

International Congress of Haematology

The tenth International Congress of Haematology was held in Stockholm from 29 August to 4 September under the distinguished presidency of Dr. JAN WALDENSTRÖM. It was attended by over 1,600 participants, by far the largest contingent being over 500 members from the U.S.A. As usual the scope was wide and virtually all the branches of haematology were represented.

Iron

Dr. E. C. MOORE (U.S.A.) indicated that the mode of cooking had a significant influence on the iron content of food. The iron content might be 4 mg. when prepared in a glass container and more than 30 mg. when cooked in a skillet or Dutch oven, an iron cooking-pot widely used in the United States. This difference was most marked when the cooking period was prolonged, such as with spaghetti sauce, and particularly when the pH was acid. The replacement of iron cooking-pots by those made of glass, stainless steel, and aluminium might well prove to have adverse effects on iron nutrition.

Dr. L. HALLBERG (Sweden) found markedly increased iron absorption in pregnancy even when the pregnant subject was not iron-deficient. Thus in subjects who had been made iron-replete by 1,000 mg. of parenteral iron in early pregnancy 7.7% of a 40-mg. dose of iron (labelled with ^{59}Fe) was absorbed at the 10th week and the percentage absorbed increased to 18.4% at the 35th week. The suggestion that iron therapy produces rises in Hb levels by some stimulatory effect other than by correcting iron deficiency was again denied. Dr. L. LOWENSTEIN (Canada) showed that subjects with normal haemoglobin concentrations failed to show any changes in haemoglobin levels after parenteral iron. Dr. T. BOTHWELL (South Africa) presented data on the incidence of iron deficiency in different parts of the world by the estimation of tissue iron content, using material obtained *post mortem* in traumatic deaths. London adults were near the bottom of the lists with iron stores well below that found in adults in Seattle, Venezuela, and South Africa, and barely above those of Delhi Indians.

Dr. A. G. COX (England) showed evidence of declining serum iron levels in patients four years after vagotomy and gastroenterostomy. Evidently, as in post-gastroectomy subjects, we could expect to see a significant incidence of iron deficiency in this group. It was uncertain whether this was due to intestinal malabsorption (there was an increase in faecal fat excretion) or to loss of acid secretion.

Vitamin B₁₂, Folic Acid, and Intrinsic Factor

The cell responsible for intrinsic factor production in the gastric mucosa has for long exercised the imagination of haematologists and gastroenterologists alike. Drs. P. J. HOEDEMACKER, J. ABELS, J. J. WACHTERS, A. ARENDS, and H. O. NIEWIG (Holland) using autoradiography showed that radioactive vitamin B₁₂ was attached to gastric mucosal cells and that this binding was abolished if the mucosa was first exposed to a serum containing antibodies against intrinsic factor. The mucosal cells binding

vitamin B₁₂ in this manner was the chief cell in rat mucosa, and, unexpectedly, the parietal cell in man.

Drs. K. G. STÄHLBERG and K. A. I. LINDSTRAND (Sweden) presented evidence that the principal form of vitamin B₁₂ in normal plasma did not behave like any of the known analogues of the vitamin, and its precise structure remains uncertain. The deleterious effect of prolonged lactation on the folic acid status of African mothers was demonstrated by Drs. J. METZ and K. STEVENS (South Africa). There was a significant incidence of megaloblastic anaemia and a rising urinary "figlu" excretion which was prevented by prophylactic folic acid.

Dr. W. G. DARBY (U.S.A.) studied the absorption of vitamin B₁₂ in foodstuffs. Radioactive vitamin B₁₂ was given to a lamb and the resulting "lamburgers" fed to human beings. Normal subjects absorbed 60% of the vitamin B₁₂ when the amount was between 1 and 5 μg . but only 6% when it was increased to 38 μg . Very little was absorbed in pernicious anaemia.

Myeloproliferative Disorders

Dr. D. A. G. GALTON (England) discussed various aspects of these disorders. Of great

interest was the observation that the Philadelphia chromosome, the hallmark of chronic myeloid leukaemia, was also to be found in atypical forms of chronic myelofibrosis as well as in some patients presenting with polycythaemia. The continued value of busulphan as a therapeutic agent in these disorders was emphasized.

Dr. J. H. BURCHENAL (U.S.A.) discussed survival in acute leukaemia. The advent of chemotherapeutic agents had produced a steady increase in the mean survival of these patients. But of special interest was the small group of patients whose survival following initial diagnosis varied from 5 to 14 years. To date information about almost 50 such cases was available. Projection of photographs of the original marrow films left little doubt about the accuracy of the original diagnosis. Approximately one-half of such patients showed no evidence whatsoever of the disease process. It was intended to maintain a register of such patients so that their sera could be available for study.

Drs. M. POLLYCOVE and J. H. LAWRENCE (U.S.A.) presented a twenty-year follow-up of polycythaemia vera which supported the transition of this disorder to myelofibrosis as manifested by a reduction of the red cell mean cell life span and the development of myeloid metaplasia in the spleen.

Colloquium on Hypnosis

Over 100 medical men and women from about 20 different countries attended a colloquium at the West London Hospital on 22-23 August. It was held under the auspices of the International Congress of Psychotherapy and the British section of the International Society for Clinical and Experimental Hypnosis. Dr. J. A. HADFIELD, whose work on hypnosis with McDougall at Oxford about 1912 excited the interest of Sir William Osler and who first developed the technique which he called hypno-analysis, welcomed the guests.

Status of Medical Hypnosis

Dr. M. J. FENTON (London) traced the status of medical hypnosis from the days of Braid to the present time emphasizing the high standard of Milne Bramwell's great textbook, era 1910. Dr. Fenton suggested that opposition to hypnosis in the past resulted less from the criticisms of the orthodox than from the over-enthusiastic claims of its protagonists. The B.M.A. had twice called for further study of the nature of hypnosis and its indications. Dr. LEO ALEXANDER (Boston), discussing the use of hypnosis in psychiatry, said that it was a valuable weapon in the psychiatrist's armoury which was of use in diagnosis as well as treatment. It could greatly shorten the duration of psychotherapy. The dangers were negligible when used by experienced practitioners and dramatic recoveries were not uncommon. The removal of symptoms frequently made psychotherapy easier. It was valuable in behaviour disorders such as sexual deviation and addiction where hypnosis could counteract conditioned behaviour. The procedure was in no way incompatible with orthodox psychotherapy.

Dr. ASTRUP (Oslo) and Professor LANGEN (Tübingen) then described the Continental techniques of autogenic training and graduated active hypnosis. Dr. G. J. AMBROSE (London) gave a remarkable demonstration of the induction of mass hypnosis, and members of the British Society showed cases including intractable pain, severe obesity (reduction from 20 to 12 stones, 127 to 76 kg.), and addiction to drugs which responded to hypnosis when all other means had failed. Dr. VOLGYESI (Hungary), one of the few survivors among Pavlov's co-workers, described his results with hypnosis in otherwise intractable alcoholics. He described for the first time a form of aversion treatment he had practised since 1917.

Physiology of Hypnosis

With regard to the physiology of hypnosis, papers were read by Dr. W. VOGEL (Tübingen), who demonstrated changes in local circulation by means of autogenic training, and Dr. LIONEL FRY (London) who showed the effects of hypnosis on allergic skin responses in asthma and hay fever.

Dr. F. BRACCHI and Mr. L. E. H. LINDAHL (West London Hospital) gave a demonstration in the Michael Lewis Laboratory of the acquisition of voluntary control of the heart rate and other autonomic functions in the waking state by a volunteer who had submitted to a course of specific conditioning and hypnosis.

The colloquium included a dinner discussion at the Clarendon Hotel on the Saturday night and an afternoon at Hurlingham Club on Sunday.

The proceedings were presided over by Dr. A. SPENCER PATERSON.