

The plain truth is that the Act was passed with one particular purpose in view. The Common Law contains a peculiar doctrine that the right of personal action dies with the person. The result was that when a negligent motorist injured someone and was himself killed in the accident the injured party had no redress. He could not sue the estate, and he could not even recover from the negligent one's insurance company. The Act sets right an intolerable injustice. It is a principle of law to give the same rights to both sides, and so the Act allows the personal representatives of an injured person who has died to sue in his place, but has very closely limited their right to damages—so much so that negligence actions by personal representatives are likely to be few and far between.

It is always possible to construct theories from legal doctrines and enactments, just as it is from philosophical premisses, but such inventions commonly have little if any relation to practical affairs. They are unfortunate when they tend to frighten unnecessarily a body of deserving persons who already have to face more than their share of real legal danger.—I am, etc.,

London, E.C., Oct. 23rd.

D. HARCOURT KITCHIN.

### Publicity

SIR,—As one who has received a large amount of publicity in the lay press, may I say that so far as I know I have never been one penny the richer on account of it so far as my medical practice is concerned. I fully agree with Dr. Frank G. Layton that we are all guilty in one way or another of seeking publicity, and that, so long as a man does not profess to have some special treatment which he alone is capable of administering, it is all completely harmless.

Let us clear our minds of cant on this topic. Every article in the *B.M.J.* is an advertisement, intended to be read by the profession. These articles, and the personal recommendation of satisfied patients, are the only form of publicity that is likely to increase our incomes. Yet the *B.M.J.* is read by thousands of lay men and women throughout the country. It is one of the most popular journals in the free libraries, and anyone who has ever visited these public reading-rooms must have noticed old ladies poring over your columns for hours. If the *Journal* is only intended for the profession, why allow it to be circulated in free libraries? But for the old ladies many of us, by using the free libraries, might save our subscription to the Association; and if the old ladies are allowed to read the *B.M.J.*, what possible objection can there be to the newspapers selecting from your columns any matter that they consider to be of general interest to their readers?—I am, etc.,

London, W.8, Oct. 19th.

HALLIDAY SUTHERLAND.

\*\* However much some medical men might wish us to do so, we cannot control the newspapers or the public libraries or the old ladies.—ED., *B.M.J.*

### Whither General Practice?

SIR,—I would like to thank Dr. W. Savile Henderson for his letter in the *Journal* of October 20th (p. 742) and for ventilating what, I think, is a very general abuse. I may say that I have had an almost identical experience with the one he describes in Case 1, and, like him, received the same reply when I complained to the authorities. I have also had complaints from patients about welfare workers trying to force their way into the house to give advice on a variety of medical subjects without my knowledge or consent, and have been asked, indignantly, if I had sent them. This state of affairs

causes a loss of confidence between the family doctor and his patients.

I would like to suggest that the authorities should issue a strongly worded standing order to all welfare workers, that they must call on the doctor *before* they visit any of his patients, and discuss the case with him first. I have never had the courtesy of a visit from the welfare worker.—I am, etc.,

RUPERT PALMER, M.R.C.S., L.R.C.P.

Lydd, Kent, Oct. 21st.

SIR,—We must all sympathize with Dr. Savile Henderson in his discovery that not only lower-class but also middle-class patients are being inveigled away from the general practitioner to the public clinic, and in his plea for a remedy.

If Dr. Henderson read the report of the discussion at the Annual Representative Meeting at Dublin last year (*Supplement*, August 5th, 1933, p. 86) he will remember that it was stated there (by a member of Council) that infant welfare was educational work, and could not be done in general practice. So if Dr. Henderson accepts this view he will sit down and rejoice that the work which a mere general practitioner was unwisely attempting is being taken into the hands of people more competent to perform it.

If, on the other hand, as appears from his letter, Dr. Henderson does not adhere to this mediaeval theory, then he may accept my suggestion (*Supplement*, July 14th, 1934, p. 33) that the general practitioner is actually the person in the best position to undertake infant welfare, and let his patients know that he is able and willing to give them all that the public clinics can offer them as regards infant welfare. If he does, then I am sure that he need not fear the competition of the local authority.—I am, etc.,

London, S.W., Oct. 22nd.

F. GRAY.

### Correction of "Medical Register"

SIR,—I am desired by the Returning Officer to say that voting papers for the purpose of the forthcoming election of a direct representative to the General Medical Council were issued on October 23rd to all registered medical practitioners having registered addresses in England and Wales; and that the authorities of the Council would be glad if every such practitioner who has not received a voting paper would communicate immediately with the Office of the Council (44, Hallam Street, London, W.1), whether or not he proposes to vote in the election, in order to ascertain that his address is correctly entered in the Medical Register.—I am, etc.,

MICHAEL HESELTINE,

October 24th.

Registrar, General Medical Council.

### Universities and Colleges

#### UNIVERSITY OF OXFORD

At a congregation held on October 18th the following medical degree was conferred:

B.M.—G. H. Buck, J. P. Dewsbury, C. M. Vaillant, A. B. Stokes.

#### UNIVERSITY OF CAMBRIDGE

The Vice-Chancellor announces that Sir Percival Horton-Smith Hartley, M.D., sometime Fellow of St. John's College, has conveyed to him through the good offices of the Regius Professor of Physic his desire to make over to the University, for the further endowment of the Raymond Horton-Smith Prize, securities producing an income of £20 a year. The foundation of this prize, for the best M.D. thesis in each academic year, is recorded on page 339 of the *Historical Register*. Sir Percival is the eldest son of the original donor and a brother of Raymond John Horton-Smith, whom the