

The opening lecture of the congress was given by Professor G. PERKINS on "Progress in the Treatment of Fractures," and the ensuing time was filled with lectures and demonstrations on chronic respiratory diseases, the place of the physiotherapist in cardiac surgery, the application of progressive resistance exercise in physiotherapy, the elderly sick, and other subjects.

MEDICAL DEFENCE UNION ANNUAL MEETING AND REPORT

For the first time for 27 years the annual general meeting of the Medical Defence Union was held in a provincial city instead of London. The meeting was at Bristol, and was held on September 20 under the chairmanship of Mr. St. J. D. BUXTON, in the unavoidable absence of the president, Dr. S. COCHRANE SHANKS.

The Legal Aid Scheme

Mr. BUXTON delivered the address. After a brief account of the history of the Union—it is 70 years old this month—and of the nature of its work, Mr. Buxton reviewed the recent trends in medical litigation. After the hospitals were taken over by the State in 1948, their local support rapidly disappeared (though it was now reviving), he said, the staff became paid servants of the State, and the former glory surrounding the hospital committee and medical staff had almost gone. These changes, the alteration in the law, and the introduction of the legal aid scheme all appeared factors in the increase of actions brought against doctors and hospitals. The legal aid scheme made it possible for those without adequate means to bring their case before the Courts. The majority were successful. During the last three years between 80 and 90% of legally assisted litigants had won their cases in the Queen's Bench and Chancery Division, and over 50% had been successful in the Court of Appeal. Out of those applying for legal aid—nearly a quarter of a million—rather more than half had been granted it, but in only 60 out of the 150,000 cases (0.04%) was there known to have been criticism from the Bench. The scheme bore harshly, however, on the successful defendant, as he was unable to collect his costs. The Medical Defence Union considered this lack of provision for the successful defendant more than harsh, went on Mr. Buxton, and an official document had been addressed to the Lord Chancellor inviting him to consider an amendment to the existing provisions.

Describing the activities of the M.D.U., Mr. Buxton touched on the qualifications for membership. Besides the recent admission of dental surgeons without medical qualifications and of provisionally registered medical practitioners, the council was keeping under review the needs of overseas members, particularly as the graduates of the new medical schools in the West Indies and Africa were applying for membership.

At the conclusion of the meeting Dr. S. COCHRANE SHANKS was re-elected president for the 1955-6 session and Dr. HENRY ROBINSON treasurer.

Annual Report

The annual report and statement of accounts for 1954-5 records a total membership (on July 15, 1955) of 41,561, of whom over 3,000 joined during the year. The accounts for the year 1954 show an excess of expenditure over income of £139 in a total expenditure of over £87,000. This is a considerable improvement on the previous year, when the deficit approached £5,000. Nearly £58,000 was spent in legal charges, disbursements, and indemnity claims.

Warnings are given on the questions of unregistered anaesthetists and "telling the patient." As a result of

several inquiries during the year, doctors are again urged in the report to discountenance the employment of members of the nursing staff as anaesthetists—as apparently happens in some hospitals—and not to associate themselves with such arrangements, except in cases of the gravest emergency where a second practitioner cannot be obtained. Such a course, besides at once raising the issue of "covering," raises also the more serious one of responsibility if an accident should occur. It is often difficult to know how much to tell a patient or his relatives, and what is best medically is not always soundest legally. Practitioners asked by letter for information about the care or treatment of a patient are recommended to take advice from their Defence Union before replying. The report draws attention to the recent case of a medical practitioner, a co-respondent in a divorce suit, who admitted adultery with a patient. The case was considered by the disciplinary committee of the G.M.C., but the doctor's name was not erased from the *Register*. The report points out that, in the Union's view, this decision turned very much on the facts of the particular case: "it should not be assumed that it represents any change of thought on the part of the General Medical Council."

Other subjects discussed in the report include the right of provisionally registered practitioners to accept fees for "private practice" arising from hospital duties (in the opinion of Counsel this is not permissible under the terms of service), the change of Scots Law resulting in boards of management of N.H.S. hospitals being held responsible for negligence of their resident medical staff, statute-barred actions (the time limit is now three years for the institution of proceedings against public authorities or their staffs), and the inability of Fellows of the Royal College of Physicians of London to sue for their fees. With regard to the last, the council of the Union has suggested to the Royal College that the time has now come for its debarring by-law to be varied or cancelled.

VISIT OF RUSSIAN DOCTORS

As already announced in the *Journal* (August 6, p. 369) six eminent members of the Russian medical profession are visiting Britain this month as guests of the British Medical Association. In making the arrangements for their visit, the Association is indebted to the Soviet Relations Committee of the British Council for its valuable co-operation.

Below we summarize the programme of medical visits and official entertainments arranged for the Russian doctors. They will be entertained in London, Edinburgh, Glasgow, Birmingham, Cambridge, and Oxford.

Monday, October 17.—Luncheon with British Medical Association at B.M.A. House; supper with Royal Society of Medicine.

Tuesday, October 18.—Postgraduate Medical School of London; dinner with University of London.

Wednesday, October 19.—Wellcome Foundation; luncheon with Society of Apothecaries.

Thursday, October 20.—National Institute for Medical Research and Imperial Cancer Research Laboratories, Mill Hill; dinner with H.M. Government.

Friday, October 21.—Middlesex Hospital; luncheon with Royal College of Surgeons of England; dinner for ladies with Medical Women's Federation; theatre and supper for remainder of party with College of General Practitioners.

Monday, October 24.—Medical institutions in Edinburgh; luncheon with University of Edinburgh; Department of Health for Scotland; cocktail party with Royal College of Surgeons of Edinburgh; dinner with Royal College of Physicians of Edinburgh.

Tuesday, October 25.—Luncheon with Lord Provost of Glasgow; medical institutions in Glasgow; reception by Royal Faculty of Physicians and Surgeons of Glasgow; dinner with British Medical Association.

Wednesday, October 26.—Medical institutions in Glasgow; luncheon with University of Glasgow; film show at Glasgow Regional Office of the British Medical Association.

Thursday, October 27.—Queen Elizabeth Hospital, Birmingham; reception by Birmingham Division of the British Medical Association.

Friday, October 28.—Neurosurgical Centre, Smethwick; luncheon with Lord Mayor of Birmingham; Birmingham medical school; dinner with Dean of the Medical Faculty of the University of Birmingham.

Sunday, October 30.—Cambridge Division of the British Medical Association, for visits to colleges and dinner; reception by Mayor of Cambridge.

Monday, October 31.—Cambridge medical school; luncheon with Regius Professor of Physic; Papworth Village Settlement; reception by Vice-Chancellor of the University.

Tuesday, November 1.—Luncheon with Oxford Division of the British Medical Association; visits to colleges; dinner with Vice-Chancellor of the University.

Wednesday, November 2.—Oxford medical school; Radcliffe Infirmary.

Thursday, November 3.—Luncheon with Royal College of Physicians of London; evening party at Soviet Embassy.

Friday, November 4.—The visitors will be introduced to the Council of the British Medical Association, which will be in session; British Red Cross Society; farewell dinner with British Medical Association at B.M.A. House.

In addition, a number of excursions and other social entertainments have been arranged.

ROYAL COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS

LORD NUFFIELD'S GIFT

Lord Nuffield received a great ovation when he rose to make an impromptu speech at the annual dinner of the Royal College of Obstetricians and Gynaecologists, held on September 23 at the Dorchester Hotel. A few minutes before, Sir Arthur Gemmell, the president of the College, had announced that Lord Nuffield had given £75,000 from his own private resources to the fund being raised for the purpose of building, equipping, and maintaining the College's new headquarters in London. A further £50,000 was being donated through the Nuffield Provincial Hospitals Trust. Sir Arthur said that the name of the College's new headquarters would be Royal College of Obstetricians and Gynaecologists, Nuffield College, Regent's Park. Lord Nuffield, in a few brief remarks, said that he had for a long time thought that he should take some interest in obstetrics and gynaecology. "We are now beginning to wake up to the fact that the ladies ought to have a little assistance." In the future everything possible should be done to bring about childbirth in a fit and proper way, and Lord Nuffield hoped that anything he had been able to do would be a help in that direction.

College and Commonwealth

Earlier in the proceedings, Sir Ronald Weeks, proposing the toast to the College, described the progress which had been made in the plans for the College's new building. The site in Regent's Park was secure, and they were at least half-way to the target figure of £400,000. He would be disappointed if the foundation stone was not laid in 1956. Sir Ronald paid a tribute to the hard work of the council of the College and of Sir Arthur Gemmell, who had filled

the office of president with the highest distinction. In reply Sir Arthur said that in every sphere the work of the College was going forward and in many spheres it was expanding. The number of candidates sitting for the diploma had doubled. The College had a special importance in the Commonwealth, and fellows and members in South Africa had asked for a regional council to be set up there. With the agreement of Sir Arthur Sims two Sims-Black professors had been appointed for 1956—one to visit Australia and the other South Africa and Rhodesia. The fund for the new building had still some way to go before the target figure was reached, and there had been some recasting of the plans in order to secure the interest of others who were well disposed towards the College. In conclusion Sir Arthur thanked the council of the College for its unfailing support.

Part-time Consultants

The health of the guests was proposed by Mr. V. J. F. Lack, and Mr. A. J. Espley, chairman of the Institute of Obstetrics and Gynaecology, replied. After congratulating the College on electing Mr. Charles Read as its next president, Mr. Espley remarked that he had something to say to the Minister of Health, who was one of the guests at the dinner. Whatever might be done in the future, he sincerely hoped that the services of part-time consultants would be retained, for they made an invaluable contribution to the efficiency of the N.H.S.

Nova et Vetera

MEMORIAL TO JAMES PARKINSON BICENTENARY OF BIRTH

And some there be, which have no memorial; who are perished, as though they had never been.

Ecclesiasticus, xlv, 9.

Although James Parkinson provided one of the most familiar eponymic terms in medicine, little biographical information about him was available until the publication earlier this year of a memoir by Dr. A. D. Morris.¹ This coincided with the bicentenary of Parkinson's birth on April 11, 1755. Dr. Morris showed Parkinson as a most versatile character. He was born in Hoxton, London, the son of a surgeon, and he lived there all his life. The site of his house, No. 1 Hoxton Square, is now occupied by a factory.

In 1817 he published his *Essay on the Shaking Palsy*. This classical description of the disease which now bears his name earned him the honorary gold medal of the Royal College of Surgeons in 1822.

Dedication of Memorial at Shoreditch

In addition to a busy practice and the pursuit of his scientific and political interests, Parkinson devoted much time to the interests of St. Leonard's Church, Shoreditch, where he had been baptized and married, and where he was buried in 1824. His tombstone has long disappeared, no portrait of him is known, and there was no memorial to him. This last omission has now been rectified, principally through the efforts of Dr. Morris. On September 17 a memorial tablet was unveiled and dedicated at St. Leonard's Church. It was the gift of members of the nursing staff of St. Leonard's Hospital, which stands on the site of the parish infirmary to which Parkinson was visiting physician. The vicar, the Rev. Meredith Davies, conducted the service

¹ *Lancet*, 1955, 1, 761.

² *James Parkinson, 1755-1824. A Bicentenary Volume of Papers dealing with Parkinson's Disease.* Edited by Macdonald Critchley, in collaboration with Sir Francis Walshe, W. H. McMenemy, and J. G. Greenfield. London: Macmillan and Co.