MEDICAL SICKNESS ANNUITY AND LIFE ASSURANCE SOCIETY, LIMITED.

HIGHFIELD, CHESTERTON,
CIRENCESTER, GLOS.

March 13, 1944.

The Editor, POST-GRADUATE MEDICAL JOURNAL.

SIR,

This letter is prompted by a desire to make known to Medical and Dental Practitioners what attempts are being made to safeguard Insurance benefits in the varying conditions of War at home and overseas. We, as Directors of the Medical Sickness, Annuity and Life Assurance Society, feel that it is of vital importance that Members and non-Members alike should know of the beneficial concessions granted by the Society to the Professions which it serves.

Sickness and Accident Policies have always excluded claims caused or aggravated by War. This is a very wide clause and so unsatisfactory that the Society now looks upon all claims not directly due to enemy action as covered by the ordinary conditions of the Policy, while those directly due to enemy action are dealt with by an *ex gratia* payment.

Ex gratia payments are made for incapacity due to enemy action, full benefit being paid for thirteen weeks, with reduced benefit for a further thirteen weeks, and reconsideration thereafter. If the incapacity arises in the United Kingdom benefit begins at once, while if it arises overseas it commences from the date of embarkation for the United Kingdom. Those who hold Deferred Benefit Policies are eligible for the same benefits if incapacity persists at the end of the deferred period, which is deemed to start on embarkation for the United Kingdom if the incapacity arises overseas.

Service Members at home are paid benefits for all incapacity not due to enemy action. In addition to this, although benefit in pre-War times was restricted to the United Kingdom, except for small concessions on the Continent of Europe, claims not due to enemy action are now paid in any part of the world while under In-patient treatment in Hospital, or from the date of embarkation for the United Kingdom if invalidated home.

Prisoners of War are exempted from payment of all Sickness premiums until they are repatriated, when they can, on arrival home, again bring the Policy into full operation without further medical examination.

As regards Life Assurance all pre-War Whole Life and Endowment Assurances are issued without restriction, but since the War a standard exclusion has been adopted by all Life Offices. This limits the payment in the event of death directly or indirectly due to War, to the return of premiums or payment of the Surrender Value, whichever is the greater. We have now resolved in principle to limit this exclusion to death directly due to enemy action, and it is hoped to pay in full all other claims whether arising on Service or not.

R. J. MCNEILL LOVE,
*Chairman.*G. ROCHE LYNCH,
*Director.*CECIL P. G. WAKELEY,
*Director.*BERTRAM SUTTON,
*Manager and Secretary.*L. BROMLEY,
*Director.*A. H. DOUTHWAITE,
*Director.*A. HOPE GOSSE,
Director.

BOOK REVIEW

A PRACTICE OF ORTHOPAEDIC
SURGERYBy T. P. McMURRAY. 2nd edition. Edward
Arnold & Co., London. 1943. Price 30s.

The fact that fractures are not dealt with in a work with such a title will come as a surprise to readers who have come to regard all fractures as passing into the realm of orthopaedic surgery, though the author in his preface to the first edition explains this omission.

The use of splints and appliances seems more pronounced than one finds in some clinics to-day, where plaster of Paris plays such a predominant role. The author states that one of the disadvantages of plaster of Paris is that one cannot use it in the presence of sinuses; surely this is not in accordance with the teachings of Winnett Orr and

Trueta, which have had such a profound influence on modern treatment.

It is interesting to note that the author still uses a shoe raised on the inner side of the heel and sole for flat foot, whereas Farquharson in his book believes that a sole raised on the outer side and a heel raised on the inner side is better.

The treatment outlined is orthodox and conservative, though its underlying principles are well set out. The book will appear a little dull and uninspiring to those seeking recent advances, but it covers a wide field, and should prove of great value to the senior students for whom it is intended, and also to the hospital resident, especially in children's or orthopaedic hospitals.

The fact that a second edition of a rather specialised work has appeared within six years of the first edition shows that it has a considerable appeal.