

writers whose views are not the same as his own. He is a strong advocate of the prolonged and careful treatment of consumptive patients in their own homes whenever possible, while admitting the excellence of institutional treatment and treatment at sanatoriums. The specific treatment of phthisis with tuberculin does not obtain his support; this potent poison is mostly given, he says, for its psychic effects, and is likely to meet with success only in those forms of phthisis which are spontaneously curable. He finds it gives the best results in intelligent patients who are under the impression that they have mastered the theoretical aspects of infection and immunity and of specific therapy; given in cold blood to unintelligent people, tuberculin, he thinks, rarely does any good. The general practitioner, according to Professor Fishberg, should not use tuberculin at all. A full account of the pneumothorax treatment of phthisis is included. The book covers the whole ground of the subject of pulmonary tuberculosis, and contains plenty of sound advice on many practical points in diagnosis and treatment. It is, perhaps, a little long, and perhaps also a little overweighted with scientific and theoretical data that do not appeal directly to the practical man and are not of immediate applicability. These faults, however, if faults they be, are faults on the right side.

Dr. LAWRASON BROWN's little book of *Rules for Recovery from Pulmonary Tuberculosis*⁵ gives an admirable account of what a phthisical layman should learn to do and to avoid in the treatment of his disease. It is short, explicit, easily intelligible, and yet thorough. It is a book that may safely be placed in the hands of consumptives and those who have charge of them.

AT THE WAR.

LORD NORTHCLEFFE's book, *At the War*,⁶ is something of a surprise in appearance—a substantial octavo of some 300 pages. Opening it at hazard, we light on the phrase, "Our soldiers are individual. They embark on little individual enterprises"; and, in a way, this may serve as the keynote of what is said in the first part of the book of the British soldier, his deeds, and his leaders. Individuality ordered, but not crushed out, by discipline. The idea comes out in the chapter on the war doctors. Lord Northcliffe has watched them from the dressing dug-out in the trench to the base on the northern French coast, and on to the hospital ship, and he finds one continuous enthusiasm throughout the medical service. Many of us have read, when it was first published in the *Times*, his fine tribute:

"If there be degrees of chivalry, the highest award should be accorded to the medical profession, which at once forsook its lucrative practices in London, or Melbourne, or Montreal, in a great rally of self-sacrifice. The figures of the casualties among them bring home to those who have only the big hospital idea of the war doctor, sad facts that should lead to due understanding of this not sufficiently known but veritable body of Knights in the Great Crusade."

The chapter on the medical service is appropriately followed by a sympathetic account of the Red Cross organization, and its many activities at home and abroad, including its search for the "missing"; only those who have received that intimation concerning some one near and dear to them can know how the agony of suspense is in some sort relieved by the thought that a well planned organization is searching. The penultimate section of the book describes the Italian operations which ended in the winning of Gorizia and the fighting in the mountains to the west of Cadore and the Dolomites, the last chiefly with German activities in some neutral countries. But we will turn back to one of the earliest chapters, headed "Joffre." There is no man whose name is better known the world over to-day, but few of whom it has proved more difficult, in spite of many articles in British

and French papers, to get any steadfast picture. Lord Northcliffe gives one in a few words which seems to fit the man with the great grey head, the iron chin, the kind—rather sad—eyes, in his loose pale-blue tunic, 'speaking slowly, and with no more gesture than a Scotchman, in the rich accent of the Midi.'

The book would be well worth buying for itself even were not all profits from its sale to be given to the Joint War Committee of the British Red Cross and the Order of St. John.

NOTES ON BOOKS.

THE third edition of Sir ARBUTHNOT LANE's well-known monograph on *Cleft Palate and Hare Lip*⁷ gives a full account of his views on its operative treatment, with details of the technique he has found it best to employ. A chapter by Mr. MacMahon describes the training in speech advisable in these cases, and Mr. W. James gives a description of the dental treatment of patients with cleft palate, whether they have been treated by operation or not. The book is excellently illustrated, and may be recommended to the attention of all those who have to deal with these difficult cases.

The second series of the late Sir T. LAUDER BRUNTON's clinical and experimental *Papers on the Circulation and Respiration*⁸ contains sixty-eight articles that appeared in various British and Continental medical and scientific journals between the years 1883 and 1915. Thirteen of them were first published in the BRITISH MEDICAL JOURNAL, the last of them some four years ago. Most of these papers deal with questions of practical medicine, and exhibit the way in which the results of physiological and pharmacological work have been brought into relation with treatment. The volume is well got up, and is furnished with excellent indexes. Its perusal throws a vivid light on the mental activity of its author, the thoroughness of his scientific work, and the ready skill with which he brought both theory and science into line with medical practice. It should appeal to a wide circle of readers.

Mr. B. D. JACKSON's *Glossary of Botanic Terms*⁹ provides scientific readers with a most serviceable dictionary, giving brief definitions of some 21,000 of the scientific terms used by botanists of every kind. Derivations of the terms are commonly given; sometimes, too, the names of their inventors or users. To botanists, particularly those who find a difficulty in the spelling or pronunciation of the monstrous and often hybrid terms employed, the book should be invaluable. It is apparently the ecologists who are the worst offenders in the matter of inventing new botanical terms; even Mr. Jackson has struck at the inclusion of the compound word "carex-sieversia-polygonum-coryphium," or its vernacular equivalent "the sedge-smartweed-Alpine meadow formation."

⁷ *Cleft Palate and Hare Lip*. By Sir W. Arbuthnot Lane, Bt., M.S., F.R.C.S. Third edition. London: Adlard and son, 1916. (Roy. 8vo, pp. 102; 57 figures. 10s. net.)

⁸ *Collected Papers on Circulation and Respiration*. By the late Sir T. Lauder Brunton, Bt., M.D., LL.D. Edin. and Aberd., M.D. Hon. Dublin, F.R.C.P., F.R.S. Second Series: *Clinical and Experimental*. London: Macmillan and Co., Ltd. 1916. (Demy 8vo, pp. 830; 256 figures. 5s. net.)

⁹ *A Glossary of Botanic Terms, with their Derivation and Accent*. By B. D. Jackson, Knight of the Polar Star, Hon. Ph.D. (Upsala). Third edition, revised and enlarged. London: Duckworth and Co.; Philadelphia: J. B. Lippincott Co. 1916. (Post 8vo, pp. 438. Price 7s. 6d. net.)

NURSES' REGISTRATION.

WE have received from the honorary secretaries of the Central Committee for the State Registration of Nurses a long statement concerning the negotiations between that committee and the College of Nurses, Limited, with the object of drafting a conjoint nurses' registration bill. We have also received a letter from the officers of the Royal British Nurses' Association, stating that they are not in agreement with several of the statements published in the first-named communication, and protesting against its publication. In the circumstances, it seems sufficient to print the concluding part of the statement of the Central Committee for the State Registration of Nurses, which defines its present attitude:

"At its meeting on September 28th the Central Committee resolved to inform the council of the College [of Nursing]

⁵ *Rules for Recovery from Pulmonary Tuberculosis: A Layman's Handbook of Treatment*. By L. Brown, M.D. Second edition, thoroughly revised. Philadelphia and New York: Lea and Febiger, 1916. (Cr. 8vo, pp. 188. 1.25dols.)

⁶ *At the War*. By Lord Northcliffe. Published for the Joint Committee of the British Red Cross Society and the Order of St. John of Jerusalem by Hodder and Stoughton, London, New York, and Toronto, 1916. (Demy 8vo, pp. 296; 1 portrait. 5s. net.)

that if four amendments which were set out were not adopted by the College, the committee would not continue negotiations, but proceed with its own bill. This was without prejudice to the further consideration of minor amendments.

"The four amendments to which the Central Committee attached so much importance were those relating to the constitution of the provisional and permanent nursing councils, to the registration of nurses in practice at the time of the passing of the Act, and to the qualifications of nurses after the passing of the Act. The committee was of opinion that there was no guarantee that either of the nursing councils formed in the manner proposed by the council of the College of Nursing would be representative of the interests concerned, and therefore desired to have it plainly stated in the bill what bodies should appoint or elect the members of the provisional and permanent councils.

"In respect of the other two points, the Central Committee was of opinion that the clause in the bill of the College of Nursing relating to the nurses in practice at the passing of the Act was not satisfactory, in that the conditions for admission to the *Register* are not explicitly stated, and that the clause which specified the conditions of registration of nurses after the passing of the Act was too vague, as it did not enforce any hospital training or examination before registration.

"There is, moreover, the fundamental objection in the bill of the College that a voluntary college is to be associated with a statutory council. It is one thing for the College of Nursing to be represented on a statutory general nursing council; it is quite another for the Council of the College to be the General Nursing Council.

"As in the communication received from the College it did not signify its agreement to the amendments considered essential, the Central Committee, at its meeting on October 21st, reaffirmed its intention, by a majority of 20 to 2, to proceed with its own bill, in connexion with which it considered, and agreed to, certain amendments in order to bring it up to date, and reaffirmed the fundamental principles as follows:

"1. That provision should be made for a statutory general nursing council to regulate the qualifications of trained nurses and provide for their registration.

"2. For direct representation of the nursing profession on the General Nursing Council, and the insertion in the bill of the authorities empowered to nominate the Council.

"3. For a three years' term of grace, after the passing of the Act, for the registration of nurses in practice—who hold a certificate of training, or produce evidence of training satisfactory to the council—without further examination.

"4. For the provision at the expiration of the said term of grace that a nurse must have had not less than three years' training under a definite curriculum prescribed by the council in the wards of a hospital, or of hospitals, approved by the council, and that such person must have passed such examination as the council may prescribe."

MOTOR NOTES FOR MEDICAL MEN.

By H. MASSAC BUIST.

THE PROBLEM OF CAR REPAIRS.

It was at the least unfortunate that the latest order issued by the Ministry of Munitions concerning car construction and repair for other than munitions work could not have given a greater margin of time, that medical men in particular might have had the opportunity to get their cars put thoroughly in order before the coming into force of the prohibition on November 22nd last. As it was, there was not sufficient grace for attention to be drawn to the matter in the press, and for arrangements to be made to put repair work in hand before the prohibition order came into operation.

In its effect on the construction and erection of new cars it is of practically no importance to the medical man, because he either owns a car, or, at a pinch, can buy one example or other of the imported varieties, stocks of which are still in the country; or, again, he can pick up a second-hand car.

But in the matter of repairs and the obtaining of spare parts the situation affects him very seriously, for he has the hardest season of the year to face.

WHAT THE SITUATION HAS BEEN.

When the problem of getting repair work and spare parts was placed on behalf of the British Medical Association before the Ministry of Munitions, the reply (September 15th, 1916) was to the effect that a certain doctor about whom inquiry was made had been

authorized to place his order for spare parts required for his car under Class "B" for the purposes of Circular L. 33, that is, he has been authorized to inform the . . . company that the execution of his order is necessary for the efficient conduct of the war. . . . When doctors apply to this department, assistance, so far as possible, is always given them to obtain prompt execution of the necessary repairs to their cars, and that therefore medical practitioners already receive special consideration in respect of repairs, just as they do in respect of the supply of petrol.

But by October 17th the same department wrote:

I regret that it is impossible to class your repairs to Dr. —'s car as war work. I enclose, however, a Priority Instruction Class 5, which gives the order preference inside Class "B." Beyond that I regret that it is impossible to go.

How this works out in practice in the average case in face of the actual situation in which the manufacturer finds himself I shall discuss in a moment. In the meanwhile, apropos of the latest order which is the subject under discussion, on November 16th, 1916, before it came into operation, the following notice was issued to clerks of Insurance Committees in Scotland by the secretary of the Insurance Committee in that country:

I am directed by the Scottish Insurance Commissioners to inform you that, their attention having been directed to difficulty experienced by medical practitioners in obtaining spare parts for "Ford" motor cars, they communicated with the Munitions Department, by whom the supply of these spares is controlled, with a view to securing preferential treatment for doctors. The Munitions Department, in cases where a doctor makes application to them, will give him the grade of priority entitling him to preference over orders placed for spare parts for commercial vehicles other than those directly and continuously employed on munitions work.

At the time these notes leave me I am not informed whether that notification is to be taken as applying to Ford cars only. The present situation is open, and leaves the matter in doubt inasmuch as that make of vehicle is said to be so largely used by doctors in Scotland that, perchance, the Insurance Commission may not have thought it worth while to say anything about other cars. Against this, however, is the fact that, as to the manufacturing parts proposition, the Ford enterprise is not at all on all-fours with other motor firms in these islands.

In England nothing seems to have been done in the general way; albeit, a certain number of applications from individual doctors have been forwarded, through the Medical Secretary of the British Medical Association, to the Director-General of Munitions. In most cases, if not in all, a permit was eventually issued. But all this is prior to the coming into operation on November 22nd of the latest series of regulations, and refers only to such cases as I have cited under dates September 15th and October 17th last.

The memorandum of the Ministry of Munitions on "New procedure affecting supplies of materials," which is addressed to firms, states that,

as a general rule, the customer should make the application for permission, classification, or priority, and not the stockholder or manufacturer of the materials. Such applications, giving full and precise particulars of requirements, together with a brief statement of the purpose for which the goods are required, and reasons in support, should be made to the Director-General of Munitions Supply, Priority Branch, Whitehall Place, London, S.W.

HOW THE PROHIBITION OPERATES.

In the meantime let us consider the new situation created by the latest regulation, bearing in mind that, in any case, the issue of a permit is one thing, and the actual getting of the job done is another. The granting of a permit to every applicant would be no guarantee whatever that the holder of the permit could thereupon get the given work executed.

Therefore, to trace the operation of the latest rules to their source, we must perforce begin with the position of the manufacturer. In this country his establishment is of course a controlled one. That means that representatives of the Ministry of Munitions or, more probably, officers of the services, are resident in charge. Their instructions