

## Reviews.

ANNUAL REPORT OF THE SURGEON-GENERAL, U.S. ARMY, 1932. Washington: Government Printing Office.

The Surgeon-General of the United States Army, in his report for 1932, deals with the general activities of the Medical Department for the year ending June, 1932, and with the vital statistics of the Army for 1931.

The average daily strength of the Army was 135,425, a decrease of 1,874 from the strength in 1930 and 535 from that in 1929. There were 11,548 officers, 112,814 white enlisted men, 3,764 coloured enlisted men, 6,287 Filipinos, and 1,012 Porto Ricans. In addition, there were 896 members of the Army Nurse Corps, including reserve members on active duty.

The commissioned medical personnel consisted of 1 major-general, 2 brigadier-generals, 75 colonels, 98 lieutenant-colonels, 551 majors, 137 captains and 91 first lieutenants, a total of 955 officers. There was a deficiency of 28 officers, and it is noted that in 1931 there were 99 captains and 122 first lieutenants, while in 1932 the numbers were 137 and 91 respectively. The Surgeon-General states that the comments made in several previous reports on the insufficient strength of the Medical Corps continue to apply with equal force. He also considers that the Dental Service (155 officers) is inadequate.

In the Veterinary Service there were 119 officers who, in addition to their duties in the prevention and treatment of illness in Army animals, are responsible for the inspection of all meat, meat-food and dairy products offered for Army use.

The ratio per 1,000 of admissions to hospital for diseases was 523.16, and for external causes 131.96, a total of 655.12. The chief diseases causing admission to hospital were: Rhinitis and other diseases of nasal fossæ 52.67, venereal diseases 45.57 (gonorrhœa 26.33, syphilis 11.45, chancroid 7.79), tonsillitis 43.85, influenza 44.47, and bronchitis 38.40.

The ratio for typhoid fever (0.16 per 1,000) was the highest since 1919, the increase being due to the first explosive outbreak since the end of the World War. Eighteen cases occurred in a battery of artillery which had been on the march for ten days in Iowa. All but one of the patients had been inoculated against the disease within "the past three-year period," and the odd man gave a history of having been vaccinated three years previously in civil life. None of the men died. The outbreak was considered to be due to a massive infection of the men on account of neglect of personal hygiene on the march, water being obtained from shallow wells, only one of which was chlorinated; raw milk was used at several places, and some of the seven camp sites were very poor. About sixty per cent of the entire command had diarrhœa at some time during the march.

There were twenty-two cases of epidemic cerebrospinal meningitis with two deaths.

During 1931 there were 6,171 admissions for venereal diseases (45·57 per 1,000), the lowest figure yet recorded. There were 10 deaths from these diseases (9 from syphilis and 1 from chancroid).

The Surgeon-General states in his letter of transmission that the great reduction in the number of cases of venereal disease, from 150 per 1,000 in 1901, is chiefly due to the following measures: education in sex hygiene, periodical physical inspection, adequate treatment of cases, restriction during the infectious period in order to prevent spread to the civil population, forfeiture of pay for absence from duty on account of venereal disease, prohibiting of military personnel from visiting so-called red-light districts, better supervision in the administration of prophylaxis, and, finally, holding the unit commander responsible for the control of venereal diseases in his organization.

There was a great fall in the incidence of venereal disease among the troops in China, the ratio being 53·3 per 1,000 as compared with 282 per 1,000 in 1930. To effect this reduction all known methods of control were used, but special emphasis was placed on the responsibility of officers commanding units for the health of their men. The Departmental Surgeon considers that the good results achieved were due to the action of these officers much more than to the Medical Service.

In Panama there was an increase in venereal disease; there were 911 admissions among the 9,082 troops stationed there, a ratio of 100 per 1,000, although it is claimed that of 115 men who employed prophylactic treatment only 1 contracts venereal disease.

A considerable amount of detail is given regarding the various sections of the Medical Service, and of the work of the schools and hospitals.

There is a brief report on the Library sub-division. The allotment to the library for the year was 19,500 dollars, and it is stated 20,000 dollars annually would be required to keep the collection of literature up to date. The Librarian is a medical officer who has five civil assistant librarians and twenty-one clerks. Seven persons are permanently engaged in research and abstracting.

BRITISH MUSEUM (NATURAL HISTORY) INSTRUCTIONS FOR COLLECTORS.  
No. 12, WORMS. London: 1932. Pp. 22, with 19 illustrations.  
Price 6d.

This excellent pamphlet is issued by the authorities of the British Museum for the use of collectors. It begins with a brief description of the main groups of worms and then gives valuable information as to their habitat, methods of cleaning and preserving, etc.

Medical interest lies chiefly in the last pages, where the technique of collection and preservation of the parasitic worms is described. The

information is given in a clear and concise manner, and if followed by medical officers when forwarding specimens for identification, the lot of the laboratory worker would be much lightened. H. J. B.

**BACTERIOPHAGE IN THE TREATMENT AND PREVENTION OF CHOLERA.**

By J. Morison, C.I.E., M.B., D.P.H. London: H. K. Lewis and Co., Ltd. Pp. viii + 32, with 14 Plates (27 figures), and 4 Graphs. Price 4s. net.

In this John Parkin Memorial Essay, Colonel Morison gives a very clear account of the part of the very extensive work on the bacteriophage with regard to cholera, that is being carried out in different laboratories in India and especially in his own in Shillong.

Then after discussing the general problem of cholera in India, the author gives some account of the use of the bacteriophage in combating the disease, but, unfortunately, the results have been very inconclusive. It is an extremely difficult matter to obtain any positive evidence of the value of the bacteriophage as a therapeutic agent, but it is to be hoped that the careful work of Colonel Morison and his colleagues will finally settle, one way or other, this much disputed point.

**MASSAGE AND REMEDIAL EXERCISES IN MEDICAL AND SURGICAL CONDITIONS.** By Noel M. Tidy, C.S.M.M.G., Sister-in-Charge of the Massage Department, Princess Mary's Royal Air Force Hospital, Halton. Bristol: John Wright and Sons, Ltd. 1932. Pp. xii + 429. Price 15s.

This is a work which must have taken an unusual amount of painstaking effort in its preparation for publication. The scope is exceptionally wide and the matter is set out in great detail. It is an excellent reference book for any massage department, and should be the means of making this class of work more interesting for the individual masseur or masseuse who must understand the particular conditions he or she is called upon to treat.

The diseases are fully described under the headings of "Ætiology," "Pathological Changes," "Symptoms," "Treatment." Stress is rightly laid on the correct application of the term "passive movements." On occasion in the past the surgeon in charge of the case has ordered passive movements, and the location of his ward has prevented him from hearing the cries of the patient, submitted to the interpretation of such a loose term by a muscular masseur.

The electrical treatment advised in cases of infantile paralysis (p. 129) does not accord with the teaching and experience of Dr. Cumberbatch, who finds the use of the surging quick sinusoidal current of very great value even in the case of small children. The book makes no mention of such treatment, but states that children are generally frightened and upset by

electrical treatment. A visit to Dr. Cumberbatch's clinic showed young children undergoing this treatment and obviously enjoying every moment of it!

The price of the book (15s.) is very modest for the vast amount of information available.

The print is on the small side for continuous reading, but is quite sufficient for a book of reference.

The illustrations are numerous, well produced and helpful.

W. K. M.

**ACIDOSIS AND ALKALOSIS.** By Stanley Graham, M.D., F.R.F.P.S., and Noah Morris, M.D., B.Sc., D.P.H., F.R.F.P.S. Edinburgh: E. and S. Livingstone. 1933. Pp. xii. + 203. 7s. 6d. net.

The authors, who are both connected with the Royal Hospital for Sick Children, Glasgow, deal with a difficult subject in a very able manner. The aim of the book is to give a general survey of the subject and its application to disease.

In the first six chapters the chemical physiology of the conditions is dealt with; this portion of the work requires close concentration on the part of the ordinary reader, for a thorough understanding of its principles is necessary for a proper appreciation of the remainder of the book. This consists of ten chapters dealing with such conditions as diabetes, nephritis, gastro-enteritis, etc., in which acidosis or alkalosis may be met with, the reasons for the disturbance of the acid-base equilibrium, with the symptoms resulting therefrom and the appropriate treatment.

The volume is well worthy of study.

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#### PÆDIATRICIANS AND COW AND GATE MILK FOOD.

At the close of the International Pædiatric Congress held in London, and opened by the Duke of York on July 19, 1933, eighty delegates, including specialists in infants' diseases from fifteen different countries, visited the West Country factories of Messrs. Cow and Gate, Ltd. The factories at Wincanton in Somerset and at Somerton in the vicinity of Glastonbury, were inspected.

It seemed to be the general opinion that the Company had solved the problem of infant feeding not only on the hygienic side, but from the nutritive point of view as well.