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Central Middlesex Group Hospital Management Committee.

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CENTRAL MIDDLESEX HOSPITAL.



ANNUAL REPORT.

1956.

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CENTRAL MIDDLESEX HOSPITAL.

Acton Lane, Park Royal,

London, N.W.10

Medical Director:

HORACE JOULES, M.D., F.R.C.P.

Matron:

Miss D. WALLER, D.N.(Lond.)

Hospital Secretary:

A. S. COLLINS, A.H.A.

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MEDICAL DIRECTOR'S REPORT

CENTRAL MIDDLESEX GROUP HOSPITAL MANAGEMENT COMMITTEE:

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Secretary:

A. E. COOPER, F.H.A.

COMMITTEES AND SUB-COMMITTEES :

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Chairman : Mrs. M. R. FORBES, J.P.

Establishment Sub-Committee :

Chairman : F. J. BALLARD, Esq., O.B.E.

Finance Sub-Committee :

Chairman : J. W. THEOBALD, M.I.M.I.

Nursing Sub-Committee :

Chairman : J. LESLIE THOMAS, Esq., M.R.C.S., L.R.C.P.

Catering Sub-Committee :

Chairman : Mrs. N. CLARK, J.P.

Registrar Appointments Sub-Committee :

Chairman : F. H. MORRIS, Esq.

Group Medical and Dental Advisory Committee :

Chairman : C. H. C. TOUSSAINT, M.R.C.S., L.R.C.P., D.P.H.

Central Middlesex Hospital Medical Advisory Committee :

Chairman : HORACE JOULES, Esq., M.D., F.R.C.P.

Central Middlesex Hospital Joint Consultative Staff Committee :

Chairman : HORACE JOULES, M.D., F.R.C.P.

Chairman : (Staff Side) A. BOOKER, A.R.P.S.

MEDICAL DIRECTOR'S REPORT

Once again there has been an increase in the number of patients treated in the hospital, although we had thought this was impossible with our present staffing difficulties and limited accommodation. It has only been possible with the continuing loyalty of all sections of the staff, medical and nursing, professional and technical, administrative and clerical and, last but by no means least, the catering and ancillary staff.

However it must be faced, locally as well as by the Ministry of Health, that it is quite impossible for hospital staffs to carry on with these tremendous burdens without considerable improvements in pay and conditions. Young people will no longer enter the hospital service while it compares so unfavourably with every other type of employment, including local government. Heads of departments no longer have reasonable choice of applicants for posts; too often it is a case of accepting the only candidate. Hospitals must be able to attract the very best people in all grades of staff.

Those who remain in the service feel an increasing frustration when they cannot get new equipment, or reasonable replacements of out of date machines, furniture and other items. They cannot understand why all requests and schemes for alteration and improvement have to go through a complicated machinery of many committees, taking months to come to fruition. I feel that the local population, our patients, should be made aware of these difficulties.

Despite these handicaps the hospital continues to expand its influence and play an increasing part serving the needs of the locality. Many minds are turning to the possibilities of preventive medicine and the sectional reports reflect some of this activity. We were fortunate to obtain a very generous grant of £15,000 from the Nuffield Foundation to establish and maintain for three years a Department of Occupational Health. As the year closed we were pleased to welcome Dr. Garland as the newly-appointed consultant in this specialty. We are confident his stimulating pressure will bring success to this pioneering attempt to link a hospital service with the needs of local industry and ensure prevention is kept in the right perspective.

Writing, teaching and travel by medical and nursing staff have increased and produced an atmosphere in the hospital which attracts junior medical staff of the highest calibre from many parts of the world. We wish we could offer them living quarters comparable to those from which they come.

Dr. Pagel, one of the best loved members of the staff, left us for a less demanding position at Clare Hall Hospital, where we hope to be able to maintain contact with his warm and inspiring personality. We owe much to his influence in the past.

Mr. Hashemian, whose unassuming and endearing manner made such an impression on all members of the staff, left to take up the appointment of Associate Professor of Surgery at Teheran and took with him our warmest wishes for success and happiness.

HORACE JOULES, M.D., F.R.C.P.

CONSULTANT MEDICAL STAFF

Physicians

HORACE JOULES, M.D., F.R.C.P. (*Medical Director*)
 F. AVERY JONES, M.D., F.R.C.P.
 R. J. PORTER, M.B., M.R.C.P.
 RICHARD ASHER, M.D., F.R.C.P.
 K. P. BALL, M.D., M.R.C.P.
 T. D. KELLOCK, M.D., M.R.C.P.

Paediatrician

J. SAKULA, M.D., M.R.C.P., D.C.H.

Tuberculosis Physician

C. H. C. TOUSSAINT, M.R.C.S., L.R.C.P., D.P.H.

Geriatrician

A. D. ABDULLAH, M.B., M.R.C.P.

Dermatologist

H. T. H. WILSON, M.D., M.R.C.P., D.T.M., D.T.H.

Psychiatrists

O. W. S. FITZGERALD, M.A., M.D., D.P.M.
 B. M. C. GILSENAN, M.D., D.P.M.
 S. T. HAYWARD, M.B., B.S., D.P.M.
 D. T. BARDON, M.D., B.Ch., B.A.O., D.P.M.

Allergist

D. HARLEY, M.D., B.Sc., F.R.I.C.

Surgeons

T. G. I. JAMES, B.Sc., M.Ch., F.R.C.S.(Eng.),
 F.R.C.S.(Edin.)
 J. D. FERGUSON, M.D., F.R.C.S.
 J. G. BONNIN, M.B., B.S., F.R.C.S.
 F. A. HENLEY, M.B., B.S., F.R.C.S.
 J. W. P. GUMMER, M.S., F.R.C.S.

Obstetricians and Gynaecologists

J. S. MacVINE, M.B., F.R.C.S.E., M.R.C.O.G.
 (*Deputy Medical Director*)
 Miss M. A. M. BIGBY, M.D., M.R.C.O.G.

Ear, Nose and Throat Surgeon

P. MAXWELL ELLIS, M.D., M.S., F.R.C.S.

Dental Surgeon

W. FRASER-MOODIE, F.D.S.R.C.S.(Eng.), L.R.C.P.,
 L.R.C.S.

Ophthalmic Surgeons

Mrs. DOROTHY MILLER, D.O.M.S.
 P. D. TREVOR ROPER, M.A., F.R.C.S.

Thoracic Surgeon

R. LAIRD, M.B., Ch.M., F.R.C.S.E.

Plastic Surgeon

I. MUIR, M.B.E., M.B., B.S., F.R.C.S.

Anaesthetists

A. C. R. RANKIN, M.B., F.F.A., R.C.S.
 R. D. LEVIS, M.B., F.F.A., R.C.S.
 Miss L. ALEXANDER, M.B., F.F.A., R.C.S.

Pathologists

J. D. ALLAN GRAY, T.D., M.B., Ch.B., B.Sc., F.R.C.P.E., D.P.H.
 W. PAGEL, M.D.
 G. DISCOMBE, M.D., B.Sc.

Radiologists

F. PYGOTT, M.B., Ch.B., D.P.H., D.M.R.E.
 C. F. HUTTON, M.R.C.S., L.R.C.P., D.M.R.D.

Physicians i/c Department of Physical Medicine

J. H. CROSLAND, M.R.C.S., L.R.C.P., D.Phys. Med.
 Miss JOSEPHINE ROTH, M.B., B.S., D.Phys. Med.

Radiotherapist

P. B. WOODYATT, M.R.C.S., L.R.C.P., D.M.R.T.

Physician i/c E.E.G. Department

C. C. EVANS, M.A., M.R.C.S., L.R.C.P., D.P.M.

Physician i/c Special Department

P. A. CLEMENTS, M.B., B.S.

Hon. Associate Physician

RICHARD DOLL, O.B.E., M.D., F.R.C.P.

Chief Pharmacist	...	...	Miss K. KNIGHT, F.P.S.
Chief Almoner	...	...	Miss M. L. TATE, B.Sc.(Econ.), A.I.H.A.
Catering Officer	...	...	Miss J. ARONSON
Medical Artist	...	...	Miss D. M. BARBER
Medical Photographer	...	...	A. BOOKER, A.R.P.S.
Instrument Curator	...	...	F. W. DEWAR, L.I.B.S.T.
Administrative Assistant	...	...	Miss J. WALLAGE
Medical Records Officer	...	...	Miss O. P. NICHOLLS, A.M.R.

OUT-PATIENT DEPARTMENT.

Attendances are by appointment only.

Phone: ELGAR 5733.

Clinic	Consultant	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.
GENERAL MEDICINE ...	Dr. H. Joules and Dr. K. P. Ball Dr. K. P. Ball ... Dr. R. J. Porter ...		1.30	9.30	1.30		
GENERAL MEDICINE & ANAEMIA ...	Dr. R. A. J. Asher ...	1.30					
GENERAL SURGERY ...	Mr. T. G. I. James ... Mr. J. D. Fergusson and Mr. J. W. P. Gummer ...	10.00		9.30			
GENERAL SURGERY & VARICOSE VEINS ...	Mr. F. A. Henley ...			9.30			
ALLERGY (New cases) ... (Old cases) ...	Dr. D. Harley		2.30		2.30		
ANTE-NATAL ...	Mr. J. S. MacVine ... Miss M. A. M. Bigby ... Mr. MacVine and Miss Bigby ...	9.30 1.30	9.30	9.30	9.30		
BIRTH CONTROL (Medical indications)	Miss M. A. M. Bigby ...			2.00			
CARDIAC ...	Dr. H. Joules and Dr. K. Ball						†9.30
DENTAL ...	Dr. W. Fraser-Moodie ...	9.00	9.00	9.00	9.00	9.00	
DERMATOLOGICAL ...	Dr. H. T. H. Wilson ...			9.30		*9.30	
DIABETIC ...	Dr. T. D. Kellock ...			1.30			
EAR, NOSE & THROAT	Mr. P. Maxwell Ellis ...		2.00		9.30		
ENDOCRINE ...	Dr. R. A. J. Asher ...			9.30			
GASTRO-ENTEROLOGY	Dr. F. Avery Jones ... Dr. T. D. Kellock ...			1.30	1.30		
Old cases only ...	Dr. F. Avery Jones and Dr. T. D. Kellock ...	9.30					9.30
GENITO-URINARY ...	Mr. J. D. Fergusson and Mr. J. W. P. Gummer ...				10.00		
GYNAECOLOGICAL ...	Mr. J. S. MacVine ... Miss M. A. M. Bigby ...		9.30			9.30	
NEUROLOGICAL ...	Dr. R. J. Porter ...		1.30				†9.30
NEUROSURGICAL ...	Mr. T. G. I. James ...					9.30	
OPHTHALMIC ...	Mrs. D. Miller ... Mr. P. D. Trevor-Roper ...	2.00	10.00			2.00	
ORTHOPAEDIC & FRACTURE ...	Mr. J. G. Bonnin ...		9.30		9.30	1.30	
PAEDIATRIC ...	Dr. J. Sakula ...	1.30		1.30			
PHYSICAL MEDICINE ...	Dr. J. H. Crossland ... Dr. J. Roth ...	9.30 9.30 1.30	9.30 1.30	1.30 9.30 2.00	2.00	9.30 2.00	
POST-NATAL ...	Mr. J. S. MacVine ... Miss M. A. M. Bigby ...					†2.00 †2.00	
PSYCHIATRIC ...	Drs. O. Fitzgerald and B. M. C. Gilsenan ... Drs. S. T. Hayward & D. Bardon				2.00	2.00	
RECTAL ...	Mr. F. A. Henley ...					9.30	
SPECIAL DEPARTMENT	Dr. P. A. Clements ...		9.30		3.00	2.00	

* All wart cases seen only on this day.

† Alternate weeks.

OUT-PATIENT STATISTICS.

Department	New Patients			Total Attendances		
	1954	1955	1956	1954	1955	1956
General medicine	2,323	2,417	2,369	8,053	9,223	9,246
General Surgery	3,703	4,008	3,568*	12,578	12,541	10,616*
Allergy	177	213	204	1,902	1,998	2,012
Ante-Natal	2,337	2,310	2,466	13,005	13,273	14,628
Birth Control	95	131	120	783	851	749
Cardiological	313	383	380	752	891	1,093
Dental	1,588	1,808	2,203	8,009	8,477	8,805
Dermatological	1,215	1,259	1,196	5,074	5,646	5,146
Gastroenterological and Diabetic ...	2,280	2,116	2,265	12,453	12,177	12,714
Ear, Nose and Throat	2,284	2,389	2,381	5,032	5,382	5,422
Endocrine	269	300	314	1,295	1,265	1,257
Gynaecological	1,773	1,732	1,771	5,651	5,505	5,555
Neurological	622	658	582	2,145	2,299	2,293
Neurosurgical	188	197	196	1,034	945	1,014
Ophthalmic	1,057	1,215	1,046	4,387	4,795	4,894
Orthopaedic and Fracture... ..	3,554	3,438	3,690	14,973	13,746	14,888
Paediatric	905	903	903	3,371	3,266	3,223
Plastic Surgery	—	—	27	—	—	50
Post-Natal	1,412	1,589	1,739	1,540	1,766	1,982
Psychiatric and Child Guidance	586	704	606	2,816	2,954	2,982
Radiotherapy (Diagnostic and Follow-up)	143	137	123	1,946	2,136	1,610
Rectal	—	—	467	—	—	1,201
Special Department	807	837	941	10,143	9,214	9,282
Varicose Vein	208	233	190	889	486	468
Sick Bay	2,699	2,433	2,978	4,327	4,195	4,435
Totals	30,538	31,415	32,725	122,167	122,995	125,565
Casualty Department	19,383	21,401	21,273	42,035	47,241	48,052
Rehabilitation	6,104	8,096	7,363	81,407	85,924	89,043
X-ray Department	11,618	11,418	12,211	20,617	20,623	22,283
Grand Total	67,643	72,330	73,572	266,226	276,783	284,943
Speech Therapy	34	25	25	894	834	672
Chiropody	156	154	82	1,434	1,415	1,386
Dietician	534	657	582	1,842	2,051	2,002
Instrument Makers... ..	1,633	1,711	1,826	3,968	3,989	4,182
E.C.G.	1,027	1,031	927	1,247	1,344	1,302
E.E.G.	714	757	786	865	920	947

NOTE.—Genito-urinary figures are included in General Surgery.
 * Rectal totals shown separately in 1956.

IN-PATIENTS.

Admission Officer:

Senior Hospital Medical Officer: Mrs. A. M. BURROWS, M.B., B.S.

CLASSIFICATION OF BEDS.

Department	Total Number of Beds	Discharges and Deaths during the Year	Average Stay in Days
General Medical	137	2,646	18.16
General Surgical	164	3,801	14.83
Gynaecological	49	1,550	10.62
Obstetric	85	2,228	12.15
Gastro-enterological	56	844	24.35
Paediatric	35	470	13.57
Tuberculosis	58	347	59.57
Ear, Nose and Throat	16	684	7.78
Mental Observation	16	692	5.6
Chronic Sick	46	539	30.96
Traumatic and Orthopaedic	32	1,060	13.9
Dental	2	204	4.66
Dermatological	4	65	25.03
Ophthalmic	6	93	13.07
Private Patients (Section 5)	7	206	9.18
Staff beds	8	300	7.44
Totals †	721	15,729	15.52

IN-PATIENT STATISTICS.

	1954	1955	1956
Beds.			
Complement at end of year	726	721	721
Maximum No. of beds occupied	785	716	728* (30.5.56)
Minimum No. of beds occupied	577	584	586* (24.12.56)
Daily average No. of beds occupied	671	653.31	665
(Percentage of available beds)	93.4	91.6	93
Patients.			
In hospital at beginning of year	627	724	688
Number admitted during the year	15,115	15,246	15,726
Live births during the year	1,969	1,717	2,003
Total	17,711	17,687	18,417
Discharges during the year (inc. infants)	16,045	16,005	16,745
Deaths during the year	941	994	984
Total	16,987	16,999	17,729
Patients in hospital at end of year	724	688	688

NOTE.—Since 1952 the bed complement is very much reduced as 30 beds were lost through the re-construction of F. Block, and the 86 beds in Leamington Park Hospital and 20 at Twyford Abbey are no longer included.

† These totals do not include cots, nor infants born in hospital.

* Now excluding cots in Maternity Department.

ADMISSIONS—1956

Admission Officer :

Senior Hospital Medical Officer : Mrs. A. M. BURROWS, M.B., B.S.

The number of requests for admission by General Practitioners is increasing steadily and in 1956 there were 10,666 emergency admissions.

Though the winter has not been a particularly severe one, there has been a heavy demand on all available beds. Waiting list cases, both surgical and medical, often prove to need admission as urgently as the emergency cases and this makes a fair allocation of the beds all the more difficult.

ADMISSIONS

Emergencies.

Requested by General Practitioners	...	...	...	...	4,554
Requested by Emergency Bed Service	...	...	...	...	139
Other emergencies including:					
maternity cases; three-day-order cases; T.B. cases from local Chest Clinics; transfers from other hospitals; 999 and road accident cases, etc.					
...	5,973

Admitted from waiting list...	5,184
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GENERAL MEDICAL AND CARDIOLOGICAL DEPARTMENT

<i>Consultants:</i>	H. JOULES, M.D., F.R.C.P. K. P. BALL, M.D., M.R.C.P.
<i>Senior Registrar:</i>	F. PAGE, M.D., M.R.C.P.
<i>Registrar:</i>	D. N. PHEAR, M.D., M.R.C.P. (from 1.1.56)
<i>Research Assistant:</i>	Mrs. M. P. WILKINSON, M.B., B.S., M.R.C.P. (from 17.9.56)
<i>House Officers:</i>	R. A. GRANDE, M.B., B.S. (22.9.55-21.3.56) J. E. CRADOCK WATSON, B.M., B.Ch. (8.11.55-7.5.56) D. BLOMLEY, M.B., B.Chir. (22.3.56-21.9.56) Miss M. BURRAGE, M.B., B.S. (from 22.9.56) D. de SOUZA, M.B., Ch.B. (8.5.56-7.11.56) M. HARTOG, B.M., B.Ch. (from 8.11.56)
<i>Electrocardiographic Technician:</i>	Miss J. M. EVANS

During the year, the staff of the department was increased by the appointment of a Registrar—Dr. Phear. This enabled the department to give increasingly specialised attention to more patients and engage in more research. In addition, Dr. Wilkinson was appointed to study the effect of various long-term dietary regimes in patients with coronary artery disease.

Arrangements were made during the year for patients with chronic bronchitis to be sent to one of three country hospitals for continuation of treatment in an unpolluted atmosphere. The results have been very satisfactory.

By arrangement with the X-ray Department, cases of cancer of the lung discovered by the Mass X-ray Unit, are seen after the weekly combined X-ray meeting, thus expediting their admission to hospital.

Out-Patient Clinics	New Patients	Total Attendances
General medical ...	1,212	4,889
Cardiac	380	1,093
E.C.G. Department		
In-patients	1,238	1,847
Out-patients	927	1,302

GENERAL MEDICAL, HAEMATOLOGICAL, ENDOCRINOLOGICAL AND MENTAL OBSERVATION DEPARTMENTS

Consultant: RICHARD ASHER, M.D., F.R.C.P.

Registrar: A. E. A. READ, M.D., M.R.C.P. (till 31.3.56)
J. E. LENNARD-JONES, M.B., B.Chir., M.R.C.P. (from 1.4.56)

House Officers: Miss J. J. HALEY, M.B., B.S. (1.8.55-31.1.56)
J. BROTHWOOD, M.B., B.Ch. (1.2.56-31.7.56)
H. M. HODKINSON, M.B., Ch.B. (from 1.8.56)
B. CHENG, M.B., B.S. (1.11.55-31.10.56)
J. P. KNOWLES, M.B., B.Ch. (from 1.11.56)

Last year, instead of giving a description of the work done by the department (which does not vary very much from one year to another) I wrote an essay on one aspect of the work—teaching. As there were no objections to this and some people told me they preferred it to a formal report I am writing the same type of contribution again. This year I have chosen the subject of liaison for my essay.

One of the secrets of happy and efficient medical work is for one person to have easy and informal access to another. Though there are always official channels for all these things which involve filling in the appropriate form or waiting for some committee meeting, there is nothing to compare in value with the immediate and personal meeting of the people concerned.

At the Central the atmosphere of easy and informal access is particularly good. Personal contacts are more frequent than official communications. Here the enormous length of the hospital corridor has some advantages for everyone meets everyone else there. Many a helpful second opinion starts in the corridor with "Can you come and look at a man in Q2? I'd like to have your opinion." The other most useful meeting place for doctors is the dining room, a forum for the exchange of medical knowledge which is of incalculable value and where one gets to know one's medical colleagues. Allied to these geographical considerations much depends on the relations between these colleagues.

Important decisions are often made at impromptu conferences between members of one specialty and another, physicians bring pathologists to the bedside to discuss a finding or surgeons to discuss a possible operation; surgeons march in to the X-ray department with a difficult film and anaesthetists consider with the instrument men some adjustment to the innumerable gadgets with which they are always tinkering.

All these various consultations depend on that essential thing called liaison, a quality not to be manufactured by liaison officers but acquired unknowingly by a subtle blending of general know-how, friendliness, geographical proximity, co-operation, social charm and willingness.

In the work of a general medical department such as mine, liaison is one of the most valued factors and because of its importance and because of the high standard of such liaison at the Central Middlesex I have written this about it here.

General Medicine.

General medical work continues its steady change in character—tuberculosis and syphilis are becoming more and more rare whereas chronic bronchitis, carcinoma of the lung and atherosclerotic vascular disease are still increasing. Among the acute illnesses leukemia continues to increase and it seems to be far less confined to children than formerly.

The fashion for accounting for unexplained illness by psycho-somatic theories may explain the fact that people with physical ills are too readily labelled neurotic; because this department is linked with the mental observation wards those cases where there may be doubt about the mental or physical origin of their symptoms are referred to us. Among such cases two patients alleged to have hysteria provided some excitement and interest; the first had an immediate operation for removal of a subdural haematoma leading to a dramatic recovery from deep "hysterical" stupor, and the second, supposed to have hysterical weakness, had such severe infective polyneuritis that he was extensively paralysed and had to be moved over to Neasden hospital for mechanical respiration.

We are researching on the treatment of enuresis with the Chiron alarm apparatus with considerable success; it seems that enuresis may be due purely to loss of the waking mechanism normally associated with the emptying of the bladder rather than to the deep-seated psychological causes which are frequently postulated.

Out-Patient Clinics			New Patients	Total Attendances
General Medical	...	...	538	1,941
Endocrine	...	...	314	1,257

Mental Observation Wards.

At the time of writing (February, 1957) the builders are just starting the alterations to the ward which will provide better accommodation for patients, nurses, magistrates, authorised officers and doctors—in fact for everyone who uses the ward. We hope to carry on without having to close the ward during the alterations but it will certainly be very difficult at times and even now the noise of the drills and the hammering are rather trying when they go on for long.

Our newly-acquired E.C.T. apparatus is now in use and has been of considerable help in treatment. All treatment is given under penthothal anaesthesia with scoline as a relaxant.

As usual a large number of organic psychoses has been encountered. The different forms of alcoholic psychosis have been more numerous than usual and we have encountered every variety:—one presenting with epileptic fits, one with alcoholic dementia, one with confabulation and Korsakow's psychosis, several with acute alcoholic confusion associated with dipsomania and several others with classical delirium tremens; also we have at the moment the deceptive kind of case—a sweet old lady who admits only to taking an occasional teaspoonful of whisky with her warm milk at night and whom nobody would suspect of drinking, until investigation of cupboards at her home show that she has been drinking nearly a bottle a day instead of the occasional teaspoonful.

Another interesting patient in the ward at the moment of writing is an elderly man with very advanced myxoedema. He appears to have been hibernating in bed with this illness undiagnosed, for the last ten years. When he came in he was nearly dead from myxoedema and also so confused that he was admitted under the Lunacy Act. His temperature was so low that it could not be measured by the ordinary clinical thermometer, and his voice (of which we have tape-recordings of great interest) was too thickened and slowed to be comprehensible. Though it was touch and go whether he would revive, he now appears to be making steady progress with thyroid treatment and if all goes well should be quite healthy again in a month or so.

	1953	1954	1955	1956
Total number of patients admitted (under sections 20 and 21)	696	697	676	693
Transferred as voluntary patients	84	101	121	116
Transferred as temporary patients	73	58	90	136
Certified and transferred to mental hospitals	383	366	294	283
Discharged home or to other hospitals ...	149	159	158	146
Deaths in the ward	7	13	13	12
Total	696	697	676	693

GENERAL MEDICAL AND NEUROLOGICAL DEPARTMENT

Consultant: R. J. PORTER, M.B., M.R.C.P.
Registrar: K. L. GRANVILLE GROSSMAN, M.B., M.R.C.P.
House Officer: F. BILBEY, M.B., B.S. (till 8.5.56)
 R. A. GRANDE, M.B., B.S., M.R.C.S., L.R.C.P. (9.5.56-8.11.56)
 J. J. HALEY, M.B., B.S. (from 9.11.56)

The routine work of the department has continued without significant change. There has been a small, but welcome, fall in the outpatient numbers due to strict control of bookings by the departmental secretary. The clinics are still hard pressed and we are seeing as many patients as we can do justice to in the time available.

Neurological cases are drawn from a wide area, and many of the most interesting are transferred from other Regional Hospitals for special investigations. Excellent clinical material has been available for the weekly neurological demonstration on Wednesday mornings, which have been well attended by both medical and surgical undergraduates and by many members of the junior medical staff.

40 cases have now been seen at the Employability Assessment Committee for epileptics which was started in 1954. This has so far been in the nature of an experiment as the demand was not known and cases were confined to those referred by Willesden, Acton and Hammersmith Labour Exchanges. The assessment of a case often involves much work and the obtaining of reports and information from other sources. Several cases have had to be referred for long term assessment and stabilization in the outpatient clinic. The work is most interesting and instructive. The Resettlement Officers are enthusiastic and agree it is useful. It is significant that only one case was found to be unemployable because of uncontrollable fits. The most usual reason for inability to hold a job is psychopathic behaviour disorder or low intelligence. Eleven cases were referred for further assessment and stabilization as outpatients and when followed up in December, 1956, eight of these were in employment. It is felt that this work should be extended to other areas.

Out-Patient Clinics		New Patients	Total Attendances
General medical	...	619	2,416
Neurological	...	582	2,293

ELECTRO-ENCEPHALOGRAPHIC DEPARTMENT

Consultant: C. C. EVANS, M.A., M.R.C.S., L.R.C.P., D.P.M.
Senior Recordist: Miss M. MORGAN
Assistant Recordist: Miss P. ELLIS (part-time)

During this year the E.E.G. department has moved into larger and more suitable premises, and a new Ediswan Mark 2 recording apparatus has been purchased. It is hoped that the old Mark I machine, which has been in continuous use since the department opened in 1950, can be reconstructed and modified for further service.

			New Cases			Total No. of examinations		
			1954	1955	1956	1954	1955	1956
In-patients	...	...	166	167	183	233	212	262
Out-patients	...	...	714	757	786	865	920	947

PAEDIATRIC DEPARTMENT

Consultant: J. SAKULA, M.D., M.R.C.P., D.C.H.
Registrar: G. R. SPARROW, M.B., B.S., D.C.H.
House Officers: Miss G. M. GEE, M.B., B.S. (1.8.55-31.1.56)
 Miss M. S. MEYER, M.B., B.S. (1.2.56-31.7.56)
 Miss M. A. HATTON, M.B., B.S. (from 1.8.56)

Again in 1956 it must be reported that there is little change in the work of this department. The total medical admissions were still not sufficient to fill the ward all the year round, and surgical children have been accommodated as before. Accommodation was also offered to 14 adults on one side of the ward, during the slack summer months, while adult wards were being redecorated. 470 medical cases were dealt with as in-patients and of these there were 9 deaths. The out-patient figures are almost identical with those of 1955.

In the Maternity Department the premature birth rate fell from 8.62 per cent. in 1955 to 7.2 per cent. in 1956 of all the live births, but unfortunately owing to a larger number of very small infants, the total survival rate fell to 83.5 per cent. from the previous high record of 89.2 per cent. in 1955.

The department continues to play its part in the teaching in the hospital. Regular weekly optional rounds are given for the undergraduate students from the Middlesex Hospital, as well as the special clinical rounds which are given for postgraduates. There are, in addition, nearly always several postgraduates from overseas attached to the department, receiving instruction mainly to assist them in obtaining the special diploma in Child Health.

Out-Patient Clinics				New Patients	Total Attendances
1954	...	...	...	905	3,371
1955	...	...	...	903	3,266
1956	...	...	...	903	3,223

GENERAL MEDICAL AND NEUROLOGICAL DEPARTMENT

Consultant: A. J. FORTER, M.D., F.R.C.P.

Associate: A. J. MANTON, M.D., F.R.C.P.

Senior Registrar: J. P. BENTON, M.D., F.R.C.P.

DEPARTMENT OF GASTROENTEROLOGY

<i>Consultants:</i>	F. AVERY JONES, M.D., F.R.C.P. T. D. KELLOCK, M.D., M.R.C.P.
<i>Hon. Associate Physician:</i>	RICHARD DOLL, O.B.E., M.D., F.R.C.P. (Medical Research Council)
<i>Senior Registrar:</i>	M. P. SPENCE, M.B., M.R.C.P. (from 14.2.55)
<i>Registrar:</i>	J. BALINT, M.B., M.R.C.P. (from 3.1.55)
<i>Research Assistants:</i>	Miss MARGOT SHINER, M.R.C.S., L.R.C.P., D.C.H. (Medical Research Council) (from 1.6.56) V. EDMUNDS, M.D., M.R.C.P. (Central Middlesex Hospital) (Research Grant) Miss BARBARA WHITE, B.Sc. (Medical Research Council) J. L. STUBBE, M.D., M.R.A.C.P. (Fulbright Fellowship) (to 16.8.56) G. W. COOPER, M.B., M.R.A.C.P. (Central Middlesex Hospital) (Research Grant) C. W. E. WILSON, M.B., M.R.C.P. (Central Middlesex Hospital) (from 1.10.56) (Research Grant)
<i>House Officers:</i>	C. R. SALMON, M.B., B.S. (1.8.55-31.1.56) W. HEDLEY JONES, M.B., B.S. (from 1.8.56) A. B. RAWSON, M.B., M.R.C.P. (from 1.8.55) G. F. JOPLIN, M.B., Ch.B., M.R.C.P. (to 31.7.56) B. A. SCOBIE, M.B., Ch.B. (from 1.9.56)
<i>Dietitians:</i>	Miss E. MURLAND Mrs. A. M. DAWSON

By the time this report is printed the Department of Gastroenterology will have moved into its new building opened by Sir Gordon Gordon-Taylor on March 15th, 1957.

It contains four laboratories, endoscopy and x-ray theatre, library and conference room, consulting room and offices. The department is due to the generosity of the Nuffield Foundation who contributed £6,500 towards its cost, the N.W. Regional Hospital Board who contributed £2,200 and the Medical Research Council who have provided the scientific equipment at a cost of £6,100. The gastroenterological wards are being moved to the adjacent "C" Block; furthermore a new diet kitchen is being built just below with a further grant of £1,500 from the Nuffield Foundation with a similar amount from the Regional Board.

The new building will bring together all the routine teaching and research activities. It is essentially a department designed to improve the medical service available to out-patients and at the same time, to extend facilities for teaching and research. The extra laboratory accommodation will be under the supervision of Dr. E. N. Rowlands, F.R.C.P., a full-time research worker under the Medical Research Council who will continue to work part-time in the Department of Clinical Research at University College Hospital.

During the year Dr. Richard Doll has continued his studies on the factors influencing the rate of healing of gastric ulcer and has demonstrated that smoking can be shown to have an adverse effect on the rate of healing. Studies on colitis and diabetic pregnancies have been continued by Dr. Kellock. Special clinical studies have been made on jejunal diverticulosis which is sometimes associated with intermittent attacks of diarrhoea and occasionally with a pernicious anaemia type of clinical picture. A study has also been made of the post-bulbar duodenal ulcers which have a special tendency to bleed and which sometimes cause intermittent episodes of obstruction.

The routine work of the department has proceeded as in previous years. There were 153 admissions for haematemesis, 8 of whom died; a lower mortality than previously recorded. On the other hand, the mortality for perforations rose during the year—there were 10 deaths among 56 cases. The value of Nor-adrenaline as a resuscitating agent has been demonstrated in some of the cases who survived.

During the year Dr. J. Stubbe, Dr. G. Cooper and Dr. C. W. E. Wilson from Melbourne, have worked in the department; in addition, there have been Dr. Zaversnik and Dr. Percic from Yugoslavia.

In July the Fifth International Congress of Gastroenterology was held in London and all members of the department took an active part in assisting with its organisation or at the meeting itself.

There were over 800 delegates from many countries. After the meeting a special demonstration was held at the hospital.

O.P. Clinics	New patients	Total attendances
Gastroenterological	2,265	12,714
Dietitian	582	2,002

TUBERCULOSIS UNIT

Consultant: C. H. C. TOUSSAINT, M.R.C.S., L.R.C.P., D.P.H.

Senior Registrar: J. S. WATSON, M.D., M.R.C.P. (from 30.9.54)

Registrar: K. H. NICKOL, M.B., B.S. (1.4.53-31.3.56)

M. W. SUSSER, M.B., B.Sc. (from 4.6.56)

House Officers: G. R. BONNER-MORGAN, M.R.C.S., L.R.C.P. (1.11.55-30.4.56)

J. R. F. WILLIAMS, M.B., B.S., M.R.C.P. (from 1.5.56)

ADMISSIONS AND DISCHARGES TO THE TUBERCULOSIS UNIT.

	Admissions	Discharges (with period in hospital)				Deaths
		Total	Less than 3 months	3-6 months	Over 6 months	
Males	247	226	185	26	15	20
Females	139	141	97	29	15	4

OPERATIONS PERFORMED.

	Artificial pneumothorax	Thoracoscopy*	Bronchoscopy*
Males	8	14	102
Females	17	18	22

* These operations were undertaken by Mr. Robert Laird, visiting Thoracic Surgeon.

Many of the bronchoscopies were done on Chest Clinic patients to assist in the diagnosis of bronchial carcinoma. During 1956 this condition was found in 46 cases, 17 being operable.

Of the 240 male patients admitted to Ward J.1, 102 were admitted for bronchoscopy only, of the remaining 138, 48 were not suffering from pulmonary tuberculosis. Of the 20 deaths in Ward J.1, 7 were not due to pulmonary tuberculosis and of the remaining 13, who were tuberculous, 9 of these patients were over the age of 60.

Of the 139 female patients admitted to Ward J.2, 22 were admitted for bronchoscopy only, of the remaining 117, 21 were not suffering from pulmonary tuberculosis. Of the 4 deaths in Ward J.2, 3 were not due to pulmonary tuberculosis and the remaining one was due to pulmonary tuberculosis, but the patient was 80 years old.

DERMATOLOGICAL DEPARTMENT

Consultant: H. T. H. WILSON, M.D., M.R.C.P., D.T.M., D.T.H.

Registrar: J. HANSELL, M.R.C.S., L.R.C.P.

It was hoped last year that it would be possible to have a third out-patient session for this department. Unfortunately this hope has not materialised, so it has been necessary to reduce both the new and old patients attending the clinic and the out-patient waiting time is now approximately four weeks for ordinary patients and fourteen weeks for cases of warts.

During the year a controlled experiment was carried out on various forms of eczema using Hydrocortisone ointment and Glycyrrhetic acid, the results of this have not yet been completed. A considerable amount of time was spent on the investigation of cases of suspected allergic dermatitis and 331 patch tests were performed.

Out-Patient Clinics				New Patients	Total Attendances
1954	...	...	...	1,215	5,074
1955	...	...	...	1,259	5,646
1956	...	...	...	1,196	5,146

ALLERGY CLINIC

Consultant: D. HARLEY, M.D., B.Sc., F.R.I.C.

The work of the clinic has continued without major change during the past year.

There has been no appreciable change in the number of new cases and of total attendances. In spite of certain seasonal variations, the waiting time for new cases is rarely over 2-3 weeks, and urgent cases are usually seen at the first available clinic.

It is again a pleasure to record appreciation of the work of the nursing staff on which the smooth functioning of the clinic so much depends.

Out-Patient Clinics				New Patients	Total Attendances
1955	...	...	...	213	1,998
1956	...	...	...	204	2,012

GERIATRIC UNIT

<i>Consultant:</i>	A. D. ABDULLAH, M.B., M.R.C.P.
<i>Registrar:</i>	Miss E. O'CLEARY, M.B., B.Ch. (till 29.11.56) Miss E. POWER, M.B., B.Ch. (from 30.11.56)
<i>House Officers:</i>	Miss E. DUTHIE, M.B., Ch.B. (1.2.55-31.1.56) Miss J. M. HALL, M.B., B.S. (from 1.2.56) H. F. A. HAMILTON, M.B., M.R.C.P. (2.1.56-15.7.56) D. R. RYRIE, M.B., Ch.B. (from 2.7.56)
<i>Almoners:</i>	Miss G. M. CAPLE, A.M.I.A. Miss L. CARTER, A.M.I.A.

The work of our Unit has proceeded steadily during 1956. As the appended figures show, there has been a slight increase in the volume of work handled, but there are no major developments to report.

In February, Dr. Abdullah accompanied Dr. Gourlay and Mr. Lord of the Regional Board on a visit to Copenhagen. The object of this visit was to see some of the new hospitals which have been erected in Denmark, and particularly those devoted to the care of the chronic sick of all age groups, and much helpful information relative to the work of our own Unit was gained.

At the end of November, the term of office of our Registrar, Miss E. O'Cleary, came to an end. We should like to record our appreciation of her three years' valuable service to this Unit, and to wish her well in her new post. We are pleased to welcome as her successor, Miss E. Power, who comes to us from the Geriatric Unit at Whipps Cross Hospital, Leytonstone.

The domiciliary visiting service by doctor and almoner continues to be the basis of our work, and as usual medical students have been taken on the visits. Our short term holiday admissions were again much appreciated, and during the summer thirty-seven cases of this type were temporarily accommodated on our Unit.

Early in July the pressure on our female beds was so great that we turned over the ten male beds at Highwood House to female cases, and were grateful to accept the use of six female beds on Ward J.2. Even with these sixteen extra beds, we still find it impossible to satisfy the demands for female beds, either from outside the Hospital, or from the consultants in charge of the general wards of this and the other Hospitals in the Group.

There is a great necessity—(a) for more admission beds and (b) for more permanent-stay beds of the St. Monica's type. The former would shorten the pre-admission waiting time, and the latter would release some of the long-term rehabilitation beds at Leamington Park Hospital, which are at present blocked by permanent patients. In view of the growing proportion of old people in the population, the only alternative to such an expansion of our work appears to be the ultimate blocking of all our female geriatric beds, and the nursing on the general wards of a steadily increasing proportion of geriatric cases.

Analysis of Cases referred to the Department

Year	No. of cases referred	Domiciliary visits made
1954	776	703
1955	760	699
1956	801	757

Analysis of Admissions

Year	From outside waiting list	From C.M.H. acute wards	From other hospitals	From Old Peoples' Homes
1954	462	161	27	19
1955	468	159	26	15
1956	509	131	17	8

Analysis of Discharges

Year	To own or relatives' homes	To Old Peoples' Homes	To other hospitals	To C.M.H. acute wards	Deaths
1954	235	28	53	35	287
1955	263	23	45	54	292
1956	280	19	34	29	300

PSYCHIATRIC (OUT-PATIENT) DEPARTMENT

Consultants: O. W. S. FITZGERALD, M.A., M.D., D.P.M.

B. M. C. GILSENAN, M.D., D.P.M.

S. T. HAYWARD, M.B., B.S., D.P.M.

D. T. BARDON, M.D., B.Ch., B.A.O., D.P.M.

There has been very little change in the work of this department and the medical staff are the same as before.

There has been a slight falling off in the number of new patients seen, as compared to the previous year, but the total attendances remained about the same.

Out-Patient Clinics				New Patients	Total Attendances
1954	...	...	...	577	2,789
1955	...	...	...	694	2,944
1956	...	...	...	606	2,982

SPECIAL DEPARTMENT

Consultant: P. A. CLEMENTS, M.B., B.S.

The number of new patients and attendances remain much about the same as in previous years. It is disappointing that gonorrhoea in the community does not decline, as the response to penicillin appears to be so dramatic. Possibly this may partly be due to cases of urethritis being treated without proper bacteriological control and failure to complete the necessary "tests of cure." This may be resulting in the growth of an army of gonococcus carriers and be responsible for the fact that, in respect of gonorrhoea, the use of penicillin has not counteracted the greater sexual promiscuity that is prevalent today.

Non-gonococcal urethritis in males was responsible for approximately 30 per cent. of the new male cases and could be a source of great expense. In contrast however to a practice which seems to have become common of commencing treatment of non-gonococcal urethritis with expensive antibiotics, such cases have been treated first with sulphonamides, and antibiotics have been used only in the event of failure with less expensive remedies.

We have found that we have had to use antibiotics in these cases only rarely. The financial saving achieved by this practice may be judged by the fact that if sulphonamides succeed, the average cost of remedy is 2s. 4d. per case which contrasts with approximately 30s. for one of the tetracyclines. It should be added that contacts of male cases of non-gonococcal urethritis have also been treated on similar lines.

There are many ways of taking pleasure—here is a new one! A patient, on being told that she was now cured and that there was no need to attend again, replied, "Oh! I am sorry. I have enjoyed coming here."

Clinics	1953	1954	1955	1956
New patients	774	807	837	941
Total attendances	11,241	10,143	9,214	9,282

ORTHOPAEDIC AND TRAUMATIC UNIT AND CASUALTY DEPARTMENT

Consultant:	J. G. BONNIN, M.B., B.S., F.R.C.S.
Consultant: (Plastic Surgery)	I. MUIR, M.B.E., M.B., B.S., F.R.C.S.
Senior Registrar:	H. G. STACK, F.R.C.S. (4.6.53-3.6.56) B. CASHMAN, M.B., B.S., F.R.C.S. (from 12.11.56)
Casualty Registrar:	W. A. CRABBE, M.B., B.S. (from 7.11.55)
House Officers:	J. W. LLOYD PARRY, B.M., B.Ch. (22.8.55-21.2.56) G. M. W. SMITH, M.B., B.S. (22.2.56-21.8.56) R. M. WAINWRIGHT, B.A., M.B., B.Chir. (from 22.8.56)
Senior House Officers:	C. B. MORTIMER, M.B., B.Chir. (1.9.55-29.2.56) D. M. WARNER, M.B., B.S. (12.3.56-11.9.56) C. J. LUKE, M.B., B.S. (from 12.9.56)
(Casualty)	E. N. RISEBOROUGH, M.B., Ch.B. (from 26.1.55) H. H. SHELLEY-JONES, M.B., B.S. (30.1.56-28.6.56) I. C. CREE, M.B., B.S., M.R.C.S., L.R.C.P. (18.6.56-17.12.56) E. I. KOHORN, M.B., B.Chir. (from 18.12.56)

The number of patients seen by the Unit remains much the same as in previous years. This is in part due to the limitation of the numbers seen in the Orthopaedic Out-Patients' Clinics, but at no time did the waiting time in Out-Patients exceed two weeks. By this means the waiting list for admissions has been kept in control and with the exception of cases of bunions and hallux valgus the waiting time for admission for operation has remained under three months.

The appointment of Mr. Ian Muir as Consultant Plastic Surgeon has not only given the hospital another valuable department but has been of great value in stimulating interest in plastic procedures in relation to trauma. A small clinic for plastic cases is held in the Casualty Department on alternate Friday mornings.

Out-Patient Clinics		New Patients	Total Attendances
Frac. & Orth.	1955 ...	3,438	13,746
	1956 ...	3,690	14,888
Casualty	1955 ...	21,401	47,241
	1956 ...	21,273	48,052

GENERAL SURGICAL AND NEUROSURGICAL DEPARTMENT

<i>Consultant:</i>	T. G. I. JAMES, B.Sc., M.Ch., F.R.C.S.(Eng.), F.R.C.S.(Edin.)
<i>Senior Assistants:</i>	H. HASHEMIAN, M.B., B.S., F.R.C.S.(Edin.) (till 21.2.56) J. G. ROBERTS, M.B., Ch.B., F.R.C.S. (<i>locum</i> S.H.M.O.)
<i>Registrars:</i>	H. SEGAL, M.S., F.R.C.S. (16.12.54-24.2.56) E. BADER, M.B., Ch.B. (from 20.2.56) J. J. B. HOBBS, F.R.C.S. (1.1.55-31.12.56)
<i>House Officers:</i>	Miss P. J. M. COTTER, M.B., B.Ch. (1.9.55-29.2.56) Miss J. J. HALEY, M.B., B.S. (16.2.56-15.8.56) H. HILLMAN, M.R.C.S., L.R.C.P. (from 16.8.56)

The work of the year shows an increasing number of patients treated as In-patients and an increase in the number of patients seen as Out-patients. It has been necessary to restrict the number of Out-patients seen because the waiting list for such conditions as hernias and other non-malignant lesions has been increasing.

Although patients are discharged from our wards at the earliest possible moment, there has been an increasing number of elderly patients, particularly on the female side, who have become long-stay patients and eventually have to be transferred to the wards for the chronic sick. There has been considerable pressure on the latter beds and the delay in finding a vacancy reflects itself in the increasing number on our waiting lists.

During the past year we have investigated the possibilities of hypophysectomy in the treatment of advanced carcinoma of the breast. Cases have been referred from several hospitals in the North West Metropolitan Region, particularly from the Radiotherapy Department of Mount Vernon Hospital. The results will form the basis of a contribution at a later date.

An increasing number of cerebral aneurysms are being referred here; in order to cope with the new methods of anaesthesia employed for their treatment, it will be necessary to have additional theatre facilities. Two years ago in the Annual Report the need for another operating theatre was pointed out; the need is now acute, not only for the reason indicated but in order to accommodate the other increasing demands in all the surgical departments of the hospital. It is hoped that temporary accommodation will be found by modification of Theatre 2, and it is hoped that a new theatre can be built in its vicinity.

GENERAL SURGICAL, RECTAL AND VARICOSE VEIN DEPARTMENT

ANALYSIS OF OPERATIONS (other than Neurosurgical)

From 1.1.56 to 31.12.56

From own wards	644
From gastro-enterological wards	66
From children's wards	98
Sick Staff	19
From other wards	100
From Out-patient Department	53
Total	980

NEUROLOGICAL SURGERY, In-patients

Total number of cases treated	428
Total number of cases treated to a conclusion	403
Cases still receiving treatment on 31.12.56	25

403

Analysis of the ~~324~~ cases discharged during 1956

Spine and spinal cord	44
Skull and brain trauma	129
Brain tumour	95
Cerebral abscess	8
Subarachnoid haemorrhage	46
Sympathetic nervous system	14
Nerves—peripheral	21
Congenital anomalies	7
Metastatic carcinoma of breast for hypophysectomy	13
Miscellaneous	26

GENERAL AND NEUROLOGICAL SURGERY. Out-Patients.

Clinics	New Patients	Total Attendances
General Surgery ...	1,081	3,086
Neurological Surgery ...	196	1,014

GENERAL SURGICAL AND UROLOGICAL DEPARTMENT

<i>Consultants:</i>	J. D. FERGUSON, M.D., F.R.C.S. J. W. P. GUMMER, M.S., F.R.C.S.
<i>Senior Registrar:</i>	J. C. ANGELL, F.R.C.S. (from 14.11.55)
<i>House Officers:</i>	E. R. MONYPENNY, M.B., Ch.B., F.R.C.S. (1.9.55-31.8.56) J. L. JARDINE, M.B., Ch.B. (from 1.9.56) P. T. PICKENS, B.M., B.Ch. (4.10.55-24.4.56) B. L. LEES, M.B., B.S. (11.6.56-2.12.56) R. C. YOUNG, M.B., B.S. (from 11.12.56)

The Unit has continued to function as in previous years. In addition to the routine work accruing from its own out-patients and emergency admissions, there has been an increased demand for co-operation with other units, and there has been a particularly close association throughout the year with the Gastroenterological Unit.

The addition of a Registrar to the Unit is anticipated and this it is hoped will increase the availability of a member of the Unit for consultation in the Casualty Department. The appointment of a Registrar to the Unit will also enable more detailed case records to be kept. The need for this has been felt for a long time.

Investigation into the long-term results of treatment of prostatic carcinoma by endocrine therapy has continued.

We have been fortunate in having the services of Mr. G. F. Murnaghan, F.R.C.S., Research Assistant to the Institute of Urology, and he has been responsible for much work on cases of hydronephrosis treated by the Unit.

Out-Patients Clinic				New Patients	Total Attendances
1955	...	...	...	1,743	6,253
1956	...	...	...	1,554	5,194
Operations performed				Set	Emergency
1955	...	...	...	1,311	429
1956	...	...	...	1,339	245

GENERAL SURGICAL, RECTAL AND VARICOSE VEIN DEPARTMENT

Consultant: F. A. HENLEY, M.B., B.S., F.R.C.S.

Registrar: M. W. F. DUNNING, M.R.C.S., L.R.C.P., L.D.S., R.C.S. (till 2.6.56)

Miss B. M. L. UNDERHILL, M.B., B.S., F.R.C.S. (3.6.56-30.11.56)

K. R. S. POOL, M.B., B.S., M.R.C.S., L.R.C.P. (from 1.12.56)

House Officers: G. T. WHITAKER, M.B., B.Chir., M.R.C.S., L.R.C.P. (13.12.55-30.6.56)

U. K. MERRILL, M.B., Ch.B., M.R.C.S., L.R.C.P. (from 1.8.56)

Although the number of beds serviced by this Unit remains the same, by increasing the bed occupancy turnover a further fifty-five patients were admitted during the course of this past year, bringing the total to 1,196, and of these admissions 963 were operated on.

There were seventy-four fewer emergency admissions to the Unit this year, and only 52 per cent. of these required surgery as against 62 per cent. of the emergency admissions last year.

The waiting list during the past three months has been under two hundred which is an improvement on last year, but at the moment it stands at one hundred and ninety.

The Unit is continuing with its researches into chronic pancreatitis and biliary surgery and the animal side of this work is being continued at the Institute of Clinical Research and at the Buxton Browne Research Farm.

During the year Major Desmond Cowan, R.A.M.C., who was seconded to the Unit, completed his twelve months' surgical study and obtained his Fellowship of the Royal College of Surgeons during this period.

	Admissions		Operations	
	Total No. of admissions	No. of emergency admissions	Total No. of operations	No. of emergency operations
January	75	44	50	23
February	73	42	50	18
March	89	41	70	17
April	105	27	94	15
May	106	46	82	25
June	122	41	98	24
July	116	47	89	29
August	117	34	91	14
September	111	35	100	19
October	104	37	95	18
November	99	35	83	21
December	79	38	61	20
Totals	1,196	467	963	243
Emergency Percentage ...	39 per cent.		52 per cent. of emergency admissions required surgery.	

Out-Patient Clinics	New Patients	Total Attendances
General Surgery ...	933	2,336
Rectal	467	1,201
Varicose Veins	190	468
Totals	1,590	4,005

EAR, NOSE AND THROAT DEPARTMENT

Consultant: MAXWELL ELLIS, M.D., M.S., F.R.C.S.

Registrar: V. J. BRIFFA, M.D. (Malta)

During a year when the number of new patients attending Ear, Nose and Throat out-patient clinics generally has been diminishing, the number here has remained unchanged. Although there is a slight predominance of otological cases, the general range of work is comprehensive, and there has been a decided increase in the amount of referred work from other departments of the Hospital. There is also a slowly increasing number of cases admitted for nasal plastic surgery.

Tonsil and adenoid operations were abandoned for a short time during the late autumn, but this has made little difference to the waiting list, owing to the transfer of a certain number of cases to Neasden Hospital, and the waiting time for children is now only a month to six weeks. However, there is still a shortage of adult beds and this brief waiting time does not apply to adults.

There have been no major changes in personnel, and I cannot forbear from the perennial remark that a sound-proof cubicle has still not yet been provided.

Out-Patient Clinics	New Patients		Total Attendances	
	1955	1956	1955	1956
Held in—				
Out-patient Dept. and Casualty Dept.	2,389	2,381	5,382	5,422

OPHTHALMIC DEPARTMENT

Consultants: Mrs. DOROTHY MILLER, D.O.M.S.

P. D. TREVOR-ROPER, M.A., F.R.C.S., D.O.M.S.

The number of Out-patients attending the Ophthalmic Department is as great as the present accommodation permits. A certain number of these have had to be referred elsewhere for operation.

In spite of difficulties an average of four beds have been continuously occupied by patients having cataracts removed, squints put straight and all the more usual eye operations.

The new Ophthalmic block shortly to be opened at Neasden will, I hope, be equipped for all types of eye surgery and should make a great difference to the scope of the department.

Out-Patient Clinics				New Patients		Total Attendances
1954	...	...	...	1,057		4,387
1955	...	...	...	1,215		4,795
1956	...	...	...	1,046		4,894

THE DENTAL DEPARTMENT

Consultant:	W. FRASER-MOODIE, F.D.S., R.C.S.Eng., L.R.C.P., L.R.C.S.
Senior Hospital Dental Officer: (Part Time)	A. G. HARE, L.D.S., R.C.S. Edin.
Senior Registrar:	K. DAWSON WATTS, L.D.S., R.C.S.Eng., F.D.S., R.C.S. Edin.
Registrar:	Miss M. J. VIRGO, L.D.S., R.C.S.Eng. (till 29.2.56) G. G. McCLURE, L.D.S., R.F.P.S.G., H.D.D., R.C.S. Edin. (1.3.56-30.11.56)
Oral Hygienist:	Miss P. A. MANTELL
Senior Technician: (Surgical)	B. R. BROWN
Senior Technician:	N. A. TASCHNER

The large volume of work referred to this department from many sources far exceeds the amount which can be handled under existing conditions. This has made it necessary to introduce a waiting list for appointments and treatment for all but the most urgent cases.

The pressure of work has also interfered with some of the academic activities, and the time which was allocated to teaching fell short of that which is desirable.

The Dental Laboratory has worked to full capacity, and there has been an increase in the number of special prostheses constructed.

	New Patients		Total Attendances	
	1955	1956	1955	1956
Staff	181	248	1,094	1,503
In-Patients—				
Seen on wards ...	1,102	1,189	1,632	1,799
Seen in Department...	485	780	1,602	1,971
Out-Patients	1,125	1,175	5,751	5,391
Totals	2,893	3,392	10,079	10,664

DEPARTMENT OF ANAESTHETICS

Consultants:	A. C. R. RANKIN, M.B., F.F.A., R.C.S. R. D. LEVIS, M.B., F.F.A., R.C.S. Miss L. ALEXANDER, M.B., F.F.A., R.C.S. (from 1.9.54)
Senior Registrar:	Miss F. S. HUXLEY, D.A., F.F.A. (from 23.9.55)
Registrar:	Miss N. BRUCE, M.B., B.Ch. (4.10.54-31.7.56) L. KHAN, M.B., D.A. (from 30.8.56)
House Officer:	D. D. DAVIES, M.R.C.S., L.R.C.P. (25.10.55-31.8.56) Miss M. A. LAWRENCE, M.B., B.S. (from 1.9.56)

No report this year.

OBSTETRIC AND GYNAECOLOGICAL DEPARTMENT

<i>Consultants:</i>	J. S. MacVINE, M.B., F.R.C.S.E., M.R.C.O.G. Miss M. A. M. BIGBY, M.D., M.R.C.O.G.
<i>Senior Registrar:</i>	P. D. CAMPBELL JACKSON, M.R.C.S., L.R.C.P., M.R.C.O.G.
<i>Registrar:</i>	J. R. SAUNDERS, M.B., B.S., M.R.C.O.G. (24.11.54-26.5.56) C. W. GALE, L.R.C.P. and S.I. (from 22.6.56)
<i>House Officers:</i>	R. J. VENN, M.B., B.S., D.Obstet., R.C.O.G. (29.10.55-30.9.56) Miss G. M. W. SMITH, M.B., B.S. (from 1.10.56) C. W. GALE, L.R.C.P. and S.I. (7.3.55-6.3.56) Mrs. S. WOOD, M.B., B.S., M.R.C.S., L.R.C.P. (7.3.56-6.9.56) Miss M. BLYTHE, M.B., Ch.B. (from 1.9.56) A. J. G. TIMMINS, M.R.C.S., L.R.C.P. (1.8.55-31.1.56) Miss P. J. N. COTTER, B.M., B.Ch. (1.3.56-31.8.56) A. R. TRIST, M.B., B.S., F.R.C.S.E. (from 1.9.56) Miss M. F. JARVIS, M.D., M.R.C.P. (18.11.55-17.5.56) Mrs. R. HENRYK, M.B., B.S. (18.5.56-17.11.56) Miss S. M. EADES, M.B., B.S., M.R.C.S., L.R.C.P. (from 18.11.56)

The figure of 2,032 mothers delivered in this hospital showed an appreciable increase compared with the 1955 figure despite the fact that once again we had a small outbreak of haemolytic streptococcal infection which necessitated the restriction of admissions. There was no maternal or neonatal mortality from this cause. The maternity bookings show a definite upward trend and it is only with the greatest difficulty that we have been able to accommodate this number. The number of ordinary beds has been reduced from 85 to 79 in order that we may always have 6 beds available for isolation should an epidemic of infection occur. In addition we arranged to keep beds vacant for cases of pre-eclamptic toxæmia in order to ensure early hospitalization of domiciliary cases if necessary. The result has been that the department has been working at a pressure which is really not justified and we have therefore had to reduce the number of bookings.

There were four maternal deaths in the department. One was a severe case of mitral stenosis who died despite an emergency valvotomy. The second was a case of anuria following toxæmia of pregnancy at 26 weeks pregnancy in an emergency admission; she was recovering from the uræmia but died of an intercurrent septicaemia nearly six weeks after delivery. The third case was a Jamaican who developed cirrhosis of the liver in mid-pregnancy, and died a month after delivery from cirrhosis. The fourth case was a case of aplastic anaemia presenting thrombocytopenia at the 37th week of pregnancy.

The number of antenatal cases admitted to hospital was 557 of whom 378 were discharged prior to delivery. The Caesarean Section rate is slightly raised at 4 per cent. but the forceps rate remains almost identical at 7.3 per cent.

We had seven cases of diabetes in pregnancy. All of these were successfully delivered of live children who have survived.

During the year we have done an investigation using Ergometrine and Rondase (Hyaline) at the time of delivery of the anterior shoulder, the injection is given intramuscularly by the midwife. The object was to see if this would cut down the incidence of post-partum haemorrhage and the necessity for blood transfusion. The results have been most encouraging. 1,685 mothers with normal deliveries were given this injection and among these the incidence of post-partum haemorrhage was 6 per cent. and the transfusion rate 0.83 per cent. This compares very favourably with the 1955 figures in which there was a post-partum haemorrhage

rate of 11.3 per cent. and a transfusion rate of 2.1 per cent. in 1,548 normal deliveries. The incidence of manual removal of the placenta has been only very slightly increased. We shall continue to use Ergometrine with Rondase for normal deliveries and to keep a check on the results.

The stillbirth figure remains at approximately the same, 25.3 per thousand. Of the fifty-two stillbirths, eleven infants were only 30 weeks maturity or under. Among the remaining forty-one stillbirths, seven were associated with some form of toxæmia of pregnancy but only one was due to accidental ante-partum hæmorrhage. There were no stillbirths from placenta prævia.

The gynaecological department remains at almost the same figure for the past two years. The pressure on this department is very great and although 40 new cases are seen a week, there is still an appreciable period before an out-patient appointment can be made but no urgent case is kept waiting. The waiting list for operations has been considerably reduced. A certain number of cases have been operated on by surgeons from this hospital at Acton Hospital where more gynaecological beds have become available.

Mr. Campbell Jackson, the Senior Registrar, spent three months at the Memorial Centre, New York, studying the surgery of advanced cancer. The knowledge acquired has enabled several exenteration operations to be performed in cases which were otherwise untreatable.

OBSTETRIC DEPARTMENT

Expectant mothers examined in Ante-natal clinics ...	...	...	...	2,466
Total attendances in Ante-natal clinics ...	...	...	...	14,628
Total attendances in Post-natal clinics ...	...	...	...	1,982
Mothers delivered in hospital ...	...	...	...	2,032
Mothers admitted after delivery ...	...	...	...	19
(Caesarean section ...)	...	...	82 (4%)	
(Forceps ...)	...	...	149 (7.3%)	
Flying squad calls ...	...	...	...	5
(2 P.P.H.—admitted)	...	...	...
(3 P.P.H.—not admitted)	...	...	...
Maternal mortality ...	...	...	...	4
Maternal morbidity—pyrexial cases (notifiable) ...	...	...	...	120
Number of babies born in hospital ...	...	...	...	2,055
Number of stillbirths ...	...	...	...	52
				(25.3 per 1,000)
Number of live births who died in hospital ...	...	...	...	35

Analysis	Premature	Mature	Total
In first 24 hours ...	14	5	19
From 2-7 days ...	8	4	12
From 8-28 days ...	2	2	4
Over 28 days ...	—	—	—
	24	11	35

GYNAECOLOGICAL DEPARTMENT

	1955	1956
New Out-patients ...	1,732	1,771
Total attendances ...	5,505	5,555
Total operations		
Major ...	408	398
Minor ...	1,217	1,147

BIRTH CONTROL CLINIC

New Out-patients ...	131	120
Total attendances ...	815	749

RADIOLOGICAL DEPARTMENT

<i>Consultants:</i>	F. PYGOTT, M.B., Ch.B., D.P.H., D.M.R.E. C. F. HUTTON, M.R.C.S., L.R.C.P., D.M.R.D.
<i>Senior Registrar:</i>	M. SPIRO, M.B., B.S., D.M.R.D. (from 16.1.56)
<i>Registrars:</i>	J. P. SINHA, M.B., B.S.(Pat.), D.M.R.D. (till 18.1.56) W. S. PHILLIPS, M.B., Ch.B. (from 1.2.56) S. W. SHELLSHEAR, M.B., B.S., D.M.R.D. (till 4.8.56) D. C. JAMES, M.R.C.S., L.R.C.P., D.M.R.D. (till 31.12.56)
<i>Superintendent Radiographer:</i>	W. S. TAYLOR, M.S.R.

The pressure of work on the department increased during the year and the total number of patients examined in the main department increased by nearly two thousand on the previous year's total. The number of specialised examinations carried out also increased.

It will be seen that the Mass X-ray section dealt with over 38,000 persons. The number of examinations has increased by about three thousand persons annually since the section opened in August, 1952. The service provided is used more and more by general practitioners and the connection with surrounding doctors engaged in industrial practice is being strengthened. The results of this section's work for the three years 1953-1955 were recently reported in the medical press.

During the year there has been some improvement in the reporting room space and also in the filing accommodation. The present number of radiographic rooms is quite inadequate to deal with the volume of work called for and all members of the staff look forward to the speedy completion of a new department.

On the whole the radiographic staff has been maintained at or near the approved establishment, but it is becoming increasingly difficult to obtain junior radiographers. Our own difficulties in this respect are comparatively slight when compared with provincial non-teaching hospitals. It is hoped to recommence the training of radiographers under an approved scheme in the Autumn of 1957 in an effort to meet the long-term shortage.

The post-graduate training of radiological students has continued and four students were working in the department during the year.

It is again a pleasure to acknowledge the loyal assistance of all members of the department staff who have carried on under very difficult and sometimes harassing circumstances.

DIAGNOSTIC X-RAY SECTION

	Investigations	Films
In-patients	8,413	21,496
Out-patients	14,152	35,535
From—Casualty Dept. ...	7,793	13,072
From—Health Centres and T.B. dispensaries ...	338	1,112
Total	30,696	71,215

SPECIAL METHODS OF INVESTIGATION

	Investigations	Films
Barium—Meals	3,048	14,321
Enemas	831	2,886
Swallows	327	695
Cholecystograms	1,172	1,635
Intravenous pyelograms ...	1,264	4,649
Retrograde pyelograms ...	105	286
Lipiodol—Lungs	53	219
Sinuses	67	173
Spines	55	238
Encephalograms	35	256
Ventriculograms	49	310
Cystograms	5	14
Arteriograms	205	1,976
Tomograms	114	566
Total	7,223	28,224

MASS RADIOGRAPHY SECTION

Total No. of patients radiographed	38,166
Diagnoses:	
Pulmonary Tuberculosis (active or presumed active unsuspected disease)	230
Pleural effusion	28
Neoplasm of lung	48
Bronchiectasis	68
Emphysema	242
Significant disease of heart or aorta	19
Total Number of patients with significant abnormalities	635
Pick-up rate for active or possibly active pulmonary tuberculosis = 6.03 per 1,000	

DEPARTMENT OF PHYSICAL MEDICINE AND REHABILITATION UNIT

<i>Consultant:</i>	J. H. CROSLAND, M.R.C.S., L.R.C.P., D.Phys.Med.
<i>Assistant Physician:</i>	Miss JOSEPHINE ROTH, M.B., B.S., D.Phys.Med.
<i>Registrar:</i>	Mrs. E. G. MELLOR, M.B., Ch.B.
<i>Chief Physiotherapist:</i>	W. F. KEARTON, Esq., M.C.S.P.
<i>Chief Occupational Therapist:</i>	E. R. OLIVER, Esq., M.A.O.T.
<i>Speech Therapist:</i>	Miss B. FITCH, L.C.S.T.

The number of patients attending the unit has remained high. There has been a little easement in the load thrown on the physiotherapy department, but a rise in the numbers attending for group exercises.

This is a step in the right direction and is the direct result of a policy of closer integration of the physiotherapy and gymnastic departments which has been followed since the beginning of the year. It should mean that patients are discharged earlier.

The occupational therapy department is still being held back by lack of the necessary equipment and there can be no further progress towards a better range of work until this is remedied.

There has been a steady rise in the number of cases of rheumatoid arthritis. It is hoped that earlier diagnosis, advice and treatment will reduce the number entering the chronic phase. If not, then the present available resources for their rehabilitation will soon become inadequate.

	New patients		Total attendances		Total Units of treatment	
	1955	1956	1955	1956	1955	1956
<i>In-patients</i>						
Physiotherapy	5,651	5,557	37,573	36,862	42,769	43,390
Occupational Therapy	582	557	14,243	9,214	—	—
Remedial Gymnast	50	68	382	449	686	858
<i>Out-patients</i>						
Physiotherapy	4,727	3,929	55,496	51,968	82,894	73,744
Occupational Therapy	310	304	7,309	7,503	—	—
Remedial Gymnast	979	1,215	13,643	19,924	26,662	38,737
Consultant Clinics	2,080	1,915	9,476	9,344	—	—
In-patients seen in wards	108	116	—	—	—	—

DEPARTMENT OF PATHOLOGY

Consultants:

Bacteriology: J. D. ALLAN GRAY, T.D., M.B., Ch.B., B.Sc., F.R.C.P.E., D.P.H.
Haematology and Biochemistry: G. DISCOMBE, M.D., B.Sc.
Morbid Anatomy: W. PAGEL, M.D. (until 27.5.56)
 R. A. B. DRURY, D.M. (from 1.11.56)

Senior Registrar:

Neuropathology: C. S. TREIP, M.D. (on study leave from 12.10.56)

Registrar:

Haematology: N. D. GOWER, M.B., B.S. (until 14.10.56)
 H. E. ROBERTS, M.A., M.R.C.S., L.R.C.P. (from 5.11.56)

Senior House Officers:

J. H. EDWARDS, M.B., B.Chir. (until 1.4.56)
 R. M. STIRLAND, B.A., M.B., B.Chir.
 H. de V. HEESE, B.Sc., M.B., Ch.B., D.C.H. (from 2.4.56)

Chief Technician:

C. E. INMAN, F.I.M.L.T.

In May, Dr. Pagel left us on his transfer to Clare Hall after seventeen years' association with the Morbid Anatomy Department, during which time that department was built up and the museum established. We welcome in his place as Consultant in Morbid Anatomy Dr. R. A. B. Drury who has been Senior Assistant to Professor G. R. Cameron, F.R.S., at University College Hospital Medical School.

The Standard Unit System introduced by the Ministry of Health in 1953 for recording the amount of work done has still been used in 1956 when 260,961 units were earned—an increase of 4.9 per cent. over 1955. The figure for 1955 itself, however, was an increase of 9.7 per cent. over that for 1954, so that although the volume of work is still increasing the rate of increase is at last slowing down. This is fortunate, for the endurance of the staff is being strained with the ever-increasing volume of work which is quite out of keeping with the cramped space available. In 1953 the units earned amounted to 206,941. Within three years, therefore, the increase has been 26.1 per cent. During this time there has been no increase in either the medical or technical staff.

All sections of the department shared in the increase, that for bacteriology being 4.5 per cent., chemistry 5.9 per cent., haematology 6.2 per cent. and morbid anatomy 2.3 per cent. The sources from which the specimens came show considerable differences for 1955. The amount from Out-patients and Casualty rose by 11.4 per cent. and that from the General Practitioners by 18.9 per cent. While these are sources from which we are neither able nor willing to discourage work, the increases are adding to our difficulties in coping with the demands made on the department. The fall of 26.1 per cent. in the amount of work from the Public Health Laboratory Service probably indicates that the increase during 1955 in the work from that source was only temporary.

DEPARTMENT OF PATHOLOGY (continued)

Extension of the Out-Patient Block: A considerable amount of time has been devoted to the preparation of plans for the proposed new laboratories. The execution of the first phase of the extension scheme will make the running of the department much easier, but even then the laboratory will be much smaller than the work undertaken in it justifies.

BACTERIOLOGY.

Streptococcal infections: In spite of the precautions taken as a result of the outbreak of infection in the Maternity Department in 1955, another outbreak occurred in 1956. Fortunately, this was kept within much smaller bounds. The organism causing the outbreak was again a *B* haemolytic streptococcus of Group A but the type differed in being type 28. It was identical with the organism which affected 59 individuals in the outbreak in the West Middlesex Hospital in June, 1956.

The number of individuals found to harbour the organism was 15 staff and 18 patients. None of them was seriously ill. The numbers, however, do not convey a true picture of the staffing difficulties which the outbreak caused to Matron and her staff in the running of the Maternity Department. As before, many of the individuals, particularly the staff who harboured the organism, appeared in perfect clinical health but fortunately on this occasion the experience obtained last year enabled measures to be taken to eliminate the organism promptly. A feature of the outbreak was that 13 babies, all born in the hospital, showed infections after their discharge from hospital. None of these infections became generalised. The commonest site was the cord and staphylococci as well as haemolytic streptococci was found in different cases. Stonebridge Health Centre did valuable work in looking out for these infections and treating them promptly.

A *Control of Infection Committee* has been set up in accordance with the recommendations by the Ministry of Health. It has met on four occasions and has proved extremely useful in discussing measures for the control of infection, especially in the maternity department. Thus, it has decided that the Segregation Unit of six beds should be kept for infected or potentially infected patients only and a separate return made of their occupancy. Maternity bookings should not exceed 150 per month so as to enable emergencies to be accepted and patients with toxæmia to be admitted for long periods. This figure could be stepped up slightly if the number of empty beds was obviously too high. Gynaecological cases should not be transferred to empty beds in the maternity unit. These procedures are to be tried for six months and the Committee is then to be recalled to review the results.

DEPARTMENT OF PATHOLOGY (continued)

Alimentary infections: The organisms of Sonne dysentery were isolated from no less than fifteen patients and a constant watch is maintained by the admissions officer to divert when possible infected individuals to the Infectious Diseases Hospital at Neasden. Only four *Salmonella* infections were diagnosed—two of *S. typhi murium* and one each of *S. paratyphosum* B. (phage-type Dundee) and *S. newport*. Serological strains of *Bact. coli* responsible for infantile enteritis were found on seven occasions.

Viral infections: We are indebted to the staff of the Virus Reference Laboratory at Colindale for undertaking numerous investigations. The results with sera from a youth of 19 gave evidence of recent infection with two strains of the Coxsackie B. group of viruses. A Herpes simplex virus was isolated in a HeLa cell tissue culture from a medical student and an adenovirus from a pupil midwife.

Glandular Fever was diagnosed in fifteen individuals. All these were young adults and the diagnosis from the haematological films was confirmed by the Paul Bunnell test in all but one of the patients.

Toxoplasmosis: Dr. I. A. B. Cathie of the Hospital for Sick Children examined for us many sera. In one family of ten, four members—the father and three of the children—gave a positive dye test at dilutions ranging from 1:8 to 1:32 and of these four, two had a positive complement fixation test at either 1:4 or 1:8. Four unrelated patients gave positive dye tests and one of these gave a positive complement fixation test as well.

Rarer findings included *Schistosoma mansoni*, trichiurias, actinomycosis and a haemophilus in a blood culture from a patient with subacute bacterial endocarditis.

HAEMATOLOGY.

More people have been asking for more blood to be cross-matched in case it is needed during operation. As it rarely is needed, this represents a considerable increase in work although the number of bottles actually used increased only from 3,596 to 3,799. It is not possible to increase the output further without increasing both our staff and the space available.

There have been no important changes in technique or organization during the year.

DEPARTMENT OF PATHOLOGY (*continued*)

BIOCHEMISTRY.

The usual studies in technique have continued. The rapid methods for the study of serum proteins have proved very satisfactory and are providing information which could not otherwise be obtained; some other hospitals have also adopted them. An entirely new method for the estimation of fibrinogen was worked out by Dr. Stirland and is in routine use. Other improvements have been in the estimation of serum calcium; various methods for the estimation of serum lipids have been tried and have proved to be unsatisfactory, but one now under trial is very promising.

MORBID ANATOMY AND AEMATOLOGY.

Despite the staff changes mentioned above, the volume of work in the department has increased. Biopsy examinations numbered 4,831 and 554 post-mortem examinations were carried out. These figures included 479 biopsies and 30 post-mortem examinations performed on patients in outside hospitals, and also 17 post-mortem examinations carried out by the coroner's pathologist at this hospital. Histological examinations supplementing the post-mortem work, and including special staining methods, numbered 2,475. In addition, there were 321 neurohistological examinations.

Post-mortem examinations performed at other hospitals in the Group have considerably increased, but the interesting nature of these cases makes the extra effort involved well worth while. The examination of sputa for carcinoma cells has produced results which could be vastly improved if the medical and technical time available for this technique could be increased; the success of the method is directly proportional to the time expended.

Changes in the nature of the work of the department and its enormous increase since its establishment in 1949 necessitate certain structural alterations within the department, and the collections of microscopic specimens and reports, which have now become of great interest and importance, call for permanent but accessible storage facilities.

Weekly demonstrations of post-mortem material have been held on Thursdays at 1.30 p.m. in the Iveagh Lecture Theatre. Clinico-pathological meetings with the gastro-enterological unit have been taking place once a week, instead of once a month as previously. Regular meetings are held with other firms.

DEPARTMENT OF PATHOLOGY (continued)

Sections			
	1954	1955	1956
Bacteriology	84,296	90,846	94,923
Chemistry	40,186	40,973	43,373
Haematology	70,932	81,400	86,415
	195,414	213,219	224,711
Morbid Anatomy	8,648	7,552	6,808
Histology	22,540	27,892	29,442
	31,194	35,444	36,250
Total Units	226,608	248,663	260,961

Sources			
	1954	1955	1956
Central Middlesex Hospital			
In-patients	157,694	164,327	168,869
Out-patients	50,767	65,023	72,424
Outside Hospitals	9,670	8,898	8,816
General Practitioners	2,214	3,238	3,850
Public Health Laboratory Service	765	1,037	1,308
Local Chest Clinics, Health Centres and Private Cases	5,498	6,140	5,694
Total Units	226,608	248,663	260,961

POST MORTEM ANALYSIS

	1952	1953	1954	1955	1956
Total Deaths in the Hospital ...	814	889	941	994	984
P.M. examinations carried out at the hospital	467	560*	472*	632*	554
P.M. examinations carried out by the Coroner's pathologist	178	171	175	105	175
Total P.M. percentage of deaths in the hospital	79.2	79.2	70.0	71.3	74.0
P.M. percentage of deaths in the hospital, excluding coroner's cases	73.4	74.2	59.5	60.7	56.3
P.M. examinations carried out on patients from other hospitals	17	8	12	17	30

*Including 27 stillbirths (1953)

" 16 " (1954)

" 28 " (1955)

" 34 " (1956)

THE PHARMACEUTICAL DEPARTMENT

Chief Pharmacist: Miss K. KNIGHT, F.P.S.

The shortage of qualified Pharmacists still persists. During the summer months this was felt acutely as the position of Deputy Chief Pharmacist was vacant from July until November and no qualified locum was available for most of that period. The employment of students and unqualified staff entails strain on the already overworked pharmacists.

A new salary scale was introduced in November last but this is hardly sufficient to affect the position materially.

The Department now closes on Saturday afternoons. This is in line with the practice of most large hospitals and has worked satisfactorily.

A selection of drugs for emergency use by the Medical Staff has been assembled and will be available shortly. This will ensure that any urgent requirements are easily found.

Miss K. M. Wemyss, Ph.C., was appointed Deputy Chief Pharmacist and took up her appointment in November. Several Junior Members of the Staff left and have been replaced by others, including one Hungarian Pharmacist who hopes to take the British qualification.

The quantity of work in the Department has been maintained during the year and in the Out-Patients' Dispensary has increased considerably. The working space in this Department is very limited and the proposed new dispensary, with more adequate storage space, will be welcomed.

ALMONERS' DEPARTMENT

Chief Almoner: Miss M. L. TATE, B.Sc.(Econ.), A.M.I.A.

Deputy Chief Almoner: Miss M. F. JOSEPH, A.M.I.A.

The Department has experienced another year of struggle against considerable odds. Building work was started over the offices in April on the new Gastro-Enterological Department, and the scaffolding remained in position until the middle of August. To the disadvantages of lack of light and ventilation was added almost continuous noise, first of demolition and then construction, which lasted throughout the year. During this trying time, everyone concerned with the building operations showed the utmost consideration and made every possible effort to minimise our discomfort. We have also laboured under shortage of qualified staff during the whole year, and this is attributable partly to scarcity of almoners, but also to some extent to the uncongenial and unsatisfactory office accommodation. The loyalty of those members who have stayed on is greatly appreciated.

Four almoner students have each spent five months in the Department, and one very promising social science student came for two weeks observation during her long vacation.

Requests for talks to be given to various friendly societies have continued to come in. Miss Tate is in the habit of complying with these, but on one occasion Miss Joseph gave a very successful address to the Willesden Green Townswomen's Guild.

During the autumn, the Establishment Committee requested Miss Tate to report on the need for an almoner's service at Neasden Hospital. She attempted to analyse the needs of patients occupying fever beds on a given date in consultation with the doctors, and found that approximately one third posed some social problem. The Committee subsequently decided to ask the Regional Board for permission to appoint a part-time almoner.

Because of the difficulties under which we have been working, any innovation or expansion has been impossible, and indeed, some retrenchment has been necessary. Prospects of increasing our staff to full establishment are brighter at the close of the year, and we hope to be able to improve our services again very shortly.

	1954	1955	1956
Convalescence arranged	866	744	786
(Failed to accept vacancies)	78	57	72
Appliances supplied*	2,578	2,567	2,326

* A group optician was appointed at the end of 1955 and spectacles are no longer ordered in the Department.

SCHOOL OF NURSING

Matron:

Miss D. R. WALLER, S.R.N., D.N.(Lond.)

<i>Deputy Matron:</i>	Miss A. TAYLOR, S.R.N., S.C.M.
<i>Principal Sister Tutors:</i>	Mrs. M. FARMER, S.R.N., S.C.M. Miss A. B. KING, S.R.N., S.C.M.
<i>Midwifery Superintendent:</i>	Miss N. M. SHIPP, S.R.N., S.C.M., M.T.D.
<i>Assistant Matrons:</i>	Miss W. M. BUCKENHAM, S.R.N., S.C.M. Miss E. E. PADFIELD, S.R.N., S.C.M., R.F.N.
<i>Sister Tutors:</i>	Miss W. T. CAPES, S.R.N., S.C.M. Miss M. C. DEVONSHIRE, S.R.N., S.C.M. Miss J. V. MORRISSEY, S.R.N.
<i>Principal Midwifery Tutor:</i>	Miss E. TOBIN, S.R.N., S.C.M., M.T.D.
<i>Midwifery Tutor:</i>	Miss E. BRINNAND, S.R.N., S.C.M., M.T.D.

During the past year one hundred and two Student Nurses were admitted to the Training School and seventy-one Pupil Midwives to the Midwifery School. Recruitment had again been satisfactory, all vacancies being filled. The number of Student Nurses who entered the State Examinations of the General Nursing Council were as follows:—

Final State Examination	...	...	...	93
Preliminary State Examination, Part I	...	...	...	85
Preliminary State Examination, Part II	...	...	...	5

and 73 Pupil Midwives entered Part I of the Examination of the Central Midwives' Board.

The yearly Presentation of Prizes and Certificates was held on the 30th October, the awards being made by Madame G. Avner. The Gold Medal was presented to Miss Anne Leighton and seventy-seven certificates were awarded to Student Nurses who had satisfactorily completed their training.

Team nursing was put into operation on one ward and was very successful, benefiting both staff and patients, and an account was published in the Nursing Press.

A Study Day for Ward and Departmental Sisters was held in January, invitations being extended to all Hospitals in the North West Metropolitan Region.

A number of our trained nurses sailed for work overseas, particularly in Canada and Australasia. A number of Student Nurses, on passing the Final State Examination of the General Nursing Council, were promoted to Staff Nurses, some later entering the Midwifery School.

Students from the King Edward's Hospital Fund Staff College and from the Royal College of Nursing and the Royal College of Midwives attended the hospital for periods of observation and experience, as had also two Student Nurses from America.

SCHOOL OF NURSING (continued)

Miss S. Hargadon was one of the representatives of the Student Nurses' Association who were fortunate in visiting Denmark to see the work of the Hospitals and Training Schools in that country. Two-thirds of the expenses for this visit was met by our own Unit. A magazine was also inaugurated by our Unit and is to be published in the Spring of 1957.

The Group Preliminary Training School at Grafton House, Acton Vale, continued to function very satisfactorily.

During the year the following staff were promoted to senior appointments:—F. Bailey, I. Davies, I. Green, G. Harvey, V. Hutchins, M. Lawson, I. McKeon, J. Sanders, T. Tierney and D. Williams.

We congratulate Miss B. Hallinan on obtaining her Midwifery Teachers' Diploma and also Miss E. Manning on passing Part I of the Diploma of Nursing of London University.

Our congratulations too to the nurses who in another sphere reached the semi-finals of the Nursing Times Tennis Challenge Cup, the team who won the League of Friends Tennis Cup and the Student Nurses who hold the Sports Shield for the fifth year running. Nursing staff also took an active part in hockey and swimming events.

The preventative and social aspects of disease was an important part of the Student Nurses' training and we were most grateful to those who gave us the opportunity to visit Clinics, Special Schools, Hospitals and the Welfare Departments of our local factories.

A successful View Day was held for Head Teachers and 6th Form pupils from 40 Schools in the area served by this hospital, to show them, during an afternoon, as much as possible of the services undertaken here.

A case history written by Miss M. Scouse was commended by the Nursing Press and is to be published in their periodical.

Miss M. S. Hosie, Linen Supervisor, left after nineteen years' service and we wish her every happiness in her retirement.

It is with deep regret that we record the deaths of Miss D. M. Brown, Receptionist in the Nurses' Home, and Mrs. J. K. Hyder, Domestic Assistant.

	1955	1956
Total number of Nursing Staff at 31st Dec., 1956—Full-time	477	452
Part-time	31	27
Nurses admitted to sick bay	232	190
Nursing days lost of those admitted	1,194	1,210
Average number of days lost per sick nurse admitted	5.1	6.4
Average number of days lost per nurse on staff	2.3	2.5

ST. JOHN AND RED CROSS HOSPITAL LIBRARY SERVICE AT CENTRAL MIDDLESEX HOSPITAL

Chief Librarian: Mrs. NORAH FANN

In presenting our twelfth annual report I have pleasure in giving the following account of our activities in 1956.

The comparative figures are as follows:—

Books issued to Patients and Staff	1954	1955	1956
Fiction	22,774	22,407	20,371
Non-Fiction	3,183	3,613	4,222
	25,957	26,020	24,593
Patients served	16,505	14,973	14,657
Books missing	113	148	119
Books supplied from Headquarters on special request:			
For tuberculosis wards	236	237	319
For general wards	100	100	166
From the Bulk Loan Dept.	74	—	—

In addition to these the T.B. block has an exchange of 50 books every three months with our H.Q. at 1, Grosvenor Crescent.

The Library depot at 10, Collingham Road supplies us with a loan of 100 books every three months and we have also added about 350 new books to our basic library during 1956, either by purchase or gifts to the Library.

The library which is run in the Nurses' Home has issued 2,321 books to the nurses of this hospital.

During the year four Librarians have attended the Central Middlesex Hospital to receive their basic training and the Acton Inner Wheel continues to send two members each week to help us with the ward rounds.

MEDICAL STAFF PUBLICATIONS.

- RICHARD ASHER "Written Evidence Submitted to the Royal Commission on the Laws Relating to Mental Illness." Appendix to Minutes of Evidence. H.M. Stationery Office.
- "Respectable Hypnosis."
Brit. J. Med. (1956): i: 309.
- "The Use of Statistics in Medicine."
J. Stud. Amer. Med. Ass. April, 1956.
- "Important Points about Myxoedema."
Nursing Mirror. (8th June, 1956).
- "Medical Uses of Hypnosis."
West London Med. J. (July, 1956).
Nursing Mirror. (9th and 16th Nov., 1956).
- "Medical Education of the Public."
U.S.A. Today's Health. (1956): 34: 8.
- "Arrangements for the Mentally Ill."
Lancet. (1956): ii: 1265.
- RICHARD ASHER and
A. E. READ "Weight Loss and Pernicious Anaemia."
Lancet. (1956): i: 882.
- K. P. BALL with
J. F. GOODWIN and
C. V. HARRISON "Massive Thrombotic Occlusion of the Large Pulmonary Arteries."
Circulation. (1956): 14: 766.
- GEORGE DISCOMBE "Die Bluttransfusion in England im Jahre 1954."
Deutsche Medizinische Wochenschrift. (1956): 81: 1065.
- GEORGE DISCOMBE and
A. J. DUGGAN "An Alleged Test of Liver Function Using Lugol's Iodine."
South African Journal of Laboratory and Clinic Medicine.
(1956): 2: 179.
- GEORGE DISCOMBE with
W. MESTITZ "Favism in an English-born Child."
Brit. Med. Jour. (1956): i: 1023.
- R. DOLL "Environmental Factors in the Aetiology of Cancer of the Stomach."
Gastroenterologia. (1956): 86: 320.
- R. DOLL, P. FRIEDLANDER and
F. PYGOTT "Dietetic Treatment of Peptic Ulcer."
Lancet. (1956): i: 5.
- R. DOLL with
A. BRADFORD HILL "Lung Cancer and Other Causes of Death in Relation to Smoking. A Second Report on the Mortality of British Doctors."
Brit. Med. Jour. (1956): i: 1071.
- R. DOLL and F. PYGOTT
with others "Continuous Intra-gastric Milk Drip in Treatment of Uncomplicated Gastric Ulcer."
Lancet. (1956): i: 70.

MEDICAL STAFF PUBLICATIONS *(continued)*.

- P. MAXWELL ELLIS "Treatment of Meniere's Disease."
Jour. Laryngology. (1956): 70: 720.
- J. D. FERGUSSON "Tumours of the Testis."
Practitioner. (1956): 177: 277.
- "Massive Hydronephrosis—Treated by Interposition of an Ileal Graft
between Renal Pelvis and Bladder."
Brit. Jour. Urol. (1956): 28: 384.
- "Carcinoma of the Prostate."
Proc. 10th Congress International Soc. of Urology. Athens. (1956).
- J. D. FERGUSSON and
E. C. GIBSON "Prostatic Smear Diagnosis."
Brit. Med. Jour. (1956): i: 822.
- J. D. ALLAN GRAY "Outbreak of Streptococcal Infection in a Maternity Unit."
Lancet. (1956): ii: 132.
- "The Position of Bacteriology in Medicine."
Middlesex Hosp. Med. Jour. (1956): 56: 142.
- T. G. I. JAMES "Tumours of the Stomach other than Carcinoma."
Annals of the Roy. Col. of Surgeons of Eng. (1956): 18: 228.
- F. AVERY JONES "Section on Gastroenterology."
Medical Annual. (1956).
- "Section on Gastroenterology."
Progress in Clinical Medicine, 2nd Series. (1956).
- "Chapter on Sedation."
Pye's Surgical Handicraft. (1956).
- "The Problem of Peptic Ulcer."
Ann. Int. Med. (1956): 44: 63.
- "Les Aspects Sociaux de l'Ulcere Gastro-duodenal."
Medicine et Hygiene. (1956): 317: 27.
- "Haematemesis and Melaena."
Gastroenterology. (1956): 30: 166.
- "Carcinoma of the Stomach."
Medicine Illustrated. (1956): 10: 427.
- F. AVERY JONES and
F. PYGOTT "L'ulcera Peptica."
Il Pensiero Scientifico. Rome. (1956): 20: 251.

MEDICAL STAFF PUBLICATIONS (*continued*)

- HORACE JOULES "Health from the Health Service."
Lancet. (1956): ii: 1171.
"Tobacco and Smoking."
Postgrad. Med. Jour. (1956): 32: 226.
- T. D. KELLOCK "Fiatulence."
Medical World. Feb. (1956).
- W. PAGEL and
C. S. TREIP "The Influence of Cortisone on the Disposal of Heat-killed Tubercle
Bacilli by the Sensitised Guinea Pig."
Int. Archives of Allergy. (1956): 9: 1.
- DAVID PHEAR "Blood Groups in Pernicious Anaemia."
A Collective Series.
Brit. Med. Jour. (1956): ii: 723.
- R. J. PORTER "Treatment of Idiopathic Epilepsy."
The Medical Press, Modern Treatment Year Book 1956.
- F. PYGOTT "Mass Radiography Associated with a General Hospital."
Lancet. (1956): ii: 1348.
- P. TREVOR-ROPER "The Eye and the Developing Child."
Medicine Illustrated. (1956): 10: 309.
"Advances in Ophthalmology."
The Practitioner. (1956): 177: 421.
- M. SPIRO "Oesophageal Atresia."
Brit. Jour. Radiology. (1956): 29: 514.
- R. M. STIRLAND "A Rapid Method for the Estimation of Fibrinogen."
Lancet. (1956): i: 672.
- H. T. H. WILSON "Nickel Dermatitis."
The Practitioner. (1956): 177: 303.
- H. T. H. WILSON with
C. D. CALNAN "Nylon Stocking Dermatitis."
Brit. Med. Jour. (1956): i: 147.
- H. T. H. WILSON with
J. F. BECKER "Colloid Milium."
Brit. J. Derm. (1956): 11: 345.

HOSPITAL STAFF NEWS

Citation from the London Gazette, Friday, 28th December, 1956.

"The Queen has been graciously pleased to give orders for the following promotion in and appointments to the Most Excellent Order of the British Empire"—Ordinary Officer of the Civil Division.

William Richard Shaboe Doll, Esq., M.D., M.R.C.P.
Senior Member Statistical Research Unit
Medical Research Council.

Dr. F. Avery Jones delivered the Lumleian Lectures at the Royal College of Physicians on April 10th and 12th, on "Clinical and Social Problems of Peptic Ulcer." He has also continued to examine for the M.R.C.P., London, and was appointed Chairman of the Catering and Diet Committee of King Edward VII's Hospital Fund for London.

Dr. G. Discombe attended, by invitation, the Congress of the International Society of Haematology and the Vth Congress of the International Society of Blood Transfusion at Boston, Massachusetts, in August. He also visited Dr. A. S. Wiener's laboratories in Brooklyn.

Mr. P. Maxwell Ellis accepted an invitation to edit the volume on the Operative Surgery of Ear, Nose and Throat Diseases in the comprehensive work edited by Professor G. C. Rob and Mr. Rodney Smith, and published by Butterworths.

Mr. J. D. Fergusson attended several Urological Congresses including two in France where he showed films in Nantes and in Paris on:—

- (1) "Implantation of radioactive material into the pituitary for cancer of the prostate and breast."
- (2) "Cineradiography of the urinary tract."
- (3) "Treatment of cancer of the bladder by physical and chemical agents."

Dr. W. Fraser-Moodie was elected President of the Hospitals Group of the British Dental Association.

Dr. J. D. A. Gray was appointed Chairman of the Consulting Pathologists Group Committee of the British Medical Association and has delivered a further series of British Medical Association lectures. He also read a paper on "Puerperal Fever" at the 56th General Meeting of the Association of Clinical Pathologists held at Cheltenham in April.

The Editor of the *Journal of Pathology and Bacteriology*, the official journal of the Pathological Society of Great Britain and Ireland, invited Dr. Gray to contribute the official obituary notice of Professor J. M. Beattie, Emeritus Professor of Bacteriology in the University of Liverpool. The Notice appeared in the *Journal* for April, 1956, Volume LXXI, p. 544.

Mr. T. G. I. James visited, by invitation, the Academy of Surgery in Paris in July. He has continued to serve on the Court of Examiners of the Royal College of Surgeons of England.

Dr. H. Joules has continued to examine for the M.R.C.P. (London) and for the M.B. (Cambridge).

Dr. F. Pygott paid a visit to Scandinavian hospitals during the months of May and June in order to study radiological methods and techniques employed there. During the early part of the year he was also invited to take part in the course of lectures for the Conjoint Diploma in Radiology and to deal with the radiology of the upper part of the gastro-intestinal tract.

Dr. J. Sakula attended the International Congress of Paediatricians which, this year, was held in July in Copenhagen.

Dr. C. S. Treip visited the United States and Canada in October. He spent the greater part of his time in Dr. Klemperer's laboratory at Mount Sinai Hospital, New York.

Dr. H. T. H. Wilson attended Professor Meischer's clinic in Zurich as President of the George Travelling Club in May, 1956. In June he attended the Annual Meeting of the British Association of Allergists and read a paper on "Streptomycin Dermatitis in Nurses," and in August, 1956, he was appointed Consultant Dermatologist at Mount Vernon Hospital, Northwood.

Mr. H. Hashemian was appointed Associate Professor of Surgery at Teheran University.

Miss Betty Underhill (surgical registrar to Mr. Henley) was appointed a Consultant Surgeon at the Bahrein Government Hospital and took up her appointment on January 1st, 1957.

At the higher examinations during the year Dr. E. R. Monypenny obtained the F.R.C.S., and Dr. H. de V. Heese passed the examination for the Membership of the Royal College of Physicians of Edinburgh.

Miss M. Poulter, B.Pharm., was successful in passing the examination in Forensic Pharmacy.

TEN-YEAR

	1947	1948	1949
Beds (average daily No. occupied)	729	733	769
Total No. of admissions and live births	12,785	12,726	13,701
Average daily No. of admissions including births	35	35	37
Total No. Discharges and Deaths	12,802	12,678	13,684
Deaths	909	763	744
Confinements	1,840	1,731	1,805
Operations—major and minor (I.P. and O.P.)	11,654	11,515	11,195
Casualty and Out-patients—New patients (including Ante- and Post-natal)	40,057	41,872	51,109
Casualty and Out-patients—Total attendances (including ante- and post-natal)	158,713	160,545	190,652
Radiological investigations	19,638	21,640	22,621
Pathological investigations	69,579	93,517	106,718
Post-mortem examinations	440	438	440

The Editor of the *Journal of Pathology and Bacteriology*, the official journal of the Pathological Society of Great Britain and Ireland, invited Dr. Gray to undertake the official obituary notice of Professor J. M. Bennett, F.R.S., Professor of Bacteriology at the University of Liverpool. The Notice appeared in the journal for April 1955, Volume LXXI, p. 596.

Mr. F. G. A. Jones visited, by invitation, the Academy of Surgery in Paris in July. He has continued to serve on the Council of Examiners of the Royal College of Surgeons of England.

COMPARATIVE TABLE

1950	1951	1952	1953	1954	1955	1956
806	807	742*	653†	671	653.31‡	665
14,302	15,684	15,864	16,327	17,084	16,963	17,729
39	43	43	45	47	46.5	48.5
14,431	15,639	15,946	16,375	16,987	16,999	17,729
869	994	814	889	941	994	984
1,983	1,937	2,167	2,009	2,015	1,741	2,032
11,936	11,662	11,882	13,751	12,865	12,480	12,157
59,812	67,266	68,366	68,686	67,643	72,330	73,572
220,216	230,701	260,268	274,734	266,226	276,783	284,943
25,100	26,891	26,890	27,972	28,639	28,857	30,696
105,188	109,537	125,273	Units 206,941	Units 226,608	Units 248,663	Units 260,961
433	506	484	568	484	649	584

1952—*N.B.—68 beds in the hospital were out of commission for twelve months due to structural alterations which were taking place.

1953—†N.B.—The 1953 bed occupancy is very much reduced as 30 beds were lost through the reconstruction of F. Block and the 86 beds in Leamington Park Hospital and 20 at Twyford Abbey are no longer included.

1955—‡N.B.—The 1955 bed occupancy is reduced due to the closing of the Maternity Block for a period for cleaning and fumigation.



