

found in the list. The net results of this study I venture to submit for your consideration. They are as follows:

1. Majors R.A.M.C. average greater length of service than majors in other corps of an allied kind, besides being older in years.
2. Some fourteen or fifteen A.M.S. colonels are being retained in the service beyond the time limit for this grade.
3. From the Medical Department list as a whole have disappeared the names of a considerable number of men, from among whom it seemed certain that several major-generals and probably a D.G. would sooner or later be chosen.

To put these facts in another way: (a) During the war a large number of senior officers were either brought back or retained beyond their time, and thus blocked promotion to substantive rank of the men below them. Now, four years later, and without any equivalent reason, a like condition still obtains. (b) This accounts for the exceptional oldness in the service of majors R.A.M.C., and explains the close approach to retirement age of sundry men above them. (c) Blockage of promotion means more than disappointment to individuals; it also spells possible grave loss to the service by some of those individuals (who may be officers of a specially desirable type) being led to resign. Some men of this order, including one or two whom I should class as brilliant, have in fact already left.

But this is not the only undesirable circumstance. Promotion above the rank of major and above the rank of lieutenant-colonel and colonel depends on "selection." Every officer can tell to a second the date on which his "batch" is due for promotion if there be no blockage and if no one is "passed over" or removed by death; but I have never yet known one who could predict how the selection factor would work out. In fact, no one in the service knows in what direction or directions he must shine if he hopes to obtain the votes of the selection board which will eventually decide his fate. The general impression seems to be that the essential thing is to have served under one or more members of the board and to have got on with them; in short, that promotion goes largely by favour. Without accepting this view I yet express a doubt as to whether even the board itself could state offhand to what touchstone or touchstones it applies the records of the officers concerned. Are they wide general experience? or success in administrative or executive positions in peace times, or the same on active service? or exceptional knowledge of some clinical, laboratory, or other special branch of work? or knowledge of languages? or a capacity for getting on with one's fellows?

It appears to me that in all public services in which promotion is by selection—and of these there are several—the points on which promotion depends ought to be thoroughly well known to every officer from the beginning of his career.

Finally, so far as the R.A.M.C. is concerned, I suggest that although it is a very popular service at the present time, and one of which most of us are proud, it will not so remain if the condition of matters herein described continues for any considerable further period. The existing blockage should be cleared away forthwith, and the R.A.M.C. should set an example to all other public medical services by making known what are the points that count officially when selection is in question.—I am, etc.,

September 17th.

G. N. STEPHEN.

THE DETERMINATION OF SEX.

SIR,—Interest in the determining factor or factors in the production of sex naturally never wanes, and from time to time a new idea is mooted or an old one resuscitated. Some suggestions, such as that ova proceeding from a right ovary alone produce males, have been definitely disproved by observation, and others—for example, that the provision of an abundant supply of a particular form of nourishment to the mother will determine the sex of the embryo—are *prima facie* unlikely.

We may expect that in the production of sex it is inherently probable that the male will play as vitally important a part as the female, and both of the above suggestions are manifestly defective in allowing no part to the male.

Moreover, it is also to be anticipated that some natural law or laws will underlie the determination of sex, and further that such law or laws will act towards the equalization of the number of the two sexes.

For a long time past it has seemed to me that one simple suggestion, which I have not hitherto seen noted, fulfils the before-mentioned conditions, and it might be shortly stated as follows: That in the reproductive process each sex tends to

reproduce its opposite, the resultant of the strife between the two being the manifestation as to which had gained the upper hand. Thus if a male child results then the ovum has proved the stronger, and vice versa.

If my surmise is correct, and such a law does exist, then our interest would be more advantageously concentrated on finding out and investigating the factors which make for strength and for the gaining of the mastery. These factors are doubtless numerous, and possibly complicated, but my own observation leads me to believe that they will include not only such points as physical build and condition or acquired or inherited powers or weaknesses, but also such questions as relative age of the parents.—I am, etc.,

Manchester, Sept. 22nd.

R. W. MARSDEN, M.D.

ALOPECIA AREATA AND STRABISMUS.

SIR,—Dr. Goodwin Tomkinson has given us in your issue of September 16th, 1922, a most interesting family group of cases in which alopecia areata is linked with strabismus, the latter condition having been investigated by Dr. Hislop Manson.

To some of us who have followed Dr. Inman in his association of strabismus with a personal or family history of left-handedness or stammering, the record is of great importance. Dr. Inman has not selected at random certain eccentricities of childhood for special inquiry, but he has grouped a class of defects which he believes to be of psychological import.

It is clear from Dr. Tomkinson's cases that there were other psychical symptoms among them, the mother having suffered from "bilious" headaches, possibly migraine, as well as anaesthesiae; five children also are stated to have been "nervous" and one a somnambulist. These indications are most suggestive. Obviously there is a line of research opening up which may yield valuable results if the various branches of the profession will contribute from various sources their experience as to analogous cases.

There is little doubt that if the cause is, as we suppose, psychological it should be dealt with by psychological methods; a great opportunity opens for practitioners who employ psychotherapy to find a solution of the problem.—I am, etc.,

London, E.C., Sept. 20th.

CHARLES F. HARFORD.

PSYCHO-ANALYSIS.

SIR,—The letter of Dr. Johnstone (p. 578) illustrates very well my point as to the necessity of educating the medical profession in the principles underlying modern psychotherapy.

Apparently he sees no difference between psychology as taught fifty years ago and the teachings of to-day, and it would take far more space than you could allow me to endeavour to bring his conceptions up to date. One cannot argue with a person who understands by the unconscious "the part of the brain for the moment inactive" as one would not be speaking the same language. The unconscious is dynamic, not static.

With regard to the possibility of the patient bringing hypothetical dreams to the analyst, this would not matter in the least as the patient's inventions would be the outcome of his mental processes exactly as are genuine dreams. As a matter of fact we sometimes ask our patients to invent dreams when they can produce no other material. I think Dr. Johnstone will agree that the inventions of a poet or a novelist must bear a direct relation to the author's psychological make-up, and the same is true of everyone.—I am, etc.,

R. MACDONALD LADELL.

Wylde Green, Birmingham, Sept. 23rd.

BACTERIAL FILTRATION.

SIR,—It has occurred to me that your readers might be interested to hear of a cheap and rapid method of filtering fluids containing bacteria in suspension.

Take an ordinary filter funnel, fold two thicknesses of stout good filter paper and almost fill up with clean sand (washed several times in a pan). Pour in water to make the sand settle down firmly and until the filtrate is colourless. (The colour is due to sand in suspension, fine enough to pass through the filter paper.) Scoop a cone in the firm sand, pour in the fluid cautiously so that