temperature and respiration rate, the roseolar rash, and the special agglutination tests.

Rubella, Fourth disease, Pertussis, Measles, Mickulwicz's syndrome and Trichiniasis by a careful history, a methodical examination of signs and symptoms, a blood picture, and the Paul Bunnell test.

The *hepatic* type should be differentiated from:—

Other forms of jaundice, whether they be obstructive, toxic, or hemolytic. The blood picture, a positive Paul Bunnell, a liver punch biopsy, glandular enlargement, and catarrhal bronchitis, together with jaundice, are the distinguishing features.

Treatment.

Treatment at best is purely symptomatic. The patient should be put to bed until apyrexial and until the glands show a reduction in size. No specific treatment has so far been evolved; the latest drugs to be tried being the sulphanilamides, but the results have not been convincing. Sears has suggested that sulphonamides may be hazardous in infectious mononucleosis because of the present co-existence of granulocytopenia. For this reason sulphadiazine or sulphathiazole are indicated in the anginose type, where granulocytopenia is not an uncommon feature.

Berkeley (1942) has put forward the therapeutic value of anti-scarlatinal serum in the treatment of infectious mononucleosis.

In convalescence, tonics and iron together with a quiet country or sea-side holiday of 4-6 weeks is beneficial.

Preventative measures are particularly indicated in boarding schools. Notification, isolation, and enforcement of the preventative measures laid down in the Ministry of Health Infectious Disease Order are all that are required.

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CORRESPONDENCE

Wellcome Museum of Medical Science Wellcome Historical Medical Museum

SIR,

Frequent enquiries are being received, both from this country and abroad, with regard to the two Wellcome Museums. They are, and will continue to be, housed in the Wellcome Research Institution, 183-193, Euston Road, N.W. 1. Although the Wellcome Research Institution building suffered considerable damage by enemy action, its structure was unharmed and the Museums can quickly be put into shape again as soon as labour and materials become available after the war.

While some of the objects in the Wellcome Historical Medical Museum were damaged, it has been possible to replace or repair most of them. Fortunately the specimens and other valuable material in the Wellcome Museum of Medical Science remained comparatively intact.

Both Museums are now under the Directorship of Dr. S. H. Daukes. A comprehensive scheme for the Wellcome Historical Medical Museum has been prepared and will be brought to completion as speedily as possible after the cessation of hostilities.

The Wellcome Medical Library, comprising over 150,000 volumes, will also be in the same building and suitable accommodation will be provided for research workers so that both the Library and Collections may be readily available.

The Wellcome Museum of Medical Science—which in the past has been much used by teachers, students and those engaged in post-graduate studies—will be re-established in its entirety at the end of the war with the utmost possible speed. The large Lecture Hall will be fully re-equipped, including film projection apparatus, and will then be available for scientific lectures and meetings.

Yours faithfully,
 L. G. MATTHEWS,
Secretary.