

GENERAL NOTES

ROYAL SOCIETY OF MEDICINE,

1 Wimpole Street, London, W. 1.

Section of Laryngology.—The Opening Meeting of the Session 1928-29 will be held on Friday, 2nd November, at 5 P.M. *President*, Dr W. S. Syme, M.D. *Hon. Secretaries*, Mr Lionel Colledge, F.R.C.S., 2 Upper Wimpole Street, London, W. 1, and Mr M. E. Vlasto, F.R.C.S., 26 Wimpole Street, London, W. 1.

Section of Otology.—The Opening Meeting of the Session 1928-29 will be held on Saturday, 3rd November, at 10.30 A.M. *President*, Mr Somerville Hastings, M.S. *Hon. Secretaries*, Mr Nicol M. Rankin, M.C., M.B., 56 Harley Street, London, W. 1, and Dr F. C. Ormerod, M.D., 13 Welbeck Street, London, W. 1.

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THE SEMON LECTURE, 1928.

Professor Dr Marcel Hajek, Vienna, has been invited by the Semon Lecture Board to give the Semon Lecture of the University of London. The address will be delivered in November in the Hall of the Royal Society of Medicine, 1 Wimpole Street, London, W. 1.

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Professor Dr M. Hajek, Vienna, Professor Dr Gunnar Holmgren, Stockholm, and Professor Harris P. Mosher, Boston, Mass., have been elected Corresponding Members of the Section of Laryngology of the Royal Society of Medicine, London.

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CENTRAL LONDON THROAT, NOSE AND EAR HOSPITAL.

H.R.H. The Princess Louise, Duchess of Argyll, President of the Central London Throat, Nose and Ear Hospital, Gray's Inn Road, W.C. 1, laid the Foundation Stone of the new Wing on the 25th July last. This addition to the Hospital will cost £50,000.

The Trustees of King Edward's Hospital Fund had promised an additional grant of £750 towards the cost, on condition that a further £5000 was subscribed before the 31st July.

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TRAINING IN PERORAL ENDOSCOPY.

In both editions of his book on Bronchoscopy and Oesophagoscopy, Professor Chevalier Jackson has written a short chapter entitled "Acquiring Skill," a chapter which is deserving of the closest study by every laryngologist preparatory to qualifying himself as an endoscopist. It is evident, however, that Chevalier Jackson is uneasy in his mind as to whether the necessary skill is being acquired by those professing to be endoscopists, as we find him again referring to the important question of training in his Presidential Address at the Meeting of the American Laryngological Association in May 1927. Indeed, he devotes the whole of his address to this particular question.

He points out that much has been written on the teaching of otolaryngology, but, with the exception of the one chapter written by himself and an abstract of it, there is nothing in the literature of the specialty

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dealing with this aspect of a highly technical branch of the laryngologist's work. The lack of literature on this point he says is deplorable when one considers that fully half the patients requiring bronchoscopy and cesophagoscopy are infants and young children, as it may lead the thoughtless to infer that training is not necessary. The modern development of peroral endoscopy, not only as a means of removing foreign bodies but as a recognised diagnostic and therapeutic agent, makes it imperative that those undertaking it should receive proper and thorough instruction. The practitioner of medicine and the general staff of every large hospital have the right to demand that bronchoscopy should be a safe operation when they submit their patients to the care of the endoscopist. His personal skill, his equipment and the personnel associated with him should be adequate and such as to ensure, so far as is humanly possible, that the patient will be skilfully and safely handled.

Chevalier Jackson rightly points out that the otolaryngologist with his experience of manipulative work under monocular vision and with his knowledge of the larynx in health and disease is logically the man best qualified to undertake this class of work. Peroral endoscopy, however, is not a one-man job, and the need of well-trained assistants is an essential part of the undertaking. To the team work involved in the manipulations, Jackson has aptly applied Kipling's familiar war-time lines—

"It ain't the individual
Nor the army as a whole,
But the everlastin' team-work
Of every bloomin' soul."

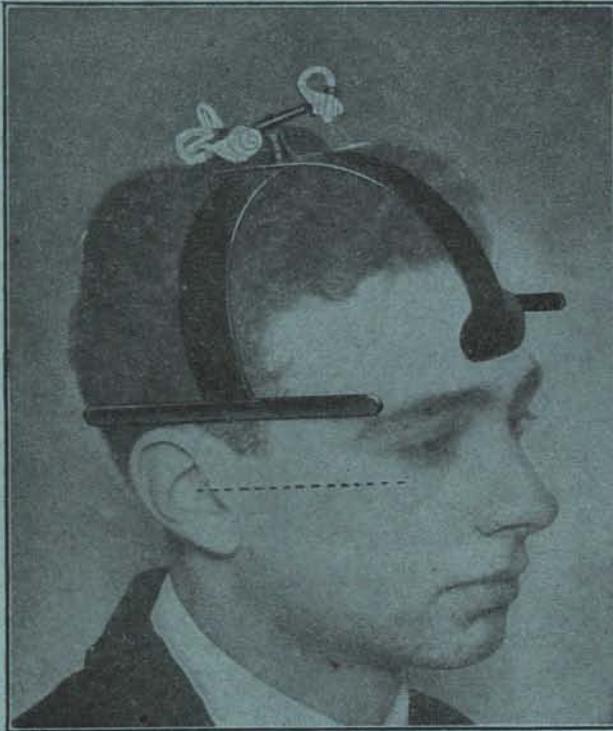
The question may well be asked whether in this country sufficient provision is made to teach the young laryngologist the art of acquiring the necessary skill to fit him for this branch of his work. Chevalier Jackson's Presidential Address is worthy of the most careful study.

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BOOKS RECEIVED FOR REVIEW.

- Plastic Surgery of the Orbit.* By J. Eastman Sheehan, M.D., F.A.C.S., Professor of Plastic Surgery, New York Post-Graduate Medical School and Hospital, with a preface by Professor Pierre Sébilleau. New York: The Macmillan Co., 1927. Price 50s.
- Gewerbliche Ohrenschädigungen und ihre Verhütung.* By Sanitätsrat. Dr Peyser, Berlin, and Gewerberat, Dr Maué, Münster. Berlin: Julius Springer. 2 Mk. 40.
- Die Labyrinthreflexe auf die Augenmuskeln nach Einseitiger Labyrinthextirpation.* By Dr R. Lorente de Nó, Assistant in the "Institute Cajal," Madrid. 205 pages with 186 illustrations in the text and 22 plates. Urban & Schwarzenberg, Berlin and Vienna, 1928. Price 18 Mk.
- Handbuch der Speziellen Chirurgie des Ohres und der Oberen Luftwege* (Katz & Blumenfeld). Vol. 1 Part 1 of the 4th enlarged and improved Edition, edited by Prof. Dr F. Blumenfeld and Prof. Dr R. Hoffmann. 600 pages with 331 illustrations in the text. Curt Kabitzsch, Leipzig, 1928. Price 128 Mk.
- L'Anesthésie Loco-Régionale en Oto-Rhino-Laryngologie et en Chirurgie-Cervico-Faciale.* By Professor Georges Portmann and Dr Paul Leduc, Bordeaux. 317 pages with 84 illustrations in the text. Paris: Octave Doin, 1928. Price Fr. 50.

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