given at intervals with discretion would be satisfactory.

Tropical Eosinophilia

Professor P. E. C. MANSON-BAHR (Tulane, U.S.A.) reported on recent work in the United States on tropical eosinophilia and on the effects of animal helminthic infection in man. In animal helminthic infections in man a new drug, thiabendazole, offered therapeutic prospects in both visceral and cutaneous larva migrans when used in a dosage higher than usually recommended. Dr. K. SOMERS and others (Uganda) had investigated a number of patients with long histories of vague illness and had found high titres of antimalarial fluorescent antibodies. The use of emetine and dehydroemetine in the treatment of amoebic hepatitis was reported by Dr. J. M. PINTO (Kenya). While tenderness appeared to subside more rapidly on the latter drug, there appeared to be little to choose between the two agents.

Tetanus remains a problem in many tropical countries and Dr. B. BRAGANZA (Uganda) emphasized that those patients admitted with a period of onset of less than 48 hours had a very high mortality despite conventional therapy. The management of severe cases by curarization and artificial respiration offered a hope of reducing the mortality.

Dr. J. O. W. ANG'AWA (Kenya) described a case-finding programme in the control of

pulmonary tuberculosis and emphasized that sputum culture yielded a far higher rate of positive results than sputum smears. It was probably even more useful than radiography in large surveys.

Nutrition

Professor D. B. JELLIFFE (Uganda) reviewed the problem of assessing childhood malnutrition in the field, and described the advantages and disadvantages of the methods at present available. Dr. R. E. BROWN (Uganda) reviewed data from necropsies at Mulago Hospital in children under 15 years of age with particular reference to organ weights. Mean brain weights were significantly lower in malnourished children as compared with children without frank malnutrition and with a reference group.

Seven cases of D-refractory rickets, including a family with three cases, were described by Dr. C. P. PATEL (Uganda). No cases had previously been described from Uganda and the diagnosis and management of these patients were discussed.

General

Dr. H. P. OJAMBO (Kenya) had found duodenal ulceration to be the commonest cause of dyspepsia in African patients attending hospital for this symptom. The disorder

occurred commonly in recently promoted executives but was also found in unsophisticated peasants. He described several cases in which psychological stress appeared to be a factor associated with haemorrhage from the ulcer. Dr. L. R. WHITTAKER (Kenya) reported on four subjects with dyspepsia in whom a congenital abnormality of the pars horizontalis superior duodeni had been demonstrated. Dr. J. M. NEILSON (Kenya/Glasgow) described studies which revealed the presence of antibodies to gastric mucosa and to thyroid in subjects with diabetes mellitus. Pernicious anaemia occurred with greater frequency in diabetics than in the general population, and antibodies to parietal cells could be demonstrated by the gastric mucosa complement fixation test in 86% of diabetic subjects.

Population expansion remains a major problem in many developing countries and Dr. G. A. SAXTON (Uganda) presented the results of the use of an intrauterine contraceptive device in Kampala. Among the first 100 subjects followed for a year there had been no pregnancies. Dr. B. H. KAGWA (Uganda) reported on the prevalence and types of mental disease seen in Uganda and contrasted the psychiatric reactions between East African and western peoples. He stressed that the popular supposition that anxiety-producing experiences are uncommon among Africans is fallacious and that mental illness was a far from insignificant problem.

NEW APPLIANCES

A Simple Aspirator

Dr. I. A. MACDOUGALL, county medical officer, Hampshire, writes: An item of equipment which should be carried in every ambu-

lance is an efficient sucker. Normally these are expensive to buy, a reputable one costing between £20 and £25. The illustra-

tion shows a highly efficient and easily portable sucker costing in the region of £5 which has been designed by Mr. J. Bolton, the county mechanical engineer for Hampshire.

This light, portable, hand- or foot-operated suction apparatus has been made from relatively simple and robust components. It is inexpensive to produce and cheap to maintain, silent in operation, and easy to clean. As much as 1½ pints (0.9 litre) of fluid can be aspirated in 18 seconds, depending on the size of the catheter.

The equipment measures 18 × 6½ × 8¾ in. and weighs 9 lb. (4 kg.). It consists of a standard piston type tyre pump with reversed plunger and valve mechanism; also a 1½-pint (0.9-litre) preserving jar connected by a transparent plastic tube to a catheter. It is carried by handles mounted on a wooden stand which has a non-skid rubber base. While it was originally intended for ambulances it could have application in other branches of the Health Service.

It was made by the county surveyor's mechanical engineering section for the county medical officer of the Hampshire County Council.