tions, of little value. The two exceptions are first, strict confinement to bed and avoidance of physical activity in any case in which a preparalytic meningal stage might be suspected to be present; and secondly, postponement, wherever possible, of operations upon the throat, nose, or mouth during the prevalence of poliomyelitis.

Enteric fever.—There were 348 corrected notifications of, and 38 deaths from, typhoid fever in 1948, and 373 corrected notifications of, and 10 deaths from, paratyphoid fever. Most of the notifications are those of single sporadic cases.

This country continued to enjoy the low incidence of enteric fever of recent years, and in this respect was more fortunate than many European countries, in which the war years saw a greatly increased prevalence that has persisted in the post-war years.

In its control the first objective is to identify the individual carrier, who, in almost every case, is the source of the outbreak.

Unlike typhoid fever, paratyphoid fever is seldom water-borne, but usually results from infection of food by a food handler suffering from a transitory infection which does not indispose him, and only on rare occasions is a chronic carrier identified as the source. Milk, ice cream and cream-filled confectionery are, at the present time, the usual vehicles. There are new powers that should give reasonably good control over the two first named.

In the treatment of enteric fever the new drug, chloromycetin (chloramphenicol P.D.) promises further to reduce the case fatality.

Dysentery.—Notifications increased 35 per cent. to 5,084, but deaths, in the paradoxical way associated with the recent epidemiology of bacterial dysentery, declined to 62, the fewest ever recorded.

A substantial and very welcome reduction in deaths from enteritis and diarrhoea in children under two years occurred during the year, and outbreaks of epidemic diarrhoea of unknown origin in infants, which had been a distressing feature since 1945, were less often reported.

Sir Wilson Jameson reminds mothers that in breast feeding they themselves have an excellent defence for their children against infant diarrhoea, which they alone can provide, and that it is the salvation of many babies.

Food Poisoning.—Outbreaks were more numerous (or perhaps more investigated) than ever, those investigated having risen from 412 in 1945 to 964 in 1948. Of the 962 outbreaks that appeared to be of bacterial origin 908 were caused by a member of the Salmonella group. Four-fifths of these salmonella outbreaks, however, affected single patients only.

Food poisoning is largely preventable and could be abolished if everyone realised the precautions necessary when dealing with food.

First-class equipment and the best methods of manufacture will fail if a person handling food is suffering from some septic condition of the hands, nose or throat, or has forgotten to wash before beginning work or after visiting the closet. Education is required of employers and employees in the trade, of school children and of the general public.

Many local authorities are encouraging suppliers to supply and consumers to demand clean foods.

Venerable Diseases.

The steep fall in the clinic figures for early syphilis in 1947 continued in 1948, but was less marked in some large seaports and there still seem to be considerable reservoirs of infection in a few great inland cities. Gonorrhoea has also declined.

Penicillin continues to fulfil its early promise as an effective therapeutic agent in both diseases and their treatment has been both simplified and shortened by its use.