

### Contact Lenses

SIR,—My attention has been drawn to Mr. C. M. Ruben's letter (July 22, p. 246), and I shall be grateful if you will permit me to reply.

Any qualified contact-lens practitioner, be he medical man or ophthalmic optician, by virtue of his training knows of the dangers of over-wearing contact lenses, and has ability to recognize the signs that point to this immediately they appear. He gives his patient careful instructions, and sees him or her regularly following initial fitting. He is capable of taking whatever steps are necessary if signs of over-wearing become apparent, including the step of referring the patient to an ophthalmologist.

It is true that *in certain cases* patients are eligible for contact lenses under the National Health Service, but these cases principally cover inability of spectacles to give satisfactory vision or pathological conditions that can be dealt with only by contact lenses. The young female introduced into this correspondence has, unfortunately, to be in one or other of these categories before she can receive contact lenses under the National Health Service at minimal cost.—I am, etc.,

W. GUMMER,

London S.E.1.

Secretary, The Contact Lens Society.

### Flood of Advertising

SIR,—It is obvious that something must be done to stem the flood of medical advertising, in particular the endless plugging of products. A meeting of representatives of the medical profession and of the drug firms should take place urgently to discuss the problem.

Failure by the drug firms to recognize that their over-emphasized propaganda is an unending source of irritation to the medical profession will only end in marked hostility by the doctors to the pharmaceutical industry. In the meantime, like others, my partner and I have been returning their circulars to the drug firms rather than throw them out. If more people do likewise this may force some co-operation from the drug industry.—I am, etc.,

East Kilbride, Lanarkshire.

S. D. COLEMAN.

### Congenital Dislocation of the Hip

SIR,—Perhaps one of the uncovenanted advantages of Britain's joining the Common Market may be that we will be "shamed" by our Italian colleagues into early diagnosis of C.D.H.

Apparently, after dipping the baby's head in chianti, they proceed to the other end, for the business of diagnosis of C.D.H. One looks forward to the day when Ortolani's sign counts for more than Colonna's operation.—I am, etc.,

Wembley.

R. A. STRANG.

### POINTS FROM LETTERS

#### Schizophrenia in General Hospitals

DR. RUSSELL BARTON (Colchester) writes to correct two errors in his letter (July 29, p. 307): The figure in line 11 of his second paragraph should have been 30%, *not* 20%; and the word "admission" in line 4 of his fifth paragraph should have read "inclusion."

## Obituary

R. M. GORDON, O.B.E., M.D., Sc.D., F.R.C.P.  
D.P.H., D.T.M.

Professor R. M. Gordon, emeritus professor of entomology and parasitology in the University of Liverpool and the Liverpool School of Tropical Medicine, died in hospital on July 26. He was 67 years of age. Professor Gordon's work not only brought lustre to his own famous school, but also helped to overcome some of the worst hazards to healthy living in West Africa.

Rupert Montgomery Gordon was born in Dublin on August 23, 1898, the son of Dr. S. T. Gordon. Educated at Strangeways School and Trinity College, Dublin, he graduated M.B., B.Ch. in 1916. Joining the R.A.M.C. in the same year, he served with the Army in Serbia, where a typhus epidemic was causing much morbidity and mortality. His interest was thus aroused in arthropod-conveyed disease, and on his release from the Forces in 1919 he took the diploma course in tropical medicine at the Liverpool School of Tropical Medicine, an institution with which his career was firmly to be linked for the rest of his life. After obtaining the D.T.M. and also the D.P.H. he proceeded M.D. in 1920.



After spending two years as research assistant at the school's laboratory at Manaus on the Amazon, he returned to Liverpool for another two years before being posted to the staff of the school's other overseas laboratory in Sierra Leone. There he remained for 13 years, rising by 1930 to the directorship of that laboratory and to the appointment of professor of tropical diseases of Africa, University of Liverpool. In 1938 he was recalled to Liverpool to become professor of entomology; in 1941 the chair in parasitology was added to the chair he held, and this combined post, the Dutton and Walter Myers chair, he filled until his retirement in 1958.

Gordon's many solid contributions to scientific knowledge were carefully prepared after clear thought and painstakingly detailed work; consistently they were of the highest standard. His research investigations ranged from the conveyance of virus, rickettsial, protozoal, and helminthic infections to a study of immunological problems in metazoan infections and the ecology of the vectors of disease of man and of animals. After careful investigations early in the second world war he made recommendations for the use of medicated soaps which on adoption did much to control the scabies infestations so prevalent under the conditions of life resultant on bomb damage and on air-raid-shelter existence. Latterly his attention had increasingly been concentrated on fundamental problems of filariasis and of trypanosomiasis; to both of these he contributed work of the highest distinction. With one of his colleagues he had completed a textbook on medical entomology at the time of his death.

Gordon's opinion and advice were sought by outside bodies on many occasions. As a result he visited the Far East, the Sudan, and both East and West African territories in addition to attendance at many conferences in the temperate climates. The programme he devised and the organization he originated—still productively active—for the study of filariasis in West Africa is one of the more