

Call for a Whole-hearted National Effort

Finally, Dr. Stallybrass spoke of the immense field of prevention made possible by the availability of B.C.G. B.C.G. vaccine was a living avirulent bovine bacillus which, as the conference in Washington in 1946 declared, conferred increased resistance to tuberculosis. There were no proved cases of progressive disease as a result of B.C.G. vaccine. A general campaign of B.C.G. vaccination in the Danish island of Bornholm almost eliminated, subsequently, the cases at ages 15–30 years which formed so large and tragic a part of the tuberculosis picture in many countries.

This country was falling behind the Scandinavian countries and such small island territories as Iceland and the Faroe Islands in the anti-tuberculosis campaign. He suggested the following measures: (1) overhaul, reorganization, and expansion of the tuberculosis section of the Ministry of Health; (2) a strong lead from the Ministry to local authorities, such as was given in regard to diphtheria, with new emphasis on prevention and on the need for priority in building construction to sanatoria and clinics; (3) considerable additions to the medical, nursing, and social staffs engaged in tuberculosis prevention work; (4) arrangements for the protection of nurses, doctors, and tuberculin-negative contacts of cases of tuberculosis, especially the newborn, by use of B.C.G.; (5) special housing facilities for tuberculous families, together with, possibly, financial subsidy; and (6) speeding up of the building of Remploy factories for the ex-sanatorium patient. Dr. Stallybrass ended by calling for a sustained all-out national effort to reduce and finally eradicate tuberculosis.

Nova et Vetera

BIOGRAPHY OF EHRLICH

Paul Ehrlich. By Martha Marquardt. With introduction by Sir Henry Dale, O.M., G.B.E., M.D., F.R.S. (Pp. 255; illustrated. £1 5s.) London: William Heinemann Medical Books. 1949.

Paul Ehrlich was born in a small town of Upper Silesia, son of a Jewish innkeeper. From his adolescent days he showed not so much genius as "dedication"; for his mind was directed towards an end to which all else in him was, through life, completely subordinate. It was a period of rapid scientific industrial development, especially evident in Germany in the output of "fine chemicals" and, notably for Ehrlich's career, of aniline dyes. Certain of these soon came to be used as tissue-stains by microscopists, among whom was his older relative, Karl Weigert, a name still linked with a histological method. The chemical outlook was making itself felt in German medicine. From the first it was Ehrlich's idea to adapt the chemical affinities of certain substances for certain cell-elements to curative purposes. To this task he brought an astonishing persistence, great inventiveness, endless resource, and exceptional knowledge. He began with aniline stains, did work of great importance on the blood, and, extending his master-idea, sought and found various specific agents against specific cells—"magic bullets," as he called them—chosen always to hit the parasite as hard as possible and leave the host as uninjured as might be. His most spectacular triumph, as all know, was "606" for the spirochaete of syphilis. In the course of his work he developed views on the nature of immunity the discussion of which has been extremely fruitful for the medical outlook.

Ehrlich was a very odd character. Miss Marquardt, his devoted secretary for many years, discusses his manner of work and some of his moods and social relationships. Parts of the account, if not related by so faithful a witness and confirmed by others, might be thought fanciful. His life in the laboratory alternated between states of intense concentration and extreme excitement. From these his only relief was the smoking of strong cigars—a score or more a day—and the drinking of mineral water. He had no special interests in literature, art, music, politics, philosophy, religion, nor indeed, so far as can be

seen, in science as a whole. Sport, travel, adventure, scenery, never kept him from his laboratory. He had no gift of exposition and was a poor speaker. His social relationships reveal a generous, charitable, and kindly soul, but the tempo of his life and the bent of his mind left little time for mundane or indeed for human affairs. He lived in his laboratory and for his own particular part of his own particular science. His achievements were set forth by his colleagues on his 60th birthday, in 1914. His life was externally so uneventful that there is hardly room for a biography in the usual sense.

Sir Henry Dale writes in his introduction that "the lines of research which Ehrlich opened to explorers have provided an impulse for that . . . revolutionary change in the . . . treatment of infections which stands out as one of the great achievements of the half-century now ending"; and, again, that those who did not know Ehrlich will find it "difficult to believe that anybody could do great work at such a pitch of excitement and explosive emotions." These matters inevitably raise reflection on the kind of men that make discoveries. For there is no human power or faculty that has not been used, and may not yet be used, in the service of science. Men of science are thus as various in character and outlook as mankind itself. The one thing that they have in common is their way of demonstrating their conclusions. Though we may smile at Ehrlich's wayward conduct and child-like outbursts, at his limitations, his vanities, and his incoherences, yet whenever he was putting his work to the test of demonstration he exhibited such extreme caution as has been excelled by none of his great scientific compeers. Miss Marquardt illustrates again the endless variety of human character which, by some miracle, is yet subsumed under one pattern of humanity. Man is, after all, essentially a social animal and must, in the end, be judged by social standards. It is a theme that will never lose its fascination, for the proper study of Mankind is Man—the best of all maxims for medical men—

"Sole judge of truth, in endless error hurled:
The glory, jest, and riddle of the world."

CHARLES SINGER.

The annual report of the Oxford Regional Hospital Board for the year ended March 31, 1950, has recently been published. The revised estimates of the gross expenditure of the board and the sixteen hospital management committees for the year 1949–50, as approved by the Minister of Health, amounted to £5,189,915. Against this should be offset the estimated income of hospital management committees amounting to £475,573, leaving a net figure of £4,714,342. The report states: "This, it should be noted, is not the actual expenditure, which is expected to be rather less than that sum, but the estimated expenditure, arrived at after the most careful scrutiny both by the board and by management committees. Of this total, £42,540 represented the board's central administration expenses, and £526,623 was for expenditure by the board other than on administration or hospital maintenance (the main items being specialists' salaries, the blood transfusion service, mass radiography units, and contractual arrangements for the treatment of patients at institutions outside the National Health Service). The remaining £4,145,179 was the net expenditure of hospital management committees on the day-to-day running of the 101 hospitals and 45 clinics in the region. The sum allocated to the regional hospital board for capital works of all kinds amounted to £225,000. When it is remembered that the board inherited from predecessor authorities works in progress at two hospitals alone amounting to £240,000, it will be appreciated that the board is faced with an almost impossible situation. The list of schemes already in hand more than absorbs the whole of the capital sum available for 1950–1; schemes totalling nearly £3,500,000 on works required as both urgent and important await their turn on the priority list; and beyond this again major development schemes total approximately £7,000,000. Under these circumstances the extent to which the board is likely to be able to improve and extend existing facilities is negligible, and every management committee in the region will have to be disappointed because of the board's inability to proceed with some vitally important project in its area."