Postgraduate Medical Journal

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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, conferences 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


New Editions


Book reviews

Persistent Persecutory States of the Elderly

The conditions named in the title cover a range of symptoms from persistent hallucinatory illness to a syndrome generally recognized as schizophrenia. Dr Post finds that despite certain differences in symptomatology these syndromes constitute a group whose members differ little in background, evolution of illness and prognosis. The outlook has however been strikingly changed by the use of phenothiazine drugs. Dr Post's material covers the period before and since the introduction of these drugs in a series of ninety-three carefully studied patients. He reports that phenothiazines had an excellent effect on the disordered mental state of well over half the patients treated. The book is important for the clear, systematic way in which this useful finding is established and contrasted with the situation before the drugs were introduced, when recovery was exceptional. It is also important as a contribution to the understanding of the schizophrenias. The difficulty in research in psychiatry is three-fold. Firstly, conditions are hard to define being often variable and intangible. Secondly clinical observations by their nature are often particularly difficult to repeat and thirdly such observations are most open to influence by observer bias. The achievement is then all the greater when the skilled clinician makes a sound contribution as does the author in this short volume. The only fault is the garish dust jacket.

Methods in Psychophysiology

This review comes admirably close to achieving the editor's stated aims. The field of instrumentation in psychophysiology is very complex; the problems of standardization are often immense and many of the more thorough investigators become daunted by them and start to ponder whether the direct study of the psyche itself can be any more difficult. This book starts from such an awareness. The editor has gathered together nearly twenty contributors, each eminent in the field about which he writes and also able to communicate his subject clearly. A basic knowledge of physics and electronics is essential for the reader. Given this he will find valuable chapters devoted to measurement of skin activity, respiratory activity and cerebral activity. Also chapters on techniques of plethysmography, measurement of blood flow and blood pressure, measurement of salivation and telemetric techniques. Towards the end of the book chapters on classical and operant conditioning lead on to consideration by other authors of computer techniques and processes. All the authors are American but there is some attention to the relatively small amount of work now going on in the field of psychophysiology in this country.

Psychiatry

The production of a second edition of this book so soon after the first edition is probably a fair measure of its popularity. This edition has a second author and the contents well reflect their wide experience and the sensible eclectic positions of the two university departments concerned. It is suitable both as a textbook for students and as a primer for trainee psychiatrists. It is clinically oriented, concise and yet fairly comprehensive. The good and relatively lengthy initial chapter on descriptive psychopathology is retained. The second chapter on methods of psychiatric examination is followed by a brief description of some aetiological factors in mental disorder. Reference to dynamic psychopathology is slight both here and throughout the book and this is the present reviewer's main criticism of it. The next twenty or so chapters are devoted to careful descriptions of the whole range of psychiatric disorder. Two chapters on treatment, mainly social and psychopharmacological aspects, are followed by two concluding and useful chapters devoted to social and legal aspects of psychiatry, respectively.
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, Whips 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).


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, 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.

CURRENT COURSES


General Medicine (M.R.C.P.) Ashford Hospital, Middlesex. Two Saturdays, 18 and 25 May. Fee £5 5s.

Rheumatology (M.R.C.P.). St Stephen's Hospital, Fulham. Weekend 7, 8 and 9 June. Fee £7 7s.

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.

Information regarding courses can be obtained from the office between 10 a.m. and 5 p.m., Mondays to Fridays (Telephone 242–6900), or by writing to the Secretary, Fellowship of Postgraduate Medicine, 9 Great James Street, London, W.C.1.

LIVERPOOL

University of Liverpool. Courses are held in Anaesthesia, Child Health, Medicine, Obstetrics and Gynaecology, Orthopaedic Surgery, Otorhinolaryngology, Psychological Medicine, Public Health, Radiodiagnosis and Radiotherapy, Surgery, Tropical Medicine and Hygiene and Venereology.

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. There is also a day-release course in the Basic Medical Sciences for junior hospital staff.

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 clinical or laboratory department in one of the teaching hospitals (United Oxford Hospitals, Nuffield Orthopaedic Centre, Warneford and Littlemore Hospitals) or to the Director of Postgraduate Medical Studies. Enquiries about study days and weekly classes at Oxford for M.R.C.P., F.R.C.S., M.R.C.O.G., F.F.A., D.P.M., D.M.R., candidates from the Oxford region, general practitioner refresher courses, resident obstetric and other clinical attachments, to the Director of Postgraduate Medical Studies, Osler House, 43 Woodstock Road, Oxford, from whom also information about the Medical Centres at Aylesbury, Kettering, Northampton, Reading, Swindon and Wycombe may be obtained.

GLASGOW

Surgery. An intensive course of instruction in the basic sciences suitable for candidates preparing for the Primary Fellowship Examination in Surgery is held from October to December. A modified form of the course is available for candidates preparing for the D.A. or F.F.A. examinations. Fee £30.

Anaesthetics. A course for specialist anaesthetists and for those preparing for the final part of the F.F.A.R.C.S. will be held in May. Fee £10 10s.

Medicine. An intensive course on Recent Advances in Clinical Medicine suitable for candidates preparing for the Membership Examination is held twice annually for a fortnight in March and September. Fee £15 15s.

Geriatrics. A course for trainee specialists in Geriatric Medicine or General Practitioners in charge of geriatric beds in hospitals is held in May. Fee £7 10s.

Child Health. A formal course held in May and November for those preparing for the D.C.H. and M.R.C.P. with Child Health as a special subject. Fee £15 15s.

Obstetrics. An intensive week's course of instruction in obstetrics for those preparing for the D.Obst.R.C.O.G. held in September. Fee £7 10s.

Mental Deficiency. An intensive course in Mental Deficiency is held for 3 weeks in October. The course includes lectures and demonstrations in mental handicap and deficiency, instruction in mental testing and visits to institutions. Fee £18.

Introduction to Psychiatry. An intensive course providing a general introduction to psychiatry is held for 3 weeks in November. The course includes theoretical and clinical instruction in child psychiatry and psychology and adult psychiatry. It is particularly suitable for medical officers concerned with public health. Fee £18.

Steroid Endocrinology. A course for clinicians and hospital laboratory workers with special interest in Endocrinology and those in general medicine who wish to have a better understanding of treatment with steroid hormones is held in April. Fee £15.

Diagnostic Virology. A course for experienced laboratory workers who wish to develop diagnostic virology for epidemiological purposes in this country and abroad is held in April. Fee £25.

Histopathology of the Skin. A course for pathologists and those with some training in pathology is held for 1 week in March. Fee £7 10s.

Forensic Medicine. A postgraduate course in the University Department of Forensic Medicine is held for 10 weeks from April to June. Fee £15.

Clinical Attachments. A scheme for clinical attachments in general medicine, general surgery and various specialties has been arranged to assist those working for higher qualifications. An attachment may be started at any time. No formal instruction is given, but participants can gain intensive clinical experience by following the day-to-day work of a unit in a Glasgow teaching hospital. Fee £5 per month. Registration Fee £1 1s.

Teaching Ward Rounds. Each academic term a course of ten teaching ward rounds in Medicine is arranged. These occupy one afternoon a week. Fee £8 8s.

Radiology. A course in radiological interpretation for clinicians. Lecture demonstrations on alternate Tuesdays in conjunction with Teaching Ward Rounds. Fee £5 5s.


Research Techniques in Experimental Surgery and Anaesthesia. A 2-day course giving an introduction to research techniques in Experimental Surgery and Anaesthesia. March. Fee £3 3s.

Steroid Endocrinology. A course for clinicians and hospital laboratory workers with a special interest in Endocrinology or for those in General Medicine who wish to have a better understanding of treatment with steroid hormones. April. Fee £15.

Medical Ophthalmology. An intensive weekend course on the ophthalmological aspects of general medicine. Suitable for M.R.C.P. candidates. May and October. Fee £5 5s.

GENERAL PRACTITIONER COURSES

Two Refresher Courses for general practitioners are held annually - for a fortnight in May and September. Two-week postgraduate residencies are available continuously in maternity hospitals in the Western Region.

Clinical Attachments - continuous. Full-time or part-time attachments to hospital teaching units to enable General Practitioners to increase their experience and keep up to date with recent trends and advances. Fee £1 5s. per week for full-time attachment.

Extended Courses and 1-day course covering selected topics in general subjects or the specialties held in teaching hospitals in Glasgow and principal hospitals in other parts of the Western Region. Meetings are generally held on Sundays from October to May and are arranged by the West of Scotland Faculty of the College of General Practitioners from whom full details are available.

Full-time Course. The Board offers full-time postgraduate courses in Radiology (2 years) and Radiotherapy (2 years). The University offers full-time postgraduate courses leading to the following diplomas:

- Diploma in Public Health (1 year)
- Diploma in Clinical Psychology (2 years).

Conference. Specialist conferences on various topics are held twice a year in the Hall of the Royal College of Physicians and Surgeons. In these, invited guests and local speakers discuss current topics and time is provided for audience participation. These conferences are designed particularly for consultants and registrars.

Further information and application forms can be obtained from the Director of Postgraduate Medical Education, The University, Glasgow, W.2.

NEWCASTLE UPON TYNE

Courses of three to four sessions in various Medical and Surgical subjects on a weekly sessional basis during term-time. Suitable for those preparing for a higher qualification.

Clinical attachments, full-time or part-time, throughout the year.
Attachments of 1 or 2 weeks for general practitioners in General Medicine, Dermatology, Obstetrics, Paediatrics, Psychiatry, Geriatrics and other subjects by arrangement. Recognized under Section 48 of the N.H.S. Act.

Further details from the Postgraduate Sub-Dean, Organization for Postgraduate Medical Education, The Medical School, The University, Newcastle upon Tyne.

University courses for postgraduate diplomas. D.P.M. and D.P.H. Further details from the Assistant Registrar, Medical School, The University, Newcastle upon Tyne.

THE ROYAL COLLEGE
OF GENERAL PRACTITIONERS

Medical Recording Service
Kitts Croft, Writtle, Chelmsford, Essex. (Tel. Writtle 316). Selection of titles available on tape (5 in reels running at 3 1/2 ips). These talks may be borrowed by any doctor anywhere in the world.

New titles available on tape

68–16 Road Smash rescue is your concern—Dr K. Easton. 55 min. 65 slides.
68–14 A Junkie Talks—a personal story. 19 min. (Only available to medical and medico-social workers.)

WEST MIDDLESEX HOSPITAL

Postgraduate Medical Lectures
8 May: The Cardiomyopathies—Professor J. F. Goodwin, Royal Postgraduate Medical School.
15 May: Peptic Problems—Mr A. G. Cox, Royal Postgraduate Medical School.
22 May: The Long-Term Effects of Oral Contraceptives—Dr W. R. S. Doll, University College Hospital Medical School.
29 May: Hypertension—Professor W. S. Peart, St Mary's Hospital.
5 June: Tumor Growth and Control. Problems and Prospects—Dr K. D. Bagshawe, Fulham Hospital.
12 June: Human Mycoplasma Infections—Dr H. P. Lambert, St George's Hospital.
19 June: Sex Chromosome Abnormalities—Professor C. J. Dewhurst, Queen Charlotte's Maternity Hospital.
26 June: Megaloblastic Anaemia—Professor D. L. Mollin, St Bartholomew's Hospital.

Wednesdays at 5.0 p.m. in Lecture Theatre, West Middlesex Hospital, Isleworth, Middlesex.
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 ½ 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. (1958b). 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.

<table>
<thead>
<tr>
<th>Unit</th>
<th>Symbol</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>gram(s)</td>
<td>g</td>
<td>mg/l</td>
</tr>
<tr>
<td>kilogram(s)</td>
<td>kg</td>
<td>cm</td>
</tr>
<tr>
<td>milligram(s)</td>
<td>mg</td>
<td>mm</td>
</tr>
<tr>
<td>microgram(s)</td>
<td>μg</td>
<td>cm</td>
</tr>
<tr>
<td>nanogram(s)</td>
<td>ng</td>
<td>mm</td>
</tr>
<tr>
<td>picogram(s)</td>
<td>pg</td>
<td>ml</td>
</tr>
<tr>
<td>hour(s)</td>
<td>hr</td>
<td>mCi</td>
</tr>
<tr>
<td>minute(s)</td>
<td>min</td>
<td>mEq</td>
</tr>
<tr>
<td>micron(s)</td>
<td>μ</td>
<td>%</td>
</tr>
</tbody>
</table>

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.