

Council of France. One conclusion which this body has reached is that the organization of medical attendance is defective in many regions, and needs what in the business sphere is called rationalization. Not only are medical resources unequally distributed, but the cost of them is not well proportioned as between rich and poor. In some areas doctors and clinics are overworked, and in others they are idle. It is therefore recommended that the Health Organization, with the collaboration of the International Labour Office, should devote itself to a study of the best means of procuring for the different populations a rationalized and economic system of medical attendance.

It is stated that the cost and prescription of medicines might be placed on a better economic basis, and to this end doctors, pharmacologists, pharmacists, and patients might co-operate to prevent extravagance. Immediate action is called for against quack and secret remedies, which, it is pointed out, create a prejudice ultimately in the minds of the public even against sound therapeutics. In present social and economic conditions compulsory insurance is regarded as the most rational means of organizing the protection of the masses of the workers against disease. It is also felt by this same expert committee that some reduction should be made in hospital building and equipment, which might well be more precisely calculated and co-ordinated in advance. There should be stricter co-operation between hospitals and public assistance authorities and between the staffs of hospitals and general practitioners. It is, further, the opinion of those who have been considering these questions that the attention of medical students might be drawn to the economic repercussions upon the exercise of their future profession. Finally, the experts recommended the setting up of national committees, where these do not exist already, and, where necessary, regional or local committees, charged with the duty of surveying the organization of health services according to a prepared plan so as to realize public economies while maintaining the necessary level of efficiency.

DEBATE IN THE ASSEMBLY

The work of the Health Organization was discussed on the fourth day of the Assembly, in the Commission dealing with the technical organizations of the League. It was opened by the representative of the British Government, Mr. Douglas Hacking, M.P., Parliamentary Under Secretary for the Home Office, who, after saying that the British experts had been happy to participate in the work, raised mildly the old cry of economy, which every League project has to encounter. The financial situation, said Mr. Hacking, should induce the Health Committee carefully to examine its programme with a view to retaining only the more important tasks. He considered the work undertaken on the effects of the economic crisis on public health (alluded to above) to be one of the less essential activities. The work was based on the assumption that unemployment had affected the public health, but such was not the case in the United Kingdom, where no limitations had been imposed on public health and social protection, and he thought the same must be true of other countries.

Professor Gallavresi (Italy) also said that it could not be maintained that the crisis had lowered the level of public health in his country, though it had rendered necessary a more sustained Government support of the working population. The Italian Government, he added, had organized an extensive campaign against malaria, and in this connexion had received valuable League support. An institute for instruction in malariology was to be established in Rome. M. Neculcea (Rumania) said that infantile mortality was still high in his country, and the Rumanian Minister for Public Health had invited the assistance of the League in determining its causes. The results had led his Government to extend the inquiry to the whole country and to adopt certain preventive measures. Mr. H. T. Andrews (Union of South Africa) thanked the Health Organization for the way in which it had conducted a Health Conference at Capetown last November, under the chairmanship of Sir George Buchanan. Valu-

able results had been achieved in respect of yellow fever, plague, and small-pox.

The representative of the Irish Free State, Mr. Seán O'Kelly, joined in the tributes. Ireland, he said, had suffered severely from diphtheria and tuberculosis, but the incidence had lately much decreased. The economic crisis had not, in his country, had any deplorable effects on public health. Next came China, in the person of Mr. Hoo Chi-tsai, who commended the Health Organization for accepting the one new task—namely, the inquiry into the effects of the economic crisis, on the value of which the British representative had thrown some doubt; and the report was adopted for submission to the plenary meeting of the Assembly after some observations had been made by the chairman of the Commission, Count de Wiart of Belgium, who said he was glad to note that, in spite of the crisis, the efforts made in the field of public health had not been restricted in the majority of countries.

MATERNAL MORTALITY AND MORBIDITY

PROFESSOR MUNRO KERR'S SURVEY

The voluminous and imposing monograph upon maternal mortality and morbidity which comes from the pen of the Regius Professor of Midwifery in the University of Glasgow (Professor J. M. Munro Kerr)¹ will command the immediate attention of all who are interested in the subject, and much will be expected from the work of so eminent an authority. The combined subjects cover a very wide area, and connect at numerous points with medicine, surgery, and public health; they are therefore not perhaps ideal subjects for a monograph, which is best adapted for a compact and well-defined subject. The author does not appear to have initially defined his limits with precision; one may almost guess that, in the writing of it, the work grew by accretion rather than by development, and it eventually proved difficult to decide what to include and what to reject. Accordingly we find sections dealing with neo-natal mortality and morbidity, general practice and the medical curriculum, the design and organization of maternity hospitals, and the transport service, all matters which can only be regarded as rather remotely ancillary to the author's main purpose. Interesting and informative in all he writes, Professor Munro Kerr might, by greater concentration upon essentials, have given us a book which would have been a daily guide and counsellor rather than a somewhat ponderous work of reference. There is, however, no doubt that it will prove a storehouse of information for future workers in many departments of the subject, and in many lands.

The book is divided into four parts—causes, prevention, services, and organization. The opening chapter, from the pen of Dr. P. L. M'Kinlay of the Scottish Department of Health, deals with the general conditions affecting puerperal mortality. A series of charted maps has been prepared showing the distributional variations in the maternal mortality rates in England and Wales and in Scotland; they are most interesting, but apparently little light can yet be thrown upon the causes of the wide variations to be found within the limits of Great Britain. There is also reproduced the map prepared by Cullingworth in 1897, and familiar to a previous generation, showing the varying rates of maternal mortality in the London parishes during the period 1891-5. This is now of historical interest only; but if the author had prepared another map showing the rates prevailing in the London boroughs at the present time, the comparison, though not exact, would have been of great value as demonstrating the changes which forty years of effort have

¹ *Maternal Mortality and Morbidity*. By J. M. Munro Kerr, M.D. Edinburgh: E. and S. Livingstone. 1933. (Pp. xviii + 382; illustrated. 25s. net.)

produced. Reference is made in this chapter to the fact, previously noted by Stevenson and others, that the maternal death rate is definitely higher in the spring, autumn, and winter than in the summer, and on page 22 a graph is given showing the "seasonable [sic] distribution" of deaths from puerperal sepsis and other causes of maternal mortality. Reference is also made in another connexion (p. 86) to the work of King, who showed that in the Jessop Hospital at Sheffield the number of cases of sepsis due to *S. haemolyticus* admitted during the first and fourth quarters of the year represented 70 per cent. of the annual total. It seems clear that the effect of climatic conditions upon maternal mortality has not yet received the detailed consideration which it deserves.

Professor Munro Kerr's examination of international statistics has led him to the encouraging conclusion that our apparent failure to reduce maternal mortality in recent years is in reality to be explained by "a progressive advance to exactness in notification." He says, "It is inconceivable that there should have been no improvement." To cheer us up still further he points out that the unfavourable comparisons which have been drawn between ourselves and certain other European countries are fallacious in the case of all but Holland, by reason of dissimilarities in the statistical methods employed.

The causes of puerperal fever and puerperal pyrexia are exhaustively discussed, and this section will fully repay close attention. In dealing with the influence of obstetric operations upon mortality, the author makes the pertinent observation that "in the hospitals of many smaller cities and towns obstetric operations are being performed by members of the visiting staff . . . who have had little training in obstetrics." It is not only in such hospitals that obstetric operations are unskilfully performed, and reference is necessarily made to the results of misuse of the forceps in private practice. A table of "failed forceps cases" (from a number of large maternity hospitals) is given on page 51, showing an average case mortality of 12 per cent. It is to be regretted that the truly barbarous term "failed forceps case" should have been so universally accepted by obstetric writers in this country. The use as an adjective of the past participle of an intransitive verb is unpardonable; who would think of using the converse term, "succeeded forceps case"? As members of a learned profession obstetricians should recognize the necessity of observing grammatical principles when inventing new names.

Under "Prevention" the author deals very fully with ante-natal care and with the management of labour, rather in the manner of an advanced textbook. The views expressed with regard to the antiseptic ritual to be observed are in accordance with recent advances in this department of technique. It is of interest to note that while the use of gauze masks is insisted upon, the impermeable layer, so strongly advised by the Departmental Committee, is regarded as unnecessary. Further, we are told that it is "ludicrous to talk about masks for midwives" in view of their inadequate training and discipline. This statement may be expected to cause some heart-burning at the Midwives' Institute. The sections dealing with services and organization take up about one-third of the book, and are packed with information which has clearly been collected with much care and labour. The results of his review of the available data with regard to domiciliary midwifery are formulated in a series of "conclusions" which are very clear and helpful. With regard to midwives the very sensible view is expressed that it is better for them to be attached to institutions than to practise privately, and in order to attract suitable women the following suggestions are made: (a) to restrict

the supply of midwives; (b) not to insist on a general training; (c) to guarantee an adequate salary, comfortable quarters, and a pension. This may be expected to disperse the heartburn at the Midwives' Institute.

The last subject to be discussed is a national maternity service, but it is impossible within the space at our disposal to indicate the multifarious points of interest which are raised. We commend this section to the notice of all who are specially interested. In this connexion Professor Munro Kerr's article in the *British Medical Journal* of May 20th may be recalled, and the memorandum by the Glasgow Division of the British Medical Association, published in the *Supplement* of June 10th.

The outstanding feature of the whole book is the mass of statistical information, which has been compiled and arranged in fifty-one numbered tables and in a large number of unnumbered tables. These will prove invaluable to other workers, but is it not the case that to many readers a table acts as a stumbling-block? While a graph explains itself a table often needs to be explained. To the writer of this review the short table on page 221, presenting data published by Guggisberg, is frankly incomprehensible. Table XV gives the causes of death in the Glasgow Maternity Hospital during the period 1926-30; on the authority of this table it might be stated that 26.8 per cent. of the mortality in that hospital was due to sepsis. This would, in fact, grievously disparage the work of a famous institution, but if the cases had been divided into "booked" and "emergency" cases the results would appear in their true proportion. On a different point, it is perhaps legitimate to inquire: Is "contracted pelvis" a cause of death? (p. 49).

If in conclusion we point out that there are in this work certain internal evidences of hurried preparation, it is in no captious spirit, for the reviewer cannot fail to sympathize with an author who undertakes such a formidable literary task as this in addition to the onerous duties of a professorial chair. In the section on abortion, when dealing with its ethical aspects, one of the four methods by which it is stated that pregnancy may be prevented is "by a modification of the Act governing the induction of abortion." This is not a mere error of detail, but a conspicuous instance of confused thinking. Ungrammatical sentences can be picked out here and there—for example, a plural subject with a singular form of verb, or the converse. Such terms as "pituitarin" and "shaving the pubis" have slipped the attention of the proof-reader. A first edition is seldom free from such errors, and we can heartily congratulate the author on having rendered a conspicuous service to his subject.

The Eugenic Law, passed in Germany on July 14th and coming into force in the New Year, ordains that persons suffering from hereditary diseases, such as congenital mental deficiency, schizophrenia, manic-depressive insanity, hereditary epilepsy, Huntington's chorea, severe hereditary deafness, and severe alcoholism may undergo sterilization on application of the patient himself, or, if he is irresponsible, of his legal representatives. Sterilization may also be proposed by the official medical officer or the director of a prison hospital or other institution for the inmates. The operation of sterilization is authorized by a special court, whose sittings are held *in camera*. The court consists of a magistrate, an official doctor, and another practitioner who has made a special study of eugenics. The operation is carried out in a German hospital by a doctor registered in Germany, at the cost of the insurance office or public assistance. Secrecy is to be observed by all concerned in the operation under penalty of one-year's imprisonment with a fine.