished surgical career, as surgeon, as clinical teacher, and later as hospital administrator. He was a surgeon of supreme skill who never got into difficulties, and as a general surgeon he achieved notable successes in many branches of surgery. He developed a special interest in orthopaedic surgery and was largely responsible for the development of a special orthopaedic department in the Royal Infirmary. He served on the Fractures Committee of the B.M.A. from 1933 to 1935. With his wide early training he had a clinical judgment that often astonished his colleagues, but he was always keen to make full use of new technical developments in the investigation and care of his patients. As a clinical teacher he was lucid, interesting, and stimulating, so that students were refreshed in their studies. His assistants formed a strong affection for their chief and under his guidance developed a high clinical and technical ability, which has become evident in the large number now holding surgical appointments throughout the world. When the Health Service was started Mr. Stevenson became a member of the first Western Regional Hospital Board, and his wise counsel guided the service over many of the early difficulties.

As consultant surgeon to the Princess Louise Hospital, Erskine, he was able to express his devotion to the war disabled and the warmth and affection which these patients felt for "Stevie" were a response to the skill and untiring work which he lavished on them. He also gave many years of distinguished service to the Scottish Branch of the British Red Cross both as a member of the council and later as chairman of the executive. When the Scottish Branch of the Red Cross decided to name their new training centre at Erskine "Stevenson House," all felt pleasure at this unique recognition. He was promoted C.B.E. in 1958.

With all this work he still found time to enjoy his fishing and shooting and was a keen follower of Scottish Rugby. His family life was important to him, and his juniors enjoyed the happy atmosphere of his home, which they continued to visit during his retirement, often for counsel and advice. Many are sharing the sorrow of his widow and family.

George Stevenson was a distinguished surgeon and teacher and held many important and honourable positions, but the characteristic of the man was the strong affection in which he was held by patients, colleagues, and friends. Sincerely humble and possessing integrity and judgment, he radiated good humour and friendliness, and without looking for it gained the esteem and affection of all. His opinion was valued because it was given without prejudice. His services were sought because his ability was great and he was willing to serve. He was at ease in high council and delightful when he was entertaining friends or playing with young children, but above all he will be remembered with the deep affection which all felt for him. In the end his qualities can be summed up as one who loved his fellow men.—W. R.

J. H. writes: George Stevenson was a well-known and much-loved figure in Glasgow and the west of Scotland. His interests were many, but he applied himself with enthusiasm and generosity to all of them. His patients knew him as a kind and able surgeon, his students knew him as a stimulating teacher, his friends knew him as a keen sportsman. Those of us who were privileged to work closely with him regarded him with deep affection. "Stevie," as we liked to call him, attempted to train us and encourage us when there was less organized training than we know to-day. Surely there can be no greater tribute to a surgeon than to know that he leaves behind a large number of former students and assistants who are proud to have been associated with him.

M. LOEPER, M.D.

Professor M. Loeper, professor of therapeutics in the Faculty of Medicine in Paris, died on April 26 at the age of 85. The doyen of medical editors in France, he was president for many years of the Association de la Presse Médicale Française and was one of the leaders in the revival after the second world war of the International Union of the Medical Press, of which he was also president.

Maurice René Loeper was born in Paris on December 7, 1875. He studied medicine in his native city and graduated there in 1903. As a teacher of therapeutics he directed the medical clinic at the Hôpital St. Antoine, and he was president of the official commission concerned with the therapeutic trials of drugs in France. In 1933 he founded the Union Internationale de Thérapeutique. Since 1912 he had edited the old-established medical journal entitled *Le Progrès Médical*, and, as president of the Association de la Presse Médicale Française (now the Chambre Syndicale de la Presse Médicale Française), he for long exercised a conservative and beneficial influence on medical journalism in France. A few years ago he established a medical organization to provide for the lay press in France reliable information about medical matters. He himself wrote many books and articles, including a textbook of practical therapeutics and pharmacology. Professor Loeper was a Commander of the Legion of Honour and in 1953 was president of the Académie Nationale de Médecine.

RICHARD CASTILLO, M.D.

Dr. Richard Castillo, who was a well-known general practitioner in Chelsea, was found stabbed to death on the night of May 7 in Battersea, where he had apparently been summoned to attend a patient. He was 72 years of age.

Richard Castillo was Maltese by birth and graduated M.D. at the University of Malta in 1913. His subsequent career included a period of service as a ship surgeon with the P. & O. Steam Navigation Co., and he came to practise in Chelsea in 1923 as assistant to Dr. Hamilton, whom he soon succeeded as principal.

D.J.T. writes: It was with sickening sorrow that the Chelsea and Fulham Division of the B.M.A. received the news of the tragic death of Dr. Richard Castillo. He had a large general practice, in which he was held in high esteem and affection by his patients and colleagues: his activities on behalf of his patients far exceeded the requirements of his professional obligations, particularly with regard to the old and the poor. During the war he was in charge of casualty and first-aid work in a mobile unit operating from the College of St. Mark and St. John, and was unsparing in his services for the people of Chelsea. It was during these years—in 1940—that a bomb hit his house, killing his first wife and son: his daughter was buried for four days under the debris, but survived. In 1941 he married again and had a daughter by this marriage.

His appointments included Treasury medical officer, and for ten years after the war he was on the management committee of the Chelsea (Group 4) hospital management committee and later on the house committee of St. Stephen's Hospital. A keen B.M.A. supporter, he regularly attended the meetings of the Chelsea and Fulham Division, and from 1945 to 1947 was its chairman. His contributions to the meetings, which he made with his characteristic staccato authoritative voice, were always valuable, and he had a detailed knowledge of medico-political administration and procedure, which was backed by the experience of having represented Chelsea on the old panel committee before the war. He was a stickler for fair play and for the maintenance of the ethical ideals of the profession, and had a firm Roman Catholic faith which pervaded his whole

professional life. Our deep sympathy goes out to his wife and family.

Dr. J. R. GRANT writes: Dr. Richard Castillo was a teacher in general practice to many young men, of whom I was one. No more admirable example, as a man and as a doctor, could be found to implant that zeal and understanding which is so particular to this field of medicine. These things were evident not only in his practical care of his patients but in his careful, knowledgeable assessment of modern advances in treatment.

As a friend, he was sincere in his interest, the best of company at all times. Very many in Chelsea, both the old and the young, will grieve at the tragic loss his death means to them. Imbued with Christian aspiration, he was regular in comforting the lonely and afflicted in many a crumbling basement room, far over and above the "necessary" call of duty. Despite an exacting life, in which he had known great personal sorrow, he was possessed of fortitude and equanimity. He remains a truly heroic figure in the minds of many of us. He could well say, with infinite meaning, on his last night call, as he lay dying under the stab wounds of an unknown assassin: "I am a doctor." It was his constant thought in life.

D. L. MACRAE TOD, M.B., Ch.B., B.Sc.

Dr. D. L. Macrae Tod, a distinguished graduate of Edinburgh University, died on May 5 in the Western General Hospital, Hull, of which for 32 years he was medical superintendent. He was 66 years of age.

David Livingstone Macrae Tod, a son of the manse, was born at Logie Almond in Perthshire, and educated at Huddersfield College and George Watson's College, Edinburgh. He was a McDougal-Johnstone bursar at Edinburgh University in 1911 and graduated there in arts and science in 1914, being awarded the Newton prize for the most distinguished student in mathematics of his year. In 1915 he joined the Royal Naval Volunteer Reserve as a surgeon-probationer, in which capacity he served for two years with the Grand Fleet and in the Aegean Sea. He returned to Edinburgh on discharge and graduated in medicine in 1920, being awarded the McCosh travelling scholarship. He took a very active part in student life at his university and was not only president of the Union but also senior president of the Students' Representative Council. He also played hockey for Edinburgh University. He had a most retentive memory of his student days and often recalled amusing experiences with such distinguished men as the Earl of Birkenhead, who was "Lord" Rector during his time. After holding the post of house-surgeon at Edinburgh Royal Infirmary he studied and practised surgery in Paris (at the British Hospital there) and also at Berne and Vienna. In 1924 he became resident surgical officer at Bradford Royal Infirmary, after wide experience as a locum tenens in general practice, which he enjoyed greatly.

In 1927 he was appointed medical officer to the board of guardians at Anlaby Road Hospital, Hull, which in time became the Western General Hospital under the National Health Service, and where, as medical superintendent, he did much valuable surgical work and gained the respect and admiration of all the general practitioners in West Hull. In the pre-N.H.S. days he was not only a brilliant surgeon, working with speed and accuracy, but a very able diagnostician. He had a pleasant manner with patients of all types and was truly beloved by all of them. In 1957 he had a serious vascular illness because of which he had to give up driving his car and from which he died after a very short final stage. He retired in 1959. He loved motoring, but his wonderful nature accepted his disability with an equanimity which was typical of him.

He rendered yeoman service to the profession in Hull in many ways. Secretary of the Hull Medical Society for many years, he became its president in 1938. He was a strong supporter of the British Medical Association, and was president of the East Yorkshire Branch in 1945. A prominent Freemason, he was a past master of the

Kingston Lodge and held provincial grand rank, being well known in the North and East Yorkshire Province.

A man of many parts, with a happy wit and a most likable personality, David Tod was loved and respected by people in all walks of life and will be sadly missed. He leaves a widow, who has had a serious illness in the past seven months, and one son, also an Edinburgh graduate, who is in general practice in London.

Dr. D. W. ROBINSON writes: When I first met Dr. Tod I was a raw, newly qualified doctor in 1943 at Western General Hospital, Hull, where he was medical superintendent. He managed to give one confidence, and in my early days taught me a great deal about surgery and medicine. A very human person, he had a great understanding of patients and their needs. He had a keen clinical brain, was an excellent diagnostician, and also an adept surgeon. He was never too busy to listen to patients' problems or those of his junior staff. Dr. Tod will be long remembered by patients, doctors, nursing staff, and all who had worked with him. We shall all miss his presence, and feel we have lost a personal friend. Our deepest sympathy goes out to his widow and son, Dr. David Tod.

CLAUDE LILLINGSTON, M.D.

Dr. Claude Lillingston, who had lived for the past 20 years in Norway, died at his home there on April 23, aged 79. At one time an authority on the treatment of tuberculosis, he later turned to writing as a career.

Claude Lillingston was born on April 29, 1881, the son of the Rev. C. A. Lillingston. His father went to live in Norway, but Claude Lillingston returned to England to study medicine at Cambridge, where he was at Pembroke College, and St. Mary's Hospital. Graduating in medicine in 1906, he proceeded M.D. in 1919. Not long after holding the post of resident obstetrical officer at his teaching hospital he developed pulmonary tuberculosis and was treated in a sanatorium in Norway, where an artificial pneumothorax was induced. At that time this was an unusual form of treatment in Britain, and when Lillingston returned to England he became an exponent of the method (improving the apparatus available at the time), and held appointments at the Berkshire and Buckinghamshire Joint Sanatorium and at the East Anglian Sanatorium.

His health, however, gave rise to some anxiety, and he decided to live abroad and earn what he could by writing articles and reviews for medical journals. For many years he contributed annotations to this journal, commenting on various aspects of the Scandinavian medical scene. He was also the author of a novel which had euthanasia as its theme. For a time he lived in Paris, working for the League of Red Cross Societies, but he returned to Norway before the second world war, and was there during the German occupation. He had been a widower for some years, but he continued until his death to live a rural life at Sunnfjord.

JULIAN TAYLOR, C.B.E., M.S., F.R.C.S. Hon.F.R.A.C.S.

The obituary of Professor Julian Taylor was published in the *Journal* of April 29 (p. 1255).

Dr. LUCY PARKER writes: The staff of Harrow Hospital would like to add a tribute to Professor Julian Taylor. He joined the staff in 1930, and it must have been a difficult appointment because, apart from the consultants, there were over 40 general practitioners on it. However, he soon knew all of us and we all felt that we could call on him for help. For many years he was an active member of the medical committee, and his advice was sound and greatly appreciated. Towards the patients he was invariably kind and courteous, and the nursing staff learned much from him. At the end of the war we welcomed him back, and he resumed all his activities. It was a great loss when he retired in 1955. It was characteristic of him that he took on further valuable work, and we were always interested to hear of his new career in the Sudan.

Medico-Legal

ADVERTISEMENT OF MEDICINES

[FROM OUR LEGAL CORRESPONDENT]

A recent Scottish case illustrates the scope of the safeguards provided by the criminal law to protect the public against certain advertisements of medicines.

Mr. Alick McInnes (formerly a banker in India) and Mrs. Elizabeth Bellhouse (formerly a nurse), both of Braeface, Auldearn, Nairnshire, were charged with offences connected with the advertisement and sale of medicine known as "Exultation of Flowers." This medicine, sold at 14s. 3d. (including 2s. 3d. purchase tax) was said by three analysts to be indistinguishable from tap water. Mrs. Bellhouse said she had sold 22,500 bottles in three years.

Relevant Acts

The two defendants were charged with four offences: first, with having sold the liquid under a false trade description contrary to the Merchandise Marks Acts (this legislation is, of course, not confined to medicines); secondly, with having sold the liquid recommended as a medicine without there being written on the label of the bottle the appropriate designation of the contents, as required by Section II of the Pharmacy and Medicines Act, 1941; thirdly, with having published an advertisement for the liquid in terms calculated to lead to its use for the treatment of human beings for cataracts, diabetes, paralysis, and tuberculosis, contrary to Sections 8 and 10 of the Pharmacy and Medicines Act, 1941; and fourthly, a similar offence in respect of advertisement calculated to lead to the use of the liquid in the treatment of cancer, contrary to Section 4 of the Cancer Act, 1939.

The Pharmacy and Medicines Act, 1941, and the Cancer Act, 1939, each apply both to Scotland and England and Wales. Section 4 of the Cancer Act makes it an offence to publish an advertisement containing an offer to treat, advise, or prescribe for cancer, or to publish an advertisement referring to any article in terms calculated to lead to the use of that article in the treatment of cancer. The Act also prescribes certain defences to such a charge. Among others, it is a defence to prove that the advertisement was published only to members of either House of Parliament or of a local authority or of the governing body of a voluntary hospital or to registered medical practitioners, nurses, pharmacists and authorized sellers of poisons, and persons training to become medical practitioners, etc., or persons carrying on a business which includes the sale or supply of surgical appliances. Further it is a defence that the advertisement was published only in a publication of a technical character intended for circulation mainly among persons of the above classes. Sections 8 and 9 of the Pharmacy and Medicines Act, 1941, make substantially similar provisions (with some differences) in respect of advertisements referring to any article in terms calculated to lead to the use of that article for the purpose of the treatment of human beings for Bright's disease, cataract, diabetes, epilepsy or fits, glaucoma, locomotor ataxy, paralysis, or tuberculosis.

Vendors' Claims

Sales literature was referred to by witnesses as including testimonials from people suffering from a variety of ailments, sinus trouble, blood-pressure, cancer, paralysis, diabetes, tuberculosis, and mental illness. Other literature claimed that Exultation of Flowers improved the yield of farm animals, the quality and flavour of flowers and fruit, and the condition of domestic pets. Witnesses gave evidence of the efficacy of the liquid. Mrs. Bellhouse said that with it use there would be no more war, quarrels or bickering, no disease or pain, no hatred, and no meanness or selfishness. Mr. McInnes said that the liquid was made from 52