suffocation. In the sacred enclosure around the operating table—a simple wooden structure with sawdust on the floor around it—were a few distinguished visitors from different continental countries. One clerk had charge of the carbolic spray, and woe betide him if it went wrong. A second had charge of the tray of instruments soaked in carbolic lotion. Lister always insisted that the tray of instruments should be covered with a towel wrung out of carbolic lotion; he could not bear that the patient should see the instruments. The patient would be brought into the theatre and laid upon the table; there would follow a discourse on the features of the case; then—usually—operation, carried out under anaesthesia carefully, with meticulous attention to detail, under the carbolic spray, and with the happiest of results. The author records how on one of these solemn occasions, when Lister entered the theatre amid the usual hush preceding his lecture and operation, an irrepressible wag in the gallery remarked, "Brethren, let us s-spray." An irrepressible titter went round the gallery benches; but Lister was equal to the occasion. He made no rebut mark; merely lifted his eyes towards the offender and sighed; whereupon the demonstration went forward in perfect silence.

The author does well to remind us of Lister's contributions to physiology and bacteriology, for they were notable. His surgery was founded on two main principles; the doctrine of Pasteur that disease and sepsis were due to the introduction of germs from without, and a study of every factor that could make for the comfort and speedy recovery of each individual patient.

Accounts are given of Lister as Professor of Clinical Surgery at Edinburgh; a description of an operation by Lister; and of the introduction of antiseptic dressings. There are delightful reminiscences of Mrs. Porter, the matron, aged over 70, defying the assistance of artificial teeth, ruling both professors and students alike with a rod of iron, yet humorous and kindly withal, with wonderful legends behind her of service in the Crimea; she had mothered Syme at Edinburgh; she spoke her mind to Lister as his pupil, son-in-law, and successor. Finally, come accounts of Lister's contributions to surgery, his influence in Edinburgh University, and an account of his later long up-hill struggle in London against the prejudices ranged against him, prejudices which he gradually and steadily overcame, though it was largely through the re-introduction of his antiseptic methods into London from the Continent that the antiseptic method of surgery was established; to be followed by the aseptic surgery which is its modern development.

A chapter of Listerian aphorisms and precepts is a most interesting feature of the book; also a chapter of reminiscences entitled "Fifty Years After," being a mere bald summary of what Lister's teaching has wrought. Finally, a special word must be said about the illustrations. These are altogether admirable, and they do the publishers the utmost credit. There is a splendid photogravure reproduction of the head and shoulders of Sir Rickman Godlee's book in its third edition). There is a photograph of Lister's wards in the Royal Infirmary, Edinburgh, a scene of dinginess in which the miracles were wrought: a sketch of course of the carbolic spray; a photograph of Mrs. Porter, which someone must have had the audacity to take; and a most beautiful portrait of Lister in the presidential chair of the Royal Society—a portrait which we confess we had not seen before, but which is altogether admirable, and is taken from Professor Chiene's *Looking Backwards*.

To those who "know not Lister," or at least have not read how he created modern surgery we would especially recommend this book. It is admirably written and has a personal touch of intimacy. "Any anecdotes of Lister will always be welcome from any of the fast disappearing band of pupils who followed him through his wards, and were eye-witnesses of his wonderful work during his earlier struggles," quotes the author from *Science Progress* in 1926. The author has tried to outline both the scientific and personal side

of Lister's wonderful career, and his book is one which it is delightful to read.

R. K.

TEN WEEKS WITH CHINESE BANDITS.—By Harvey J. Howard, M.D., Professor of Ophthalmology, Peking Union Medical College. Australia, Sydney, Angus and Robertson, Ltd., 1927. Pp. 274. Price, 6s.

WE wondered when we opened this book why it should be sent to a medical journal for review. Then we found ourselves looking at its beautiful photographs, then the story seized our attention, and we did not lay the book down until it was finished. And as we closed it, we realised that it is eminently a book for review by a medical journal, for the medical problems of China with which it so largely deals are indeed terrible.

Dr. Howard is Professor of Ophthalmology at the great Peking Union Medical College, that splendid creation by the Rockefeller Foundation to serve the best interests of China. And in the summer of 1925 whilst on a visit to friends at Aolaimi in Manchuria, he was captured and carried off prisoner by a band of "hung hutz"—s, a band of the Black Dragon Bandits which had been terrorising the Manchurian provinces for months; whilst his friend, Major W. M. Palmer, was killed. For ten months Dr. Howard lived as a captive of the bandits. And the story of those ten months is more fascinating than any mere romance of fiction.

At first he was treated with the utmost brutality. The photographs show the author to be a man of tall and robust physique, and no one of lesser stamina could have stood all that he went through. He was at first condemned to death—the bandits having become seriously perturbed about their having killed Major Palmer, a well-known colonist in Manchuria, and of the retribution which would follow. Finally, after considerable haggling, he succeeded in bringing down the price which was to be paid for his ransom from \$50,000 to \$10,000 to be paid within ten days. On the tenth day, after much weary travel and very great hardships, he was again going to be shot as the ransom had not arrived, and the bandits were being slowly but surely invested by a large force of Chinese soldiery, which American push and insistence had galvanised into action. The leader of the band, Jih Pen Tzu, in common with most of his followers, however, was suffering from trachoma, which had taken a very acute turn, and Dr. Howard was asked if he could do anything. In the entire absence of all drugs and dressings all that he could do was constantly to apply fomentations, and this so relieved the patient that Dr. Howard was for a second time reprieved.

But the chase now began in earnest, for the military forces were closing in. Moving chiefly by night through forest tracks, the bandit party made for the mountains of Kirin, where they had a rendezvous with a larger band, and where they hoped that the final transactions for the release of Dr. Palmer Howard and the payment of his ransom would occur. Thanks to his efficient treatment of the bandit leader's eyes, Dr. Howard soon found himself installed as honorary physician to the band, and in competition with the two medicine men of the group. This competition had nothing bitter about it; it was a humorous interchange of pleasantries and a study of each other's methods. Surely there can have been fewer queer incidents in real life than this story of a distinguished ophthalmologist being appointed surgeon and physician to a robber band, armed only with an occasional bottle of aspirin tablets, or some tincture of iodine come across by accident, and with severe trachoma as the chief disease to be dealt with. Massage, which he introduced, proved to be very popular for ankylosed limbs and old gunshot wounds. Jih Pen Tzu was so grateful for the relief afforded to his eyes that he took Dr. Howard off the slave-junk in which he had been immured into his own tent, and there began a queer friendship and companionship between the two men, each of whom found qualities to respect in the other.

At the rendezvous in the mountains news was bad, and the soldiers for once were in earnest. Quarrels between

the two bands occurred and finally in the midst of a pitched battle near a farmhouse Dr. Howard was rescued. Immediately upon his rescue several distinguished officers claimed that each of them was responsible for Dr. Howard's rescue, and he was put to considerable difficulty in writing "chits" for his rescuers. In fact he gives evidence to show that the pitched battle in which he was rescued was a pre-arranged affair; the rifles captured were those on a led horse, and did not belong to the bandits who were supposed to have been killed. Despite the actual firing, also, the killed and wounded were not in evidence. As a story of adventure Dr. Howard's book is an absolutely fascinating one. The bandit's life, we gather,—like the policeman's—is not a happy one. There are days when everything goes well; the sun is shining, the farmer upon whom the band is billeted for the time being is compelled to give of his best by way of provisions and lodging, there is plenty of opium for the pipe, the soldiers are pacific, there is a steadily growing balance in the bank at some central town with which to face the winter. But such a picture is exceptional. The life in general is one of extreme hardship, ever recurrent danger, and many of the recruits are unwilling volunteers. They are a strange mixture, men of education with the scum of Manchuria; some of them quite likeable—a strange mixture of happy-go-lucky with cruelty, greed, and yet comradeship.

Dr. Howard's book is of interest from two points of view. First, his unvarnished account of the condition of things as they are—or were—in China. They are probably worse by now. Not until some Chinese Mussolini arises does there appear to be a chance of peace and order for that unhappy country. Secondly, from the medical point of view. Of all the diseases of China trachoma appears to be one of the most terrible; it is probably responsible for more than five million fresh cases a year. Further, the book emphasises in no uncertain way the tremendous importance of opium in the country. The bandits had only two luxuries, after-supper conversation, and the opium pipe. And the latter they resorted to in excess: there is a description of the tremendous system of evasion of the regulations, of farmers in league with both troops and bandits cultivating opium fields, of the large sums of money spent upon opium by individuals. Dr. Howard is definitely of opinion from a first hand acquaintance with the problem that opium is one of the greatest curses of China. Eaten in moderation, it may not be a curse; but smoked to excess—as these bandits smoked it every night—it saps morale entirely and reduces the man to a wreck dependent upon his daily dose.

The book is a fascinating one. We found that we were unable to lay it down until we had read it from cover to cover. And—as with all real life—it is more interesting than fiction.

ÆSCULAPIUS ARMAQUE.—By Major M. B. H. Ritchie, D.S.O., R.A.M.C. London: John Bale, Sons and Danielsson. Pp. 112. Price, 5s.

THIS book consists of reprints of a series of articles contributed, by the author, to the *Journal of the Royal Army Medical Corps*, during a tour of service in Malta and Turkey, in 1923–25, and deals with the cardinal problems of military medicine and hygiene. It is dedicated to the "that prince of good fellows, the British soldier," and a happier dedication could not have been thought of. We would commend Major Ritchie's book for study, not only to administrative military medical officers—who will find in its candid chapters much that will afford food for reflection; but also to all officers in military medical employment, and especially to the military medical officer in civil employment who may at any time be recalled to military duty.

Essentially the author's main thesis is the absolute necessity for autonomy of the military medical services. Centuries ago it was realised that doctors and chaplains were necessary to an army, but their duties were ill defined, and their organisation entirely casual. With the Crimea, the necessity for an official military medical service, trained in peace time and organised for war,

became apparent; and the R. A. M. C. and kindred services entered the Great War in a state of efficiency quite equal to that of the fighting units.

On the whole, it may be said that the system did not break down. There were miracles accomplished—of organisation in France and Europe, of improvisation in Mesopotamia and the Eastern theatres of war. Thus on pp. 19 and 20 of the book the author contrasts the military medical organisation as it was when it entered the war with the actual organisation which finally existed in France.

Yet the cardinal weakness of the whole situation, and one which still remains so, is that the medical services are not organised as an independent autonomous organisation. They must get their equipment from half a dozen different departments; they are in touch with all; serving under different authorities, but in a general sense subordinate. And such subordination means inefficiency; the man who can best run a field ambulance is frequently the man who is the best beggar; who can get round other departments, unravel his way through tangles of red tape, improvise, or even purloin.

And in the next war there will probably be no "non-combatants" from the point of view of risk; for the non-combatant services of an army are to-day perhaps as freely exposed to risk as the fighting troops, whilst the entire civilian population of a country may be exposed to ruthless attacks from the air. The necessity, therefore, as the author pleads, for a long view and for assessing in peace time what organisation will be required in the next war, is very great.

Even in civil life to-day the doctor is too much the "adviser," and too little the executive officer. "Eventually the profession must be prepared to cross the bridge from advisory to executive duties." One does not employ a trained chauffeur to stand on the foot-board and instruct a novice how to drive; one requires him at the wheel. And in his first chapter, "Mars et Hygieia," there is a thoughtful discussion of the whole relationship of medicine and hygiene to military conditions. The nursery of military sanitation in the British Army was in India, where, although to quote Sir Victor Horsley it was half crippled by "financial terrorism in time of peace," it achieved miracles. One has only to compare the death-rates of to-day in the British Army in India from such diseases as enteric fever, liver abscess, venereal disease and the like with the figures for the past to realise what has been done, and that under most difficult conditions.

In "Sententiæ vagæ" the author sums up the chief experiences in France in matters of administration. In many ways the French medical equipment was better than ours; their hospital tents were notably superior, lighter, more airy, and of a better pattern; their mobile sterilising lorries, laundry lorries, motor kitchens, and the "auto-chir"—a mobile surgical unit of 200 beds—were things which we did not possess at the beginning of hostilities, and which we had to improvise. But, as with all British arms throughout the war, we got results which no nation could surpass; we "delivered the goods." A special difficulty was the water-tight partition between the medical services in France and those in Great Britain; in the long run the home surgeon was sent on a "joy-ride" round the general hospitals in France to see for himself what was going on. A still greater difficulty was the inordinate time which elapsed in many instances before men who had been sent to Great Britain were returned to the front line; towards the close of hostilities this had been countered to some extent by the establishment of convalescent camps in the neighbourhood of the Army Corps in France.

Chapter 3 deals with the training of R. A. M. C. officers for war. The professional side of a military medical officer's training must needs come first. Without it, and without the refresher courses, he "ceases to be a doctor." But the author is insistent upon the necessity for the study of war problems by military medical officers, and would have them admitted to the Staff College. New conceptions frequently emanate not from the men at headquarters who are too often the slaves of