

hours, 2-4 c.c. of 25 per cent. daily if by lumbar puncture.

#### HONOURABLE MENTION.

The following competitors receive honourable mention:—Miss M. C. Fair, Miss Nores, Miss J. G. Gilchrist, Miss A. McCabe, Miss F. Sheppard, Miss C. Addison, Miss C. McDonald, Miss M. James, Miss T. O'Brien.

#### QUESTION FOR NEXT WEEK.

Mention some of the chief preparations of opium, with their usual doses. What are the chief symptoms of an overdose?

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## ROYAL COMMISSION ON VENEREAL DISEASES.

### VENEREAL DISEASES IN THE NAVY.

The first two meetings of the Royal Commission on Venereal Diseases were held on November 7th and November 10th, when preliminary evidence was given by Dr. Stevenson (Superintendent of Statistics at the General Register Office), and by Surgeon-General May (the Director-General of the Navy Medical Department), who gave statistical evidence as to the prevalence of venereal diseases in the Royal Navy.

#### RELUCTANCE TO CERTIFY VENEREAL DISEASES AS A CAUSE OF DEATH.

We learn from the Report that Dr. Stevenson's evidence was concerned with the figures contained in the annual report for 1911 of the Registrar-General for England and Wales, and related mainly to the question of the reliance which might be placed on those figures as indications of the prevalence of venereal disease in the country. Dr. Stevenson thought that, although the quality of certification generally was improving, there undoubtedly existed a reluctance on the part of medical practitioners to certify venereal diseases as a cause of death; and that consequently the figures contained in the report were minimum figures. He agreed also that there were doubtless many cases of deaths indirectly due to venereal diseases which are not demonstrated by the tables of the report. At the same time, he considered that, although the figures do not express the facts, they bear some relation to the facts, and must be regarded as having a distinct comparative value; for instance, he attached importance to figures showing that the death-rate from syphilis in London is four times as high as in the rural districts; and that in descending the scale from the densely populated to the rural districts the death-rate becomes progressively lower.

Dealing with the question of improving certification, Dr. Stevenson strongly advocated a general system of confidential certification under which certificates of the cause of death would not be handed over to the surviving relatives.

#### GOOD RESULT OF LECTURES ON HYGIENE IN THE NAVY.

The Director-General of the Navy Medical Department gave figures extending over the period from 1905 to 1912. These figures showed evidence of decline, both in regard to syphilis and to gonorrhoea. The figures of the number of cases and of the number of days lost through sickness for 1912 showed a far more accentuated fall as regards venereal diseases than for any other disease. The Director-General considered that the reduction in the figures might be due rather to the better education of the sailor in health matters than to the diminution in the prevalence of diseases in the ports. He thought that the men had absolute confidence in their medical officers, and that concealment of disease was practically non-existent. It was the practice in the Navy for medical officers to give lectures on hygiene to the men; and this system was beginning to show very good results, and the Admiralty had great hopes of it. With regard to invalidings from the service on account of venereal disease, the Director-General thought that the rather sharp fall in 1911 disclosed in the tables should be attributed to improved methods of treatment.

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### NEW DISEASE IN THE SUDAN.

Dr. H. B. Fantham, lecturing last week before the Liverpool School of Tropical Medicine on the diseases of the Anglo-Egyptian Sudan, described his pioneer researches, together with Dr. Chalmers and Captain O'Farrell, of the Wellcome Laboratory, Khartoum, concerning a form of bronchitis due to a new spirochæte occurring in the respiratory passages of man. Both natives and Europeans suffer from bronchial spirochætosis, especially after the rains. The disease is widespread, and relapses are common, but it is amenable to treatment. Very little is known at present about the spirochæte.

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### HOME FROM ACTIVE SERVICE.

Miss Tucker, of Cardiff, who a year ago went out in charge of a party of nurses from the London Hospital to nurse, at the request of Queen Sophie of Greece, the sick and wounded in the recent war, returned home on Saturday last. Miss Tucker had the honour before leaving Athens of being received by Her Majesty, who expressed her appreciation of the services rendered by the English nurses during the war. Miss Tucker was presented with a gold pendant, on which was inscribed, "In grateful remembrance." The pendant also bore the Royal monogram and Crown.

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