

following suggestions: Crippled soldiers should not be segregated nor gathered in large colonies, but whenever possible they should return to their former employer in some fresh capacity. Industries requiring comparatively little capital should be established in the province to give employment to such men—for instance, factories for making brooms, baskets, chairs, harness, and toys, and garment and knitting mills, candy factories; the manufactured article should be labelled "returned soldier." For those cases that required employment in the open, poultry raising, bee-keeping, market gardening, and the establishment of small sheep ranches in lands unfit for grain growing were suggested. A census of all available positions in the Government services might be taken, as well as of all the employers of labour in the province. A stipulation might be included in contracts given by the State to the effect that a proportion of the work be given to war cripples. This paper led to a discussion, and at the business session the following resolutions were passed:

1. That it is the sense of the Association in session that the Government conduct a census of all available positions of employment within its service and among the employers of labour in the province, with a view to employment of disabled and unfit returned soldiers.
2. That the Saskatchewan Medical Association feel constrained to offer their services to the Government for use in the solution of these problems in whatever way the Government may see fit.

Correspondence.

THE TERMS OF THE INSURANCE ACT.

SIR,—From time to time I still receive letters, or am appealed to in the medical press, concerning the proceedings and the effects of the National Insurance Act, as if I were in some way responsible for them. May I be permitted to state again, once for all, that I have not and never have had (save as a member of the large Advisory Committee) anything to do with the initiations, general provisions, or workings of the Act? When the bill was practically complete I was appealed to by many brother practitioners to try for better terms than those (four shillings a head I think it was?) originally offered.

Now, of the old club system I had very painful recollections. I saw my brethren sweated, exploited, and domineered over by vulgar officials, often sitting in public-houses; and many doctors from a sense of duty took certain clubs as virtually unpaid work, as some of us work gratuitously in hospitals. Other medical men who engaged more largely in club work made a living out of it only by reducing their medical services to the lowest possible standard. Thus, in the large majority of cases of club patients desiring a consultation, the doctors in attendance used to decline to spare more of their time in meeting a consultant or in writing any notes of such cases. And small blame to them, for the old club patient was often a very well-to-do person. With these recollections in my mind I did my utmost, with others, to get better pecuniary terms, and we succeeded in obtaining a large increase; indeed, the increase which a leading medical critic of the bill had privately intimated to me would be acceptable to the profession. With this effort my part in the bill, or Act, ended, and I took no further responsibility. It is true that, as we had been instructed on the pecuniary terms to be demanded, and had informed the Minister of these instructions, we did consider, when these terms were granted, that, so far as pay was concerned, the profession was bound, as a matter of good faith, to be satisfied. It is said that in one way or another the stipulated payments have not been received in full. Of this I know nothing, and express no opinion.—I am, etc.,

Cambridge, Sept. 14th.

CLIFFORD ALLBUTT.

HEALTH VISITORS AND BIRTH INQUIRY CARDS.

SIR,—The antenatal and postnatal campaign now in vogue is excellent in intention and should accomplish much if it is carried on with judgement and discretion. But without these two qualifications it is likely to raise opposition, which is bound to prejudice, if not to defeat, the objects in view.

As I write I have before me a form of notification as follows:

CITY OF [Coat of Arms] _____
NOTIFICATION BY A MIDWIFE OF HER ENGAGEMENT TO
ATTEND A CONFINEMENT.

To the Medical Officer of Health, Guildhall, _____.

I hereby give you notice that I have to-day been engaged to attend

Name of mother, etc., etc.

Then follows a long list of questions.

I call attention to the official heading, the coat of arms, and the words underlined. The recipient naturally concludes that the document is authoritative, and that she is compelled to answer the questions on the day on which the form is received.

Midwives are much perturbed by these forms, as they seem to be ordered to betray professional confidence; and they feel themselves between the devil of unknown penalties from the authorities and the deep sea of loss of their patient's respect and regard, and possibly of their patient altogether.

Pregnancy is not yet compulsorily notifiable, and to distribute forms like these lays those who do so open to the accusation that they are trying to exploit the ignorance and timidity of the poor (midwives and patients) for the purpose of carrying out their objects.

Now, if pregnancy is to be made compulsorily notifiable, it must be made so for every one—for the duchess as well as for the charwoman. Again, the question of the person compelled to notify is important. If the duty is to be laid upon the attendant (doctor or midwife), the result will almost certainly be that patients will put off engaging their attendant to the last possible moment, and the care of the pregnant woman will be far less good than it is at present.

It is a mistake to suppose that antenatal care has only been discovered in the twentieth century. All careful doctors have practised it for a very long time, and all careful midwives have done the same; indeed, the Rules of the Central Midwives Board have recognized it from the beginning, and good midwives practised it before then. People are apt to think that a new technical word implies a discovery. On the other hand, a new technical word sometimes does good by attracting attention.

If the duty is to be laid upon the *patient* (which is the more logical alternative), is the duchess to find the health visitor marching unannounced into her bedroom?

All these details have to be thought out.

I am glad to say that notification such as has been complained of is *not* sanctioned by the Local Government Board. In the forty-fourth annual report, for 1914-15 (Supplement in continuation of the report of the medical officer of the Board, p. 65), these words occur:

Such notifications should not be entertained without the formal and intelligent consent of the expectant mother.

Unless local authorities quote these words in any circulars which they issue such circulars cannot fail to arouse suspicion in the patient as well as in the doctor or midwife.

Unless notification (even voluntary) is enforced upon the rich as well as on the poor, the poor will feel themselves unjustly treated (when they know the facts). The exact process by which the care of pregnancy may be improved, by notification or otherwise, requires more careful consideration than it has hitherto received, from the point of view of the patient, the doctor, and the midwife. It ought not to be incapable of satisfactory solution.—I am, etc.,

Nutley, Uckfield, Sept. 19th.

FRANCIS CHAMPNEYS.

THE TERMINOLOGY OF THE NEURONE.

SIR,—Professor Argyll Campbell, of Singapore, in a letter to me, suggests the name "centron" for the central part of the neurone which contains the nucleus, and is sometimes called the "cell body." The name is not inappropriate, being similar in form to those of the other constituent parts, and it suggests the source of the trophic influence without which separated parts degenerate.

The neurone would thus consist of a *centron*, an *axon*, and one or more *dendrons*. The latter may ramify into finer dendrites, while the axon itself may divide peripherally.

If the various societies concerned with neurological questions could see their way to agree to an official system of names, a desirable uniformity would be attained.—I am, etc.,

University College, London, Sept. 19th,

W. M. BAYLISS.