

Radiography and Radio-Therapeutics.—By ROBERT KNOX, M.D. (Edin.). Part I, Radiography. Pages 382 with 78 Plates and 337 Illustrations in the text. Second Edition. Price 30s. net A. & C. BLACK, Ltd., London.

THE first part of this book deals with the sources of electrical energy, and then goes on to describe the apparatus used for the production of X-rays, with all the various accessories employed. A further section, useful at the present time, is on the use of the Rays in the field.

The following chapters are concerned with the production of the radiograph, its development, and so on. The localisation of foreign bodies in the tissues is fully described.

What may be considered the second portion of the book consists of the radiography of the normal bones and joints, and this is followed by the conditions found when they are diseased. The examination of the thoracic and abdominal viscera then follows.

The most striking feature of this work is the extremely practical way in which it is written, which makes it most useful not alone to the beginner, but also to one who is only moderately conversant with the subject. The description of the apparatus and technique is particularly clear and concise, many different forms being described.

The author is strongly in favour of close collaboration with either the physician or surgeon, and lays stress on the point that in difficult cases a knowledge of the clinical history of the patient may be most useful.

The illustrations are excellent, and the plan of presenting a picture of the print alongside the negative is useful. In fact there is only one minor point to comment adversely upon, and that is, when he advises against using bismuth subnitrate for the purpose of filling a sinus, it is not quite clear whether he means Beck's bismuth paste, which, properly used in the right class of case, is most useful.

The book can be thoroughly recommended, and the publishers have done their share of the work admirably.

BOMBAY MEDICAL COUNCIL.

FEBRUARY SESSION 1918.

THE HON. SURGEON-GENERAL R. W. S. LYONS,
M.D., I.M.S.,

President in the Chair.

1. *Read*—Letter dated Kolhapur, 21st August, 1917, from Sub-Assistant Surgeon Raghunath Vaman Bapat, stating that an Ayurvedic medical school has been started in Kolhapur; that the promoters of the same desire to impart elementary knowledge of western medicine to their students, and have asked men practising western medicine whether they would undertake to coach their students in

the elementary principles of anatomy, physiology, Medicine, etc.; and enquiring whether it would be legal on his part, in accordance with the Bombay Medical Act, if he either took their classes or co-operated with his brethren on the staff, imparting to the students the principles of western medicine.

Resolved—That the Bombay Medical Council does not consider the association of a registered practitioner with any institution adopting any particular theory of medicine or surgery illegal, provided such association does not include any act which would render a registered medical practitioner amenable to the discipline of the Council. In this connection Mr. Bapat's attention is drawn to the appended "Warning Notice."

2. It was resolved at the meeting of the Medical Council, held on the 3rd September, 1917—

"That Government be moved to amend the Bombay Medical Act so as to allow all practitioners registered in another province to be registered in Bombay free of charge, provided reciprocity is given in the matter by the other Councils; and that, before addressing Government, it be ascertained whether the other Medical Councils are prepared to accept the arrangement."

In pursuance of the above resolution, the other Medical Councils were consulted and their replies placed before the Bombay Medical Council. On a consideration of the replies received, the Council resolved—"That the Bombay Government be asked to refer the matter to the Government of India with a view to legislation, which will enable the different Medical Councils to act reciprocally with regard to registered practitioners, it being pointed out at the same time that the want of such legislation affects seriously military assistant surgeons and military sub-assistant surgeons."

3. The Council resumed the enquiry into the charge of infamous conduct in a professional respect within section 9 of the Bombay Medical Act, 1912, brought against Mr. Hormasji Manekji Masina, F.R.C.S. (Eng.), L.M. & s. (Bom.), a registered practitioner, he having caused, or knowingly and with his consent having permitted, to be published in the *Jame Jamshed* newspaper certain statements purporting to be in acknowledgement of donations to the "Dr. Masina Hospital Fund," in which statements laudatory references were made to him personally.

The Council after hearing Mr. B. J. Desai, Advocate, High Court, Bombay, who appeared on behalf of Mr. Masina, who was also present in person, passed the following resolution:—

"That the Medical Council having regard to the assurance given by Mr. Masina that he has requested the public press not to publish any donations containing any personal reference to

himself or laudatory notice regarding himself in any capacity whatever, and that in the event of any donations sent to him containing personal references to himself, he will cause the publication of the mere donations omitting all reference to himself, and that he will take all the means in his power to prevent the appearance of any public laudatory notice regarding himself, have resolved not to proceed further in this case."

4. The Council then proceeded to elect the six members of the Executive Committee for the year 1918. The voting resulted in the election of the following six gentlemen :—

Dr. Sorab Nariman.
Mr. A. G. Viegas.
Sir Temulji B. Nariman, *Kt.*
Col. W. E. Jennings, I.M.S.
Sir Balchandra Krishna, *Kt.*
Lieut.-Col. Thomas Jackson, I.M.S.

ANNUAL REPORTS.

MADRAS VACCINATION REPORT.

MAJOR W. A. JUSTICE, I.M.S., submits the report from which we take the following extracts :—

(ii) *Vaccine*.—The experiment of storing vaccine lymph in the raw condition, and grinding and mixing it with lanoline as required for issue, was discontinued. The vaccine was prepared throughout the year on the old method, and the bulk of the lymph supplied was lanolinated vaccine. Glycerinated vaccine also was supplied to Madras and to Colombo for seed lymph.

Supplies to local bodies of lanolinated vaccine were made fortnightly as usual. In a few selected towns, however, tri-monthly supplies were ordered as an experimental measure, to see whether such frequent supplies would effect any improvement in the local success rates. The result of the experiment is under observation. Its extension to other tracts will depend upon whether reports are favourable or not.

The total average success rate of the year was 86'81 per cent. of cases vaccinated against 87'70 per cent. in 1915-16. The highest rate (90'03 per cent.) was recorded in October and the lowest (82'55 per cent.) in June. Judged with reference to districts, Kurnool (96'85 per cent.) takes the first place and Godavari (68'34 per cent.) the last. The success rate was also bad in several other districts; Coimbatore and Godavari are conspicuous in returning lowest success rates year after year. Chingleput, their companion in previous years, shows some improvement during the year under review. The local bodies of all these three districts are fully aware of the uniform backward condition of vaccination in their jurisdictions. The reports received from them on this feature, with reference to paragraph 5 of G. O. No. 1299 L., dated 22nd September 1916, were duly forwarded to Government. Proposals to improve the present conditions in their districts have been framed, and revised instructions issued defining clearly the period within which the vaccine despatched from the institute should be used by the vaccinators. The putting in operation of these remedial measures is now in the hands of the local bodies, and the necessity of seeing that the revised regulations are properly enforced should be impressed upon them.

As in the past year loud complaints were received from several districts regarding the poor quality of

lymph, but none of these could stand close scrutiny and most of them were based on some change in the colour of the vaccine paste, due entirely to the kind of lanoline now obtained from England, but which in no way affects the quality of the lymph. What is, however, of much more serious consequence, in my opinion, than the reduced percentage of success is the lowered quality of the results secured in successful cases within the last few years. I have over and over again drawn attention to this increasing defect in my inspection notes on vaccination in the districts, and there is little doubt whatever that the persistence of small-pox in many districts is much due to this. The main cause for such continuous fall in success rate appears to be the ignorance and inefficiency of the present class of ill-paid, uneducated, and unqualified vaccinators. In every district there is dearth of suitable hands for vaccinator's appointment, as no one can be tempted into an employment which carries no living wage, while the duties attendant upon it are particularly arduous. The remedy lies in giving effect to the long deferred schemes of improving the pay and prospects of the vaccination staff.

The Secretariat comment on the report contains the following :—

The general results of the year were unsatisfactory both in regard to the number of operations performed and in regard to the degree of success obtained. Inspecting officers lay the blame for this state of affairs mainly on the ignorance and unreliability of many of the men employed as vaccinators, and the Government have for some time recognized the necessity of attracting a better class of men. While the inspecting staff is paid by Government, the vaccinators are employed by local boards and municipal councils; the resources of most of these local bodies are limited, and the pay given by many of them to their vaccinators is so small that it attracts only men who can get no employment in any other capacity. The Government have sanctioned an improvement in the pay and prospects of the deputy inspectors of vaccination from April next, and have urged on local bodies the necessity for a similar improvement of the pay and prospects of vaccinators, accompanied by an insistence on higher qualifications and character in the persons selected. More than one district board has already propounded a scheme of reorganization, and all are, it is believed, aware of the deficiencies in the present arrangements for protection against small-pox and willing to effect the necessary reorganization.

MADRAS TRIENNIAL HOSPITALS REPORT.

THIS report dated 19th July, 1917, only reached us in February, 1918. It is the last report written by Surgeon-General W. B. Bannerman, C.S.I., M.D., I.M.S., and is exceptionally interesting. We cannot do better than quote freely from it :—

INADEQUACY OF MEDICAL RELIEF.

After pointing out the still inadequate provision for the medical needs of the 43 millions of the inhabitants of the Madras Presidency, Surgeon-General Bannerman goes on to say :—

A question closely related to the inadequacy of medical relief is this : the number of private medical practitioners who can supplement the work of public institutions is very small in this country as compared with the United Kingdom, where, according to the latest available figures, the number of registered medical practitioners