

# Postgraduate Medical Journal

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Advertisement enquiries and bookings should be addressed to S. & H. Fretwell Ltd, 267 Portland Road, London, S.E.25 (tel: ADDiscombe 8921/2).

The Fellowship of Postgraduate Medicine was founded by a group of London consultants after the First World War to assist postgraduates, particularly those coming to London from the Commonwealth, to pursue their studies. The Fellowship first published the *Postgraduate Medical Journal* to give information about lectures, con-

ferences and courses and to provide a monthly review of all branches of medicine.

**Postgraduate Medical Journal** publishes original papers on subjects of current clinical importance and welcomes review articles with extensive, up-to-date bibliographies as guides to further reading. Several symposia are published every year, each devoted to a single subject and written, by invitation, by specialists in different disciplines. Every issue includes authoritative Current Surveys of clinical problems, as well as well-documented Reports of cases of particular interest, Book Reviews and Postgraduate News.

A 'Notice to Contributors' is published on the inside back cover of this issue. The Editor reserves the right to make changes which may clarify or condense papers where this is considered desirable.

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## Books received

- Systemic Pathology.* By G. PAYLING WRIGHT and W. ST. C. SYMMERS. Pp. 1675 with indexes, illustrated. Volumes I and II. London : Longmans, Green. 1966. 320s.
- Doctors and State Medicine. A Study of the British Health Service.* By GORDON FORSYTH. Pp. 169. London : Pitman Medical. 1966. 30s.
- Pancreatitis.* By T. T. WHITE. Pp. ix + 214, illustrated. London : Edward Arnold. 1966. 80s.
- Laboratory Handbook of Chromatographic Methods.* Edited by O. MIKES. Pp. 434, illustrated. London, etc. : D. Van Nostrand. 1966. 75s.
- Cardiac Pathology.* By R. LANNIGAN. Pp. 385, illustrated. London : Butterworths. 1966. £5 16s.
- The Pathology of Limb Ischaemia.* By J. HENRY DIBLE. Pathological Monographs, edited by Sir Roy Cameron and Professor G. Payling Wright, No. 3. Pp. 100, illustrated. Edinburgh and London : Oliver & Boyd. 1966. 57s 6d.
- Twenty Cases Suggestive of Reincarnation.* By I. STEPHENSON. Proceedings of the American Society for Psychical Research, Vol. XXVI. Pp. x + 362. New York : American Society for Psychical Research. Tadworth, Surrey : M. C. Peto. 1966. 32s.
- Laparoscopy in Gynaecology.* By P. C. STEPTOE. Pp. viii + 93, illustrated. Edinburgh and London : E. & S. Livingstone. 1967. 40s.
- Advances in Biology of Skin.* Vol. VII. Carcinogenesis, edited by WILLIAM MONTAGNA and RICHARD L. DOBSON. Pp. xiii + 358, illustrated. Oxford, London, etc. : Pergamon Press. 1966. £5 10s.
- The Myocardial Cell. Structure, Function and Modification by Cardiac Drugs.* Edited by S. A. BRILLER and H. C. CONN, JR. Heart Association of Southeastern Pennsylvania. Third International Symposium. Pp. 374, illustrated. Philadelphia : University Press; London : Oxford University Press. 1967. 64s.

## Book reviews

### Advances in Respiratory Physiology

Edited by COLIN G. CARO. Pp. 348, illustrated. London: Edward Arnold. 1966. 75s.

Eight distinguished research workers are responsible for chapters of a very high general standard effectively describing many of the growing points in this rapidly advancing science. The book is strictly a physiological text and in places makes difficult reading for the non-specialist. Professor Farhi himself says of his own subject (ventilation-perfusion relationships) 'Most writers in this area become resigned to the fact that they are speaking to but a small group, even among the respiratory physiologists.' However, there is a clear and deceptively simple account of the use of radioactive gases to study regional differences in blood flow and ventilation and another on the subject of cerebro-spinal fluid and the regulation of respiration. There is only one poor contribution 'Tissue Respiration' which is pedestrian and unstimulating.

The book is beautifully produced, well illustrated and it gives hundreds of references all by their full titles. It will be found very useful by perhaps rather a small range of medical and other scientists.

### Hospital Infection, Causes and Prevention, 2nd edn.

By R. E. O. WILLIAMS, R. BLOWERS, L. P. GARROD and R. A. SHOOTER. Pp. xii + 386, illustrated. London: Lloyd-Luke (Medical Books). 1966. 45s.

The new edition of this authoritative work which has been extensively revised will be welcome by all concerned with the problems of hospital infection. The first half of the book deals with the epidemiology of hospital infection and it is evident that further research is still needed to clarify the mode of transmission of many infections. Although staphylococci are ubiquitous there seems little evidence to contradict the view that the removal of cases with obvious sepsis to isolation will do most to limit spread. In a maternity unit there is no convincing picture of any one route by which staphylococci are disseminated. A better balance is achieved in this edition by devoting more space to non-staphylococcal infections.

It is only in the chapters dealing with the various infections encountered in hospital that the clinician might dispute a

few of the statements made. It is rare, for example, for herpes zoster to arise from a case of varicella. No mention is made of non-bacterial infantile gastroenteritis which at the present time is the cause of a majority of the severe cases with the decline in incidence and severity of the pathogenic serotypes of *E. coli*. Unfortunately attempts to isolate a virus have been unsuccessful in most cases.

The second half of the book deals with the control of hospital infection and will be invaluable to those planning new hospitals or dealing with day-to-day problems in hospitals which have long outlived their usefulness for the practice of modern medicine. It is unfortunate that in the majority of hospitals only lip service is paid to control of infection and the control of infection officer is either inactive or lacks effective support. The chapters dealing with architecture, operating suite design, control of infection in wards, sterilization and disinfection will do much to stimulate further thought on problems which do not get the attention they deserve.

This book should be read by all doctors as well as nurses and administrators. More interest must be shown if greater success is to be achieved in the control of hospital infection. To understand a problem is certainly more than halfway to its solution. Many doctors hardly admit that the problem exists in their hospital and, as the authors state, the problem is a universal one and whoever claims that his hospital is free from such troubles need only be invited to open his eyes a little wider.

### The Aetiology of Compressed Air Intoxication and Inert Gas Narcosis

By P. B. BENNETT. Vol. 31 of International Series of Monographs in Pure and Applied Biology—Zoology. Pp. xvi + 116, illustrated. Oxford: Pergamon Press. 1966. 35s.

In this age of rapid technical advancement it is easier to penetrate some 850 miles into outer space than descend 1000 ft into the sea. Dr Bennett in his monograph *The Aetiology of Compressed Air Intoxication and Inert Gas Narcosis* deals very fully with one of the most telling problems associated with hyperbaric conditions.

He begins his book with an introduction that is un-

## Postgraduate news

### FELLOWSHIP OF POSTGRADUATE MEDICINE

The Fellowship usually holds the following courses each year (approximate dates and times in parentheses):

#### Medicine (M.R.C.P.)

**General Medicine.** Connaught, London Chest, Whipps Cross Hospitals (four weeks, twice yearly, April/May, October/November), St Stephen's Hospital (evenings, four weeks, twice yearly). Whittington Hospital (evenings, five weeks, twice yearly, May/June, October/November). Queen Mary's Hospital for the East End (weekend, twice yearly, June, December). Ashford Hospital, Middlesex (two Saturdays, twice yearly, May, November).

**Infectious Diseases.** Hither Green Hospital (weekend, twice yearly, March/November).

**Paediatrics (D.C.H.).** Princess Louise Kensington Hospital (weekend, twice yearly, March, September/October).

#### Surgery (F.R.C.S.)

**General Surgery.** Connaught Hospital (weekend, twice yearly, April, September/October). Queen Mary's Hospital for the East End (weekend, once yearly, February). Royal Marsden Hospital (twice yearly, March and September).

**General Surgery and Orthopaedics.** Fulham Hospital (three weeks, evenings, twice yearly, March/April, September/October).

**Orthopaedics.** Rowley Bristow Hospital Pyrford (three alternate weekends, twice yearly, March/April, September/October).

**Plastic Surgery.** Queen Mary's Hospital, Roehampton (weekend, twice yearly, February, September).

**Clinical Attachments.** A limited number of clinical attachments in General Medicine will be available shortly at Bethnal Green Hospital for periods of up to 2 months, fee 4 guineas per week. Further details available from the secretary.

*Please note that instruction arranged by the Fellowship of Postgraduate Medicine is open only to Associates (annual subscription, 21s). Detailed syllabuses are published approximately 4-6 weeks before courses begin and are circulated to all Associates. No entries to courses can be accepted in advance of the syllabus being published.*

#### Current Courses

**Plastic Surgery (F.R.C.S.).** Queen Mary's Hospital, Roehampton. Weekend, 25, 26 February. Fee £5 5s.

**Orthopaedics (F.R.C.S.).** Rowley Bristow Orthopaedic Hospital. Three alternate weekends, 4, 5 March; 18, 19 March and 1, 2 April. Fee £18 18s (spectators £14 14s).

**General Surgery (F.R.C.S.).** Queen Mary's, East End. Weekend 11, 12 March. Fee £4 4s.

**General Surgery (F.R.C.S.).** Connaught Hospital. Weekend, 8, 9 April. Fee £5 5s.

**Thoracic Surgery (F.R.C.S.).** North Middlesex Hospital. 14, 15, 16 April. Fee £7 7s.

**General Surgery (F.R.C.S.).** Royal Marsden Hospital. 27 February to 21 April, Mondays and Fridays only. Fee £18 18s.

*Information regarding courses can be obtained from the office between 10 a.m. and 5 p.m., Mondays to Fridays (Telephone Chancery 6900), or by writing to the Secretary, Fellowship of Postgraduate Medicine, 9 Great James Street, London, W.C.1.*

### THE COMMONWEALTH AND INTERNATIONAL MEDICAL ADVISORY BUREAUX

The Bureaux are maintained by the British Medical Association to provide a personal advisory service to doctors visiting the United Kingdom from all parts of the world. General information, as well as that on postgraduate education and accommodation is given.

*All enquiries should be addressed to the Medical Director, Commonwealth and International Medical Advisory Bureaux, British Medical Association, Tavistock Square, London, W.C.1.*

### BRITISH POSTGRADUATE MEDICAL FEDERATION (University of London)

#### Advanced Course in Gastroenterology

A 1-week intensive course designed for Registrars and Senior Registrars who are interested in the subject and who are able to obtain the necessary study leave, will be held from 13 to 17 March 1967. Two days will be spent at the Royal Free Hospital and the Royal Postgraduate Medical School and 1 day at the Central Middlesex Hospital. The course fee is £10 10s.

*Application forms may be obtained from the Central Office of the Federation, 18 Guildford Street, London, W.C.1. Numbers are limited to forty and the closing date for the receipt of applications is 13 February 1967.*

#### CAMBRIDGE

##### Cambridge University Postgraduate Medical School

A summary of postgraduate facilities available at Addenbrooke's Hospital from October to July can be obtained from the Secretary of the Medical School. Arrangements can be made for practitioners to attend the practice of the Teaching Hospital Group for short or long periods.

##### Postgraduate Courses for General Practitioners

**At Cambridge:** Saturday 4 March at 10.30 a.m. at Addenbrooke's Hospital: Obstetrics and Gynaecology.

**ONE-WEEK REFRESHER COURSES** for general practitioners will be held from 3-8 July and 10-15 July 1967.

**At Ipswich:** at the Anglesea Road Wing, East Suffolk and Ipswich Hospital. Clinical Society Meetings will be held on the second Wednesday of the month at 8.30 p.m.

'Friday Club' Discussion Groups for General Practitioners take place on the first and third Fridays each month until 21 July between 1.45 and 2.45 p.m., preceded by buffet lunch.

An Introductory Course in Family Psychiatry will be held from 13 to 17 March 1967.

**At Bury St. Edmunds:** Clinical Meetings, Lunch time forums, and Medical Film/Discussions are held regularly at the West Suffolk General Hospital. Detailed timetables may be obtained from the Clinical Tutor.

**At Norwich:** Details of the postgraduate education arrangements may be obtained from the Secretary, Norfolk and Norwich Institute for Medical Education, Norfolk and Norwich Hospital.

**At Great Yarmouth:** A Dermatology Clinical Meeting will be held at the Northgate Hospital on Sunday 5 February at 10.15 a.m.

**At Ely:** Half-day ward round/discussions will be held at the R.A.F. Hospital at 10.30 a.m. on the second Sunday in February, March and April 1967.

*Further particulars and enrolment forms may be obtained from the Secretary of the Medical School, Tennis Court Road, Cambridge.*

### LIVERPOOL

**University of Liverpool** Full-time courses are held in Surgery, Orthopaedic Surgery, Radio-diagnosis, Radiotherapy, Public Health, Tropical Medicine and Hygiene, Anaesthesia and Venereology.

Part-time courses are held in Medicine, Psychological Medicine, Oto-Rhino-Laryngology, Child Health, Obstetrics and Gynaecology.

After fulfilling the regulations, candidates may become eligible to take the degrees of Ch.M., M.Ch.Orth., and M.Ch.Otol., and the Liverpool Diplomas, D.P.H., D.P.M., D.T.M. & H., D.M.R.(D) or D.M.R.(T.).

The other courses are designed for students working for the London Diplomas.

*Further information may be obtained from the Heads of the appropriate departments of The University, Liverpool 3.*

### OXFORD

**University of Oxford** Enquiries about research and specialist training attachments may be addressed to the head of the relevant clinic or laboratory department in one of the teaching hospitals (United Oxford Hospitals, Nuffield Orthopaedics Centre, Warneford and Littlemore Hospitals) or to the Director of Postgraduate Medical Studies. Enquiries about resident obstetric attachments and individual programmes of attendance on the hospital practice for general practitioners (arranged as 'intensive courses'), and extended teaching for M.R.C.P. and F.R.C.S. candidates to the Director of Postgraduate Medical Studies, Osler House, 43 Woodstock Road, Oxford.

### THE COLLEGE OF GENERAL PRACTITIONERS MEDICAL RECORDING SERVICE AND SOUND LIBRARY

New titles available all on tape (5 inch reels 3½ ips.) which may be borrowed by any doctor anywhere in the world.

Diabetic Coma — Dr Michael Harrison.

Disorders of Cardiac Rate and Rhythm — Dr J. McGuinness.

Porphyrias — Dr A. Goldberg.

Multiple Myeloma — Dr A. Goldberg.

Severe Measles — Dr D. Morley.

Protein Calorie Deficiency — Dr D. Morley.

Marital Problems — Dr Sylvia Dawkins.

General Practitioner and the Virus Laboratory — Dr R. Pilsworth.

Oral Contraception — Dr G. I. M. Swyer.

Breast Feeding — Mrs D. Scott.

How Safe is the Safe Period — Dr P. F. E. Brown.

Urinary Tract Neoplasms in Rubber Workers — Mr J. MacDougall.

*A complete library list and details of the service can be obtained from Drs John and Valerie Graves, Kitts Croft, Writtle, Chelmsford, Essex.*

### UNIVERSITY OF EXETER

#### Postgraduate Medical Institute

A full-time postgraduate course lasting 10 weeks will begin on the 19 April 1967. These courses are held three times a year starting in October, January and April. They are intended to meet the needs of both overseas graduates and British medical practitioners. For overseas graduates they provide an introductory course to British Hospital Practice before proceeding to hospital posts in the National Health Service or to specialized instruction for a postgraduate diploma elsewhere. For British graduates they provided a refresher course which is suitable for those returning from overseas or from H.M. Forces, for married women graduates returning to active practice, or for general practitioners who are prepared to undertake extended postgraduate courses of this nature. It is sometimes possible to accept general practitioners for 1 or 2 weeks of a course and attendance for this period is recognized by the Ministry under Section 48 of the N.H.S. Act (1946).

Each course includes instruction in general medicine, paediatrics, preventive medicine, pathology, psychiatry, orthopaedics and general surgery. The programme is planned so that students wishing to specialize in a particular clinical subject are given facilities to do so, while other students receive teaching in each of the main clinical departments. Fee £40.

Unpaid clinical attachments can be arranged at the end of the course for students requiring a longer period of training.

*Further particulars and application forms for these courses are obtainable from the Director, Postgraduate Medical Institute, The University, Exeter, Devon.*

### WEST MIDDLESEX HOSPITAL

#### Postgraduate Medical Lectures, 1967

1 March. Surgical Disorders of the Pancreas. Mr D. E. Bolt and Mr J. Scholefield, West Middlesex Hospital.

15 March. Vagotomy in the Treatment of Peptic Ulcer. Professor H. Ellis, Westminster Hospital.

12 April. The Genetics of Common Diseases. Dr C. O. Carter, Institute of Child Health, London.

Wednesdays 5 p.m. in Lecture Theatre, West Middlesex Hospital, Isleworth, Middlesex. Tea and Biscuits 4.45 p.m.

*Free tickets obtainable from Secretary, Medical Centre, West Middlesex Hospital, Isleworth, Middlesex.*

# Postgraduate Medical Journal: Notice to Contributors

**Typescripts** (two complete copies) should be sent to the Editor, Dr A. A. G. Lewis, Postgraduate Medical Journal, 9 Great James Street, London, W.C.1. Papers should be typewritten on one side of the paper only, with a 1½ inch margin, and the lines should be double-spaced. In addition to the title of the paper there should be a 'running title' (for page headings) of not more than 45 letters (including spaces). The paper should bear the name of the author(s) with their degrees and descriptions and of the laboratory or research institute where the work has been carried out. The full postal address of the principal author should be given as a footnote. (The proofs will be sent to this author and address unless otherwise indicated).

**Arrangement.** Papers should normally be divided into: (a) Introduction; (b) Materials and methods; (c) Results, as concise as possible (both tables and figures illustrating the same data will rarely be permitted); (d) Discussion and conclusions; (e) Summary, brief, self-contained and embodying the main conclusions; (f) Acknowledgments; (g) References.

**References.** Only papers closely related to the author's work should be included; exhaustive lists should be avoided. References should be made by giving the author's surname, with the year of publication in parentheses. When reference is made to a work by three authors all names should be given when cited for the first time, and thereafter only the first name, adding *et al.*, e.g. Smith *et al.* (1958). The '*et al.*' form should always be used for works by four or more authors. If several papers by the same author and from the same year are cited, a, b, c, etc., should be put after the year of publication, e.g. Smith *et al.* (1958a). All references should be brought together at the end of the paper in alphabetical order. References to articles and papers should mention (a) name(s) of the author(s); (b) year of publication in parentheses; (c) title of paper; (d) title of journal, underlined, abbreviated according to *World Medical Periodicals* (3rd edn, World Medical Association); (e) volume number; number of first page of article. References to books and monographs should include (a) name(s) and initials of author(s) or editor(s); year of publication in parentheses; (b) title, underlined; (c) edition; (d) page referred to; (e) publisher; (f) place.

**Standard usage.** The *Concise Oxford English Dictionary* is used as a reference for all spelling and hyphenation. Verbs which contain the suffix *ize* (*ise*) and their derivatives should be spelt with the *z*. Statistics and measurements should always be given in figures, i.e. 10 min, 20 hr, 5 ml, except where the number begins the sentence. When the number does *not* refer to a unit of measurement, it is spelt out

except where the number is greater than one hundred.

**Abbreviations.** Abbreviations for some of the commoner units are given below. The abbreviation for the plural of a unit is the same as that for the singular unless confusion is likely to arise.

gram(s)	g	second(s)	sec
kilogram(s)	kg	cubic millimetre(s)	mm <sup>3</sup>
milligram(s)		millimetre(s)	mm
(10 <sup>-3</sup> g)	mg	centimetre(s)	cm
microgram(s)		millicurie(s)	mCi
(10 <sup>-6</sup> g)	µg	millilitre(s)	ml
nanogram(s)		pound(s)	lb
(10 <sup>-9</sup> g)	ng	milliequivalent	mEq
picogram(s)			
(10 <sup>-12</sup> g)	pg	R <sub>F</sub> values	R <sub>F</sub>
hour(s)	hr		
minute(s)	min	gravitational acceleration	g
		micron(s)	µ
		per cent	%

Example: mg/100 ml, for biochemical values; mEq/l.

**Figures.** In the text these should be given Arabic numbers, e.g. Fig. 3. They should be marked on the backs with the name(s) of the author(s) and the title of the paper. Where there is any possible doubt as to the orientation of a figure the top should be marked with an arrow. Each figure must bear a reference corresponding to a similar number in the text. Photographs and photomicrographs should be unmounted glossy prints and should not be retouched. Line diagrams should be on separate sheets; they should be drawn with black Indian ink on white paper and should be about four times the area of the final reproduction. Lines and lettering should be of sufficient thickness and size to stand reduction to one-half or one-third. Letters and numbers must be written lightly in pencil. Whenever possible, the originals of line diagrams, prepared as described above, should be submitted and not photographs. The legends of all the figures should be typed together on a single sheet of paper headed 'Legends to Figures.'

**Tables.** There should be as few tables as possible and these should include only essential data; the data should not be crowded together. The main heading should be in capitals with an Arabic number, e.g. TABLE 2. Each table must have a caption in small letters. Vertical lines should not be used.

**Page proofs** will be submitted to the contributors for minor corrections and should be returned to the Editor within 3 days. Major alterations to the text cannot be accepted.

**Offprints.** These may be purchased if ordered on the form which will be sent to the senior author with the proofs.