

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 infor-

mation 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

- Structure and Function of Inhibitory Neuronal Mechanisms.* Edited by C. VON EULER, S. SKOGLUND and UN SODERBERG. Pp. 563, illustrated. Oxford: Pergamon Press, 1968. £9 5s.
- Chemical Biology of Inflammation.* Edited by J. C. HOUCK and B. K. FORSCHER. Pp. vii + 333, illustrated. Oxford: Pergamon Press, 1968. £6 6s.
- Clinical Acid-Base Physiology.* By POUL KILDEBERG. Pp. 228, illustrated. Copenhagen: Munksgaard, 1968. Price not stated.
- Bronchial Carcinoma.* By B. T. LE ROUX. Pp. 144. Edinburgh and London: E. & S. Livingstone, 1968. 35s.
- Medical Research Council Annual Report.* April 1967 to March 1968. Pp. 356, illustrated. London: H.M.S.O., 1968. £1 11s.
- Cystic Fibrosis.* Edited by R. PORTER and M. O'CONNOR. Ciba Foundation Study Group No. 32. Pp. 150, illustrated. London: J. & A. Churchill, 1968. 25s.
- Cure for Cancer.* By S. GARB. Pp. 310. New York: Springer, 1968. \$6.75.
- The Older Patient. An Introduction to Geriatrics.* By R. E. IRVINE, M. K. BAGNALL and B. J. SMITH. Pp. 212. London: English Universities Press, 1968. 32s. 6d.
- Cell Calcium.* By C. P. BIANCHI. Pp. 131, illustrated. London: Butterworths, 1968. 45s.
- Data Acquisition and Processing in Biology and Medicine.* Vol. 5. Edited by K. ENSLEIN. Pp. 377, illustrated. Oxford: Pergamon Press, 1968. 126s.
- New Editions**
- Child Health in the Tropics.* Edited by D. B. JELLIFFE. Third Edition. Pp. 165. London: Edward Arnold, 1968. 12s. 6d.
- Clinical Bacteriology.* By E. J. STOKES. Third Edition. Pp. 345, illustrated. London: Edward Arnold, 1968. 50s.
- Surgery of Repair as Applied to Hand Injuries.* By B. K. RANK, A. R. WAKEFIELD and J. T. HUESTON. Third Edition. Pp. 350, illustrated. Edinburgh and London: E. & S. Livingstone, 1968. 75s.
- Fundamental Techniques of Plastic Surgery and their Surgical Applications.* By I. A. MCGREGOR. Fourth Edition. Edinburgh and London: E. & S. Livingstone, 1968. 35s.
- Logan Turner's Diseases of the Nose, Throat and Ear.* Edited by J. P. STEWART. Seventh Edition. Bristol: John Wright, 1968. 70s.
- Introduction to Clinical Neurology.* By SIR GORDON HOLMES. Third Edition. Edinburgh and London: E. & S. Livingstone, 1968. 35s.
- Operative Surgery. General Principles and Breast.* Edited by CHARLES ROB and RODNEY SMITH. Second Edition. London: Butterworths, 1968. Volumes not published separately. Vols. 1-6, £50. Full fourteen volume set, £97.

Book reviews

Heredity and Environment in the Functional Psychoses. An Epidemiological-Clinical Twin Study

By EINER KRINGLEN. Pp. 200. London: William Heinemann Medical Books, 1968. 65s.

This is a scholarly report of an extensive and evidently honest retrospective study conducted by the author. The principal psychosis under examination was schizophrenia but affective illness was also included. The author has investigated the majority of co-twins, dizygotic and monozygotic, whose twins were known to have had a functional psychosis and who were born in Norway some time during the first 30 years of this century, according to the National Birth Register records. This relatively unselected group was intensively pursued and studied via hospital records, reports from the family and local officials, and formal interview with the majority of subjects. A variety of clearly defined and strict diagnostic criteria were used.

Kringlen's findings emerged as middle of the road as far as the nature/nurture controversy is concerned. Concordance for schizophrenia in the monozygotic pairs was 25-38% depending upon the diagnostic procedure used and 4-10% in the dizygotic pairs. Four pairs of monozygotic twins (three with schizophrenia and one with mania in the proband) and where each pair had been mainly raised apart during their childhood, revealed marked differences in personality and behaviour between the pairs in three instances.

His conclusions are tentative; he favours a polygenic inheritance of non-specific vulnerability for both schizophrenia and affective psychosis and he suggests that the influence of environmental factors is of considerable importance both in modifying the vulnerability and shaping the

nature of the potential syndromes and symptoms. The study serves as an excellent model for this type of investigation. The methodology is sound and clearly described and the inevitable limitations of retrospective studies are revealed and found to be not overriding.

Biological Psychiatry. A Review of Recent Advances

By J. R. SMYTHIES, with the collaboration of ALEC COPPEN and NORMAN KREITMAN. Pp. viii + 112, illustrated. London: William Heinemann Medical Books, 1968. 30s.

This small volume is, in the main, clearly and concisely written with a great deal of information condensed into its 100 or so pages. It mainly reflects the research findings of the first two authors whilst the third author in addition makes a contribution from his broader clinical understanding, placing in fuller perspective the biochemistry of the psychoses under discussion. It seems that research psychiatrists are at last becoming able to view the field of psychiatric illness in both biochemical and social experimental terms at the same time; no longer are they finding such concepts mutually exclusive.

Despite its promise of a comprehensive review of recent advances in biological psychiatry the book only deals with schizophrenia and affective psychosis so far as psychiatric illness itself is concerned. The former is dealt with well, the latter subject suffers from being dealt with too personally by its main reviewer. In the last three chapters the authors have indulged themselves successively on the matters of possible future psychiatric research strategies, brain mechanism and behaviour and the theoretical basis of psychoanalysis. These chapters are readable and possibly useful

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, 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).

Please note that instruction arranged by the Fellowship of Postgraduate Medicine is open only to Associates (annual subscription, 21s.). Detailed syllabuses are published approximately 6-8 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

Thoracic Surgery. North Middlesex Hospital, London, N.18. Weekend 4, 5, and 6 October. Fee £8 8s.

General Surgery. Connaught Hospital, London, E.17. Weekend 19 and 20 October. Fee £6 6s.

General Medicine. Whipps Cross Hospital, Connaught Hospital and London Chest Hospital. 4-29 November. Fee 35 guineas.

General Medicine. St Stephen's Hospital, London, S.W.10. 14-25 October. Fee £18 18s.

Rheumatology. St Stephen's Hospital, London, S.W.10. 1, 2, and 3 November.

General Medicine. Ashford Hospital, Middlesex. Two Saturdays, 16 and 23 November.

All these courses are recognized for study leave under HM 67(27).

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.

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.

CAMBRIDGE

Cambridge University Postgraduate Medical School

Arrangements can be made for practitioners to attend the practice of the United Cambridge Hospitals for short or long periods. Advanced courses on special aspects of medicine and research are held from time to time.

A revision course in *Basic Medical Sciences* will be held on alternate Saturdays from October 1968 to March 1969 and will consist of fifty lectures and demonstrations in pharmacology, physiology and physics, clinical measurement, and biochemistry; this course is intended primarily for anaesthetists preparing for the March 1969 primary F.F.A.R.C.S., but others are welcome to attend. A course on *Organ Transplantation* will be held at Churchill College on 11 and 12 April 1969.

Refresher Courses for general practitioners will be held at Norwich (5 days) 14-18 April 1969 and at Cambridge, 30 June to 5 July 1969. A calendar of lectures, seminars and tutorials for the academical year 1968-69 and further information may be obtained from the Secretary, The Medical School, Tennis Court Road, Cambridge.

Details of the teaching facilities available at the Regional Postgraduate Medical Centres at the West Suffolk General Hospital, Bury St Edmunds, Fulbourn Hospital, the Norfolk & Norwich Hospital, Papworth Hospital and Peterborough District Hospital may be obtained from the Clinical Tutor at each of these Centres.

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 training and advanced studies may be addressed to the head of the relevant clinical or laboratory department in the teaching hospitals or to the Director of Postgraduate Medical Studies (address below).

Neuroanatomy and physiology. A one week course suitable for D.P.M. and M.R.C.P. candidates, with lectures, discussions, demonstrations, and dissection, is held in the University Department of Human Anatomy annually in September, Fee: £10.

Psychiatry. Three day courses covering selected topics, suitable for D.P.M. Part II candidates are held three to four times a year.

Surgery. Subject to there being sufficient demand, a two-week course suitable for final F.R.C.S. candidates will be held twice a year in September and April. Fee: £15.

General Practice. Clinical attachments (including resident obstetric attachments) and individual programmes of attendance in the hospital departments, recognised under Section 48 N.H.S. Act. Occasional short courses at Oxford and District Medical Centres in the region.

Enquiries about any of the above, and about study days and courses in special subjects arranged for those in the Oxford region working for higher qualifications, to the Director, Postgraduate Medical Studies, Medical School, 43 Woodstock Road, Oxford.

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 for 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.

Dermatology. An intensive week's course in dermatology. Suitable for M.R.C.P. candidates. March. Fee £7 10s. A week-end course in dermatology. May. Fee £3 3s.

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 PRACTICAL PRACTITIONERS****Medical Recording Service**

Kitts Croft, Writtle, Chelmsford, Essex. (Tel. Writtle 316). Selection of titles available on tape (5 in reels running at $3\frac{3}{4}$ ips). These talks may be borrowed by any doctor anywhere in the world.

New titles available on tape

68-31 Drugs in School—Dr T. Bewley. 28 min.

68-35 The Study of Medical Education—Professor George Muller (Chicago). 38 min. 12 slides.

Preliminary announcement—Tape Course on Geriatrics in General Practice. Six talks of 30 min by Dr M. K. Thompson.

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 $1\frac{1}{2}$ 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 ³
milligram(s)		millimetre(s)	mm
(10 ⁻³ g)	mg	centimetre(s)	cm
microgram(s)		millicurie(s)	mCi
(10 ⁻⁶ g)	μg	millilitre(s)	ml
nanogram(s)		pound(s)	lb
(10 ⁻⁹ g)	ng	milliequivalent	mEq
picogram(s)			
(10 ⁻¹² g)	pg	R _F values	R _F
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.