

## **The Middlesex Hospital, facts & figures : 1949.**

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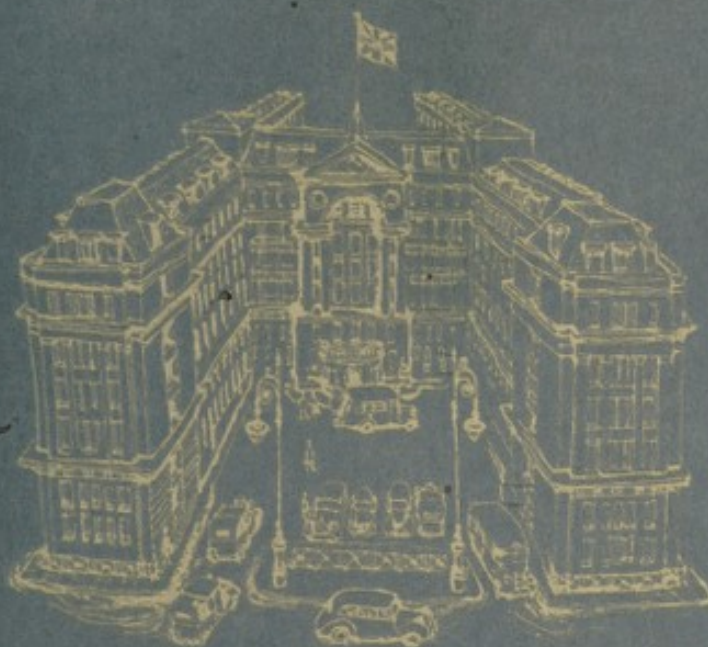


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# THE MIDDLESEX HOSPITAL

## FACTS AND FIGURES

1949



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# THE MIDDLESEX HOSPITAL

AND ITS CONSTITUENT HOSPITALS

ST. LUKE'S, WOODSIDE

THE HOSPITAL FOR WOMEN, SOHO

THE ARTHUR STANLEY INSTITUTE FOR  
RHEUMATIC DISEASES

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This Hospital was founded in 1842 as the first special Hospital in the world for the treatment of diseases peculiar to women. It was started in a house in Red Lion Square and moved to Soho Square in 1851, being granted a Royal Charter in 1887. The Hospital was rebuilt in 1910, and a Private Patients' ward was added in 1924.

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St. Luke's Hospital was founded in 1751 at the Old Foundry, Moorgate. It was transferred to new buildings in Old Street, in 1787, and again, in 1930, to its present site in Muswell Hill. In July, 1948, the hospital was affiliated to The Middlesex Hospital, and became its In-patient Department of Psychological Medicine. It is now known as St. Luke's—Woodside Hospital.

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In 1930, The British Red Cross Society decided that a pioneer Out-patient centre for the research, diagnosis and treatment of chronic rheumatism in adults should be opened.

Nash's Baptist Chapel was leased from the Commissioners of Crown Lands and converted into such a centre where Hydrotherapy as well as Physiotherapy should be available, particularly to those wishing to attend after their day's work.

Except for the first four months of the 1939—1945 war when the building was closed, work has been carried on without interruption and an affiliation was arranged with a teaching hospital in April 1948.

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### CONVALESCENT HOME.

Clacton.

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As early as 1877, the Board began to raise funds for the erection of a Convalescent Home for patients of the Middlesex Hospital, but it was not until 1893 that the site at Clacton was purchased. As a result of a legacy from the estate of the late Henry Spicer, building began in 1895 and the Home was opened in August, 1896.

It has been in continuous use since that date, with the exception of the periods of the two world wars, during the first of which it was lent to the War Office as a Military Hospital and during the second when it was closed after damage by enemy action at the end of 1939. The Home was re-opened in 1947, after various improvements to the building had been carried out.



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F. C. GOLDING, Esq., M.B., Ch.M.(Syd.), F.R.C.P.,  
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12 Upper Wimpole Street, W.I.

### DISEASES OF THE SKIN

F. RAY BETTLEY, Esq., M.D., F.R.C.P.  
21 Harley Street, W.I.



## THE CHAIRMAN'S REPORT

This is the first report to be published by the Board of Governors, since they assumed control of The Middlesex and its Constituent Hospitals in July, 1948.

The facts and figures set out in these pages show that, in spite of the changes wrought by the National Health Service, the work of the Hospital has suffered no interruption, and, indeed, has gone forward with increasing intensity. Various measures which had been planned by the previous Board of Management have been carried out and completed during the past 18 months. Of these the most important is the new building for the Department of Physical Medicine and the School of Physiotherapy, which has now been taken into use. With the Medical School, although it has now become an independent body, the Hospital has continued to work as closely and happily as before.

In all things we have tried to preserve continuity. It is due to the loyal and united efforts of my colleagues on the Board, and to the close and friendly co-operation of the Consultant Staff, that this period of transition has been smooth and fruitful. The men and women in charge of the administrative departments of the Hospital have been faced with many new problems and difficulties; it is to their credit that they have shouldered these burdens with good judgement and efficiency. In the wards and in all departments where treatment is given, we have not relaxed our endeavours to improve equipment and add to the comfort of the patients. I believe that the standard of nursing has never been higher; and it is a pleasure to place on record the Board's appreciation of the unremitting efforts of the Matron and Sisters and of all the nursing staff. We have been greatly helped, as in previous years, by voluntary workers of the Ladies Association.

Our constituent Institutions, St. Luke's Woodside, The Hospital for Women, Soho, and the Arthur Stanley Institute, were deprived by the Health Service Act of much of their independence, but it has been the Board's aim that they should retain their identity, and, as far as possible, their freedom of action. It has been a source of pride and satisfaction to The Middlesex to be allied with them.

During the past year we have sought to use the Endowment and Amenities Funds for the greater good of our hospitals and our patients. The income from the Endowments has been used to an increasing extent to further clinical research. The purchase of Marlborough Court at Lancaster Gate has enabled a number of the staff and students to live at reasonable cost, within easy reach of their work. Many extra comforts which could not properly be charged to Exchequer Funds have been provided for the patients, including the installation of wireless rediffusion which allows every patient in the general wards a choice of broadcast programmes.

When I gave my last report at the beginning of 1948 I did not know that I was to have the honour of remaining as Chairman of the Hospital. At that time I said that I conceived it to be the duty of the Middlesex to strive for the success of the new Service. The fine spirit of co-operation with which the entire staff is imbued enables me to claim that we have discharged that duty.

J. J. ASTOR, *Chairman.*

The Board Room.  
January, 1950.



# OUT-PATIENT DEPARTMENTS

Cleveland St. Annexe

Attendances are by appointment in accordance with the following Time-table.

Appointment Office Telephone No. MUSEum 6308.

		Mon.	Tues.	Wed.	Thur.	Fri.	Sat.
GENERAL MEDICINE	Dr. G. E. S. Ward ... .. Dr. H. L. Marriott ... .. Prof. A. Kekwick ... .. Dr. A. Willcox ... .. Dr. G. Hadley ... .. Dr. D. Evan Bedford ... ..	1.00 p.m. 9.00 a.m.	1.00 p.m.	9.00 a.m. 1.00 p.m.	1.00 p.m.	1.00 p.m.	
GENERAL SURGERY	Prof. P. B. Ascroft (New Patients) ... .. (Old Patients) ... .. Mr. D. H. Patey ... .. Mr. R. Vaughan Hudson (New Patients) ... .. (Old Patients) ... .. Mr. R. S. Handley ... .. Mr. O. V. Lloyd-Davies ... .. Mr. C. J. B. Murray ... ..	1.00 p.m. 1.00 p.m.	1.00 p.m.	9.00 a.m. 9.00 a.m.	9.00 a.m.	9.00 a.m.	9.00 a.m.
GYNAECOLOGY	Mr. W. R. Winterton ... .. Mr. F. W. Roques ... .. Mr. I. Jackson ... ..	9.00 a.m.		9.00 a.m.		1.00 p.m.	
ANTE-NATAL	First Examination* ... .. Mr. I. Jackson ... .. Mr. W. R. Winterton ... ..		9.00 a.m.		9.00 a.m.	9.00 a.m.	
DERMATOLOGY	Dr. F. Ray Bettley ... ..	9.00 a.m.			9.00 a.m.		
EAR, NOSE & THROAT	Mr. C. P. Wilson ... .. Mr. J. P. Monkhouse ... ..		9.00 a.m.			9.00 a.m.	
CHILDREN (Up to 12yrs)	Dr. E. W. Hart ... ..	9.00 a.m.					
INFANT WELFARE	Dr. E. W. Hart (Under 2yrs) ... .. (2 to 5yrs) ... ..	1.00 p.m.	1.00 p.m.		1.00 p.m.	1.00 p.m.	
ORTHOPAEDIC	Mr. P. Wiles ... .. Mr. P. H. Newman ... ..		9.00 p.m.			9.00 a.m.	
OPHTHALMOLOGY	Mr. M. H. Whiting ... .. Mr. A. J. B. Goldsmith ... ..		9.00 a.m. 9.00 a.m.			9.00 a.m. 9.00 a.m.	
THORACIC SURGERY	Mr. T. Holmes Sellors ... ..		1.00 p.m.				
NEURO-SURGERY	Miss D. J. K. Beck ... ..					1.00 p.m.	
RECTAL SURGERY	Mr. O. V. Lloyd-Davies ... ..	4.00 p.m.					
PLASTIC SURGERY	Mr. Rainsford Mowlem ... ..		9.00 a.m.				
RADIOTHERAPY	Prof. B. W. Windeyer ... .. Miss M. D. Snelling ... ..			1.00 p.m. 9.00 a.m.	1.00 p.m.		
NEUROLOGY	Dr. D. McAlpine ... .. Dr. M. Kremer ... ..		1.00 p.m.			1.00 p.m.	
UROLOGY	Mr. E. W. Riches ... ..				1.00 p.m.		
PHYSICAL MEDICINE	Dr. F. D. Howitt ... .. Dr. A. C. Boyle ... ..				1.00 p.m.		9.00 a.m.
GASTRO-ENTEROLOGY	Dr. G. D. Hadley ... ..				9.00 p.m.		
DENTAL	Mr. J. W. Schofield ... .. Mr. A. L. Packham ... .. Mr. H. Breese ... .. Mr. D. Greer Walker ... ..	9.00 a.m.		9.00 a.m. 9.00 a.m.		9.00 a.m.	
VARICOSE VEINS	Mr. R. S. Handley ... ..	1.00 p.m.					
POST-NATAL				2.00 p.m.			
FERTILITY	Mr. E. W. Riches (Male Patients) ... .. Mr. I. Jackson (Female Patients) ... ..				4.30 p.m. 4.30 p.m.		
SPEECH THERAPY	Miss A. Swallow ... ..		9.00 a.m. 6.00 p.m.				
VENEREAL DISEASES	(Men & Women—No appointments)			5.00 p.m.			
PSYCHOLOGICAL MEDICINE & CHILD GUIDANCE	Dr. N. G. Harris ... ..	By Appointment only	Telephone MUSEum 6373				

\* New Ante-Natal Patients to see the Lady Almoner on Mondays between 9.0 a.m. and 3.0 p.m. in the Maternity Ward to arrange booking

# OUT-PATIENTS STATISTICS

(including the Arthur Stanley Institute, Hospital for Women, Soho and St. Luke's-Woodside.)

Total No. of New Patients 79044

Total No. of Attendances 431908

## ANALYSIS OF OUT-PATIENT ATTENDANCES—1949

CLINIC	New Patients	Total Attendances
General Medicine ... ..	4808	24050
General Surgery ... ..	3100	9925
Gynaecology ... ..	4294	10451
Obstetrics ... ..	1803	12294
Paediatrics ... ..	330	1128
Psychiatry (incl. Mental Deficiency) ... ..	1136	7217
Cardiology ... ..	—	2548
Dentistry ... ..	2404	5579
Dermatology ... ..	1441	5143
Ear, Nose & Throat ... ..	2562	8800
Neurology ... ..	715	2405
Neuro-Surgery ... ..	123	1398
Ophthalmology ... ..	1634	6613
Plastic Surgery ... ..	374	991
Radiotherapy ... ..	2231	34931
Thoracic Surgery ... ..	105	302
Traumatic & Orthopaedic Surgery ... ..	2373	10530
Rheumatism ... ..	3182	104050
Artificial Pneumothorax ... ..	—	744
Infant Welfare ... ..	182	5531
Urology ... ..	623	3222
Rectal Surgery ... ..	627	1956
Varicose Veins ... ..	693	3925
Physical Medicine ... ..	873	1099
Speech Therapy ... ..	97	1362
Fertility ... ..	225	895
Diabetes ... ..	26	227
Diagnostic X-Ray ... ..	17459	27903
Physiotherapy ... ..	4057	68172
Casualty ... ..	21567	68517



# IN-PATIENT STATISTICS

1949

Hospital	Bed Complement	Number of Patients	Average days Stay
THE MIDDLESEX HOSPITAL			
General Medical ... ..	152	1694	31.3
General Surgical ... ..	160	2359	21.2
Gynaecological ... ..	27	671	13.5
Obstetrical ... ..	30	966	10.8
Dermatological ... ..	20	217	35.1
E.N.T. ... ..	40	887	12.7
Neurological ... ..	28	342	26.3
Neuro-surgical (Beds with Neurological) ...	—	—	23.5
Ophthalmology ... ..	18	421	14.4
Orthopaedic Surgery ... ..	28	349	25.5
Paediatric ... ..	25	358	24.5
Plastic Surgery ... ..	14	247	15.7
Radiotherapy ... ..	62	604	40.1
Thoracic Surgery ... ..	14	169	33.6
Unclassified ... ..	24	684	7.0
Totals ... ..	642	9968	21.9
THE HOSPITAL FOR WOMEN SOHO			
Gynaecological ... ..	59	1282	14.4
ST. LUKE'S-WOODSIDE			
Psychological Medicine ... ..	63	242	72.4
Totals ... ..	764	11492	—
THE MIDDLESEX HOSPITAL CONVALESCENT HOME			
Totals ... ..	62	1026	—
PRIVATE PAY BEDS			
The Middlesex Hospital ... ..	70	1113	—
Hospital for Women, Soho ... ..	12	192	—
St. Luke's-Woodside ... ..	7	—	—
Grand Totals ... ..	915	13823	—



COMPARATIVE STATISTICAL TABLES  
for 1948 and 1949

based on King Edward's Hospital Fund for London Uniform System of Accounting.  
(The Middlesex Hospital only)

TABLE I

1948	IN-PATIENTS								1949
NUMBER OF BEDS AND IN-PATIENTS									
712	1.—Beds :	(a)	Complement at 31st December	...	...	...	...	...	712
712		(b)	Average daily complement during the year	...	...	...	...	...	712
		(c)	Average daily number closed during the year owing to :—						
—		1.	Rebuilding or extension	...	...	...	...	...	—
7.29		2.	Repairs, redecoration, cleaning or infection	...	...	...	...	...	9.7
—		3.	Other causes	...	...	...	...	...	—
704.71		(d)	Average daily number open during the year	...	...	...	...	...	702.3
623.53		(e)	Average daily number occupied during the year	...	...	...	...	...	590.32
601	2.—In-Patients in the Hospital at the beginning of the year			...	...	...	...	...	606
10515	3.—Number of Patients admitted during the year			...	...	...	...	...	11081
606	4.—Number of In-Patients in the Hospital at the end of the year			...	...	...	...	...	641
21.71	5.—Average number of days each patient was resident			...	...	...	...	...	21.9

TABLE II

1948	OUT-PATIENTS								1949
77480	1.—Total Number of New Out-Patients	...	...	...	...	...	...	...	78920
304594	2.—Total Number of Out-Patient Attendances	...	...	...	...	...	...	...	374499
25821	3.—Number of Casualty Patients included in No. 1 above	...	...	...	...	...	...	...	21567
<hr/>									
168680	Attendances of Out-Patient	...	...	...	...	...	...	...	229978
39429	Attendances in Radiotherapy Dept.	...	...	...	...	...	...	...	34931
96485	*Attendances in Electrotherapy, Massage, X-Ray and E.C.G. Departments	...	...	...	...	...	...	...	109580
304594	Total attendances								374489
<hr/>									
60949	*Attendances in Electrotherapy and Massage Department	...	...	...	...	...	...	...	68172
33158	Attendances in X-Ray Department	...	...	...	...	...	...	...	38860
2378	Attendances in E.C.G. Department	...	...	...	...	...	...	...	2548
96485	Total								109580

## COMPARATIVE STATISTICAL TABLES—continued

TABLE III

## ANALYSIS OF NUMBERS OF IN-PATIENTS AND OUT-PATIENTS TREATED DURING THE YEAR

1948	IN-PATIENTS												1949
2610	Medical	...	...	...	...	...	...	...	...	...	...	...	3295
4615	Surgical	...	...	...	...	...	...	...	...	...	...	...	4432
497	Gynaecological	...	...	...	...	...	...	...	...	...	...	...	671
824	Maternity	...	...	...	...	...	...	...	...	...	...	...	966
1210	Paying Patients	...	...	...	...	...	...	...	...	...	...	...	1113
759	Cancer	...	...	...	...	...	...	...	...	...	...	...	604
10515	Total												11081
623.53	Average Number of Beds occupied												590.32
OUT-PATIENTS													
4391	Medical	...	...	...	...	...	...	...	...	...	...	...	4834
7083	Medical Casualties	...	...	...	...	...	...	...	...	...	...	...	5659
11474													10493
2758	Surgical	...	...	...	...	...	...	...	...	...	...	...	3100
18738	Surgical Casualties	...	...	...	...	...	...	...	...	...	...	...	15908
21496	Total												19008
1596	Diseases of Women	...	...	...	...	...	...	...	...	...	...	...	1726
237	Infant Welfare	...	...	...	...	...	...	...	...	...	...	...	182
349	Diseases of Children	...	...	...	...	...	...	...	...	...	...	...	330
973	Lying-in Case	...	...	...	...	...	...	...	...	...	...	...	1025
603	Post-Natal Cases	...	...	...	...	...	...	...	...	...	...	...	778
2311	Dental	...	...	...	...	...	...	...	...	...	...	...	2404
1611	Skin	...	...	...	...	...	...	...	...	...	...	...	1441
1706	Ophthalmic	...	...	...	...	...	...	...	...	...	...	...	1634
2831	Ear, Nose & Throat	...	...	...	...	...	...	...	...	...	...	...	2562
1362	Nervous Diseases	...	...	...	...	...	...	...	...	...	...	...	1593
643	Genito-Urinary Diseases	...	...	...	...	...	...	...	...	...	...	...	623
544	Diseases of the Rectum	...	...	...	...	...	...	...	...	...	...	...	627
1187	Orthopaedic	...	...	...	...	...	...	...	...	...	...	...	1818
323	Venereal Diseases	...	...	...	...	...	...	...	...	...	...	...	645
25	Diseases of the Chest	...	...	...	...	...	...	...	...	...	...	...	—
726	Varicose Veins	...	...	...	...	...	...	...	...	...	...	...	693
797	Fractures	...	...	...	...	...	...	...	...	...	...	...	304
325	Plastic Surgery	...	...	...	...	...	...	...	...	...	...	...	374
63	Speech Therapy	...	...	...	...	...	...	...	...	...	...	...	97
488	Physiotherapy	...	...	...	...	...	...	...	...	...	...	...	873
117	Neuro-Surgery	...	...	...	...	...	...	...	...	...	...	...	123
60	Thoracic Surgery	...	...	...	...	...	...	...	...	...	...	...	105
—	Fertility	...	...	...	...	...	...	...	...	...	...	...	225
2687	Radiotherapy	...	...	...	...	...	...	...	...	...	...	...	2231
22946	Electrotherapy, Massage, X-Ray and E.C.G.	...	...	...	...	...	...	...	...	...	...	...	27006
77480	Total Patients												78920
2725	Electrotherapy and Massage Department												4057
17843	X-Ray Department	...	...	...	...	...	...	...	...	...	...	...	20401
2378	E.C.G. Department	...	...	...	...	...	...	...	...	...	...	...	2548
22946													27006



## SPECIAL DIAGNOSTIC AND TREATMENT DEPARTMENTS

### DEPARTMENT OF X-RAY DIAGNOSIS

#### DIRECTOR

Sir Harold Graham-Hodgson, K.C.V.O., M.B., B.S., F.R.C.P., F.F.R., D.M.R.E.

#### CONSULTANT RADIOLOGIST

F. C. Golding, Esq., M.B., Ch.M.(Syd.), F.R.C.P., F.F.R., D.M.R.E.

Total number of Diagnostic Examinations :—

In-patients	...	...	...	...	...	...	10957
Out-patients	...	...	...	...	...	...	27903
						Total	<u>38860</u>

#### COMPARISON OF X-RAY EXAMINATIONS 1948-1949

	1948	1949	Percent increase
In-Patients examined ... ..	9736	10957	12.5
Out-Patients examined ... ..	23422	27903	19.1
Total examinations ... ..	33158	38860	17.2
Total number of Films used ... ..	113337	119192	5.0

#### ANALYSIS OF DIAGNOSTIC EXAMINATIONS 1949

Barium swallow ... ..	612	Tomogram ... ..	270
Barium meal ... ..	2906	Arteriograms (incl. Angiocardiograms, encephalograms, ventriculograms) ... ..	118
Barium enema ... ..	905	Lipiodol Chests ... ..	121
Cholecystogram ... ..	722	Dentals ... ..	997
Ascending and Descending intravenous pyelogram ... ..	1529	Others ... ..	16464
Chest ... ..	14216		

The work of the X-Ray Department again shows a considerable increase for 1949 as compared with 1948. The number of patients seen in 1949 was 38,860 as compared with 33,158, an increase of 5,702. Apart from the increase in actual numbers of patients, there has also been an increase in the number of long, time-consuming examinations and this increase, both in numbers of patients and in time, appears likely to continue.

The opening of an additional room, mainly for neuro-radiological work will be a great help as these examinations take a long time.

It has become evident that the Department may soon have to provide for :—

- (a) Ascending pyelographies of the urinary tract.
- (b) More immediate X-Ray examinations of cases from the Fracture Clinic.
- (c) Mass miniature radiography of the chests of all Hospital Staff and all patients.

All these projects are going to require extra radiographic rooms, dark rooms, reporting room and dressing rooms, and plans for this extra accommodation are under discussion at present.

#### *Radiological Staff*

Dr. Sutton has been appointed as Senior Registrar for six sessions a week. He was formerly at the Hospital for Nervous Diseases, Queens Square, and his principal duties will, therefore, be in connection with the neuro-radiological unit.

#### *Radiographic Staff*

Sister Woodyatt retired in March 1949, and her place has been filled by Miss Frank.

#### *Radiological School*

Six post-graduate students of Radiology entered for the Diploma of Medical Radiology examination in October. Taking Parts I and II of the examination at the same time, all six passed.

#### *Radiography Students*

Eighteen entered for the examinations for the membership of the Society of Radiographers during the year. Of these, seventeen passed the examination in both parts.



# MEYERSTEIN INSTITUTE OF RADIOTHERAPY

## DIRECTOR

Professor B. W. Windeyer, M.B., B.S., F.R.C.S., F.F.R., D.M.R.E.

## CONSULTANT RADIOTHERAPIST

Miss M. D. Snelling, M.B., B.S., M.R.C.P., F.R.C.S., D.M.R.

Patients treated ... 2499

Total Attendances ... 34931

## ANALYSIS OF PRINCIPAL TREATMENTS

	MALIGNANT		BENIGN	
	Old	New	Old	New
Deep X-Ray ... ..	413	615	127	234
Superficial X-Ray ... ..	97	228	186	201
Surface Radium ... ..	—	—	51	162
Insertion of Radium and Radon	28	111	—	1
Teleradium ... ..	—	45	—	—
Totals ... ..	538	999	364	598
Total Patients treated ... ..	1537		962	

New Private Patients ... 108

Total Private Patients ... 184

The Meyerstein Institute of Radiotherapy, which was opened in 1937, was constructed and equipped by the generosity of the late Sir Edward Meyerstein. It consists of the north end of the building which was formerly known as the Cancer Wing. In its four floors are housed eight machines for deep X-Ray therapy, two machines for superficial X-Ray therapy and a ten gram teleradium unit. There are also laboratories equipped for the clinical application of radium, consultation rooms and administrative offices.

In close proximity to the treatment rooms there are wards containing 32 beds for male patients and 32 beds for female patients undergoing radiotherapy. There are in addition four single rooms for the treatment of patients by means of radioactive isotopes.

The Institute has direct access to the Barnato Joel laboratories and the Physics Department of the Medical School, thus enabling close and continuous collaboration to be maintained with these departments.

Approximately one thousand new cases of malignant disease and five hundred new cases of non-malignant conditions are treated annually in the Institute, the daily attendances for treatment being between 150 and 200 patients.

The Institute acts as a training school for post-graduate students studying for the Diploma in Medical Radiotherapy of the University of London and of the Examining Board of the Royal Colleges. In addition a number of post-graduate students from abroad are accepted for varying periods.

There is also a school for therapeutic radiographers. Twelve candidates can be accepted annually for a two year course of training and for preparation for the examination for Membership of the Society of Radiographers.

## DEPARTMENT OF PHYSICAL MEDICINE

### PHYSICIAN IN CHARGE

Dr. F. D. Howitt, Esq., C.V.O., M.A., M.D., B.Chir., F.R.C.P.

### ASSISTANT PHYSICIAN

A. C. Boyle, Esq., M.D., B.S., M.R.C.P., O.D.Phys.Med.

Number of Patients ... 4057

Number of Treatments ... 172867

### TABULAR STATEMENT OF TREATMENTS

	Out Patients	In Patients	Private Patients	Total
Number of Treatment by :—				
Radiation ... ..	31141	3637	434	35212
Massage ... ..	13744	3553	1098	18395
Exercises ... ..	33583	56660	3467	93710
Electrical ... ..	23347	1789	414	25550
Totals ... ..	101815	65639	5413	172867

The year under review has been a most important one in the history of the Department of Physical Medicine, and of the Schools of Physiotherapy and Occupational Therapy.

Four beds have been allotted to the Physician-in-Charge for the use of urgent cases, and for more detailed investigation of cases undergoing treatment. An Assistant Physician—Dr. A. C. Boyle—has been appointed to the Staff. A second out-patient session has been found necessary in order to cope with the increased demand from outside doctors.

An entirely new Physiotherapy Department has been built, and constructed on modern lines. All forms of Physical treatments are now carried out under the same roof. This greatly facilitates the work of the Department which had hitherto been done under conditions of great difficulty. The old electrical department in the basement is now reserved for the physical treatment of in-patients.

The new physiotherapy school now compares very favourably with any School in the country. It has a splendid gymnasium, adequate class-rooms and general amenities for the students, whose numbers have increased to 120.

The new occupational therapy department which is adjacent, is in process of erection. It will contain adequate workshop accommodation in addition to the provision of diversional therapy.

The new unit will greatly facilitate not only the treatment of patients, but will also widen the sphere of training for these auxilliary medical services.



## DEPARTMENT OF ELECTROCARDIOGRAPHY

G. E. S. Ward, Esq., M.D., B.S., F.R.C.P.     D. Evan Bedford, Esq., M.D., B.S., F.R.C.P.

The work of the Cardiographic Department continues to increase annually. During the last 12 months, Cardiographic records have been taken from 2,520 patients, and almost 600 of these patients have also been screened by X-Rays in the Department.

Not only do the numbers increase annually, but the more recent calls for multiple records creates a still greater demand on the capacities of the Department. New methods of investigation are becoming increasingly necessary, so that the present site proves no longer adequate. In consequence, a new Department, occupying the whole of one floor in the Annexe is being planned, and it is hoped that the new Department will be in operation by the end of 1950.

## DEPARTMENT OF ELECTROPHYSIOLOGY

Professor Samson Wright, M.D., B.S., F.R.C.P.

Total number of examinations :—

Electroencephalography	...	...	...	...	...	291
Electromyography	...	...	...	...	...	18

A Clinical Electrophysiology Department was established in the Department of Physiology at the beginning of 1949. It is equipped with a six-channel Ediswan electroencephalograph and several electromyographs. It carries out routine investigations on patients referred from this Hospital and from others in the region as well as prosecuting research on problems in this field. The Department is under the general direction of the Professor of Physiology assisted by an electrophysiologist and a clinician with special electroencephalographic and neurological experience. There is a whole time electroencephalographer and a whole time electronics technician to maintain the equipment.

## PROFESSORIAL MEDICAL UNIT

Professor A. Kekwick, M.A., M.B., B.Chir., F.R.C.P.

The Professorial Medical Unit was instituted in 1947 to provide extended undergraduate teaching and greater research facilities under the direction of a Professor whose whole time could be devoted to these tasks. Out-Patients are seen on two mornings each week and one Male and one Female ward, each of 20 beds, are allocated to the exclusive use of the Unit. The Medical Unit shares with the Professorial Surgical Unit laboratory facilities situated on the same floor as the wards. A feature of the clinical procedure is maintenance of a full type-written copy of the medical records in respect of each patient treated by the Unit. These records, which are fully integrated with the records system of the rest of the Hospital, will be of great value in teaching and research in the future.

During 1949, the following special research projects have been initiated :—

Peripheral Vascular Disease.

Gastric and Duodenal Ulcers.

Glucose Tolerance Test in Diabetics.

The effect of the Pituitary Gland on Renal function.

Types of Renal failure.

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## PROFESSORIAL SURGICAL UNIT

Professor P. B. Ascroft, M.B.E., M.B., M.S., F.R.C.S.

### SUMMARY OF ADMISSIONS, OPERATIONS AND DEATHS

(1st October, 1947 to 31st December, 1949)

Year	Admitted	Operations	Deaths
1947 (from 16th Oct.)	123	77	4
1948	601	493	16
1949	633	492	19
27 months	1357	1062	39
Average per month 1948—9	51.5	41	1.5



# COURTAULD INSTITUTE OF BIO-CHEMISTRY

## DIRECTOR

Professor E. C. Dodds, M.V.O., D.Sc., Ph.D., M.D., B.S., F.R.C.P., F.R.I.C., F.R.S.(Ed.), F.R.S.

## DEPUTY DIRECTOR

Professor F. Dickens, M.A., D.Sc., Ph.D., D.I.C., F.R.I.C., F.R.S.

## READER IN BIO-CHEMISTRY

W. Lawson, Esq., M.Sc., F.R.I.C.

## TABULATION OF EXAMINATIONS

### INVESTIGATIONS PERFORMED IN THE ROUTINE LABORATORY OF THE COURTAULD INSTITUTE DURING 1949

Month	Blood	Urine	Faeces	C.S.F.	G.T.T.	F.T.M.	Kidney Function	Balances	Other Analyses	Total
January ... ..	756	201	95	163	35	58	15		13	1,336
February ... ..	689	195	84	161	42	59	7	1	10	1,248
March ... ..	863	239	97	101	40	55	12	2	17	1,426
April ... ..	754	173	77	106	34	39	21	1	13	1,218
May ... ..	811	132	117	98	37	43	22		9	1,269
June ... ..	701	166	78	79	29	46	20		11	1,130
July ... ..	672	175	105	101	23	43	21	3	6	1,149
August ... ..	699	184	100	149	24	53	13		1	1,223
September ... ..	655	126	95	93	15	53	10	2	7	1,056
October ... ..	759	230	82	99	36	42	22		9	1,279
November ... ..	880	161	83	95	54	43	15	1	11	1,343
December ... ..	931	209	59	77	64	42	20		8	1,410
Totals ... ..	9,170	2,191	1,072	1,322	433	576	198	10	115	15,087

N.B.—C.S.F.—Cerebro-Spinal Fluid

G.T.T.—Glucose Tolerance Test.

F.T.M.—Fractional Test Meal.

### OTHER TESTS PERFORMED AT THE COURTAULD INSTITUTE DURING 1949

Pregnancy diagnosis tests 451  
Basal metabolic rate estimations 2189

The resources of the Routine Laboratory of the Courtauld Institute continue to be fully employed, and the quantity of the work carried out in the Department continues on the upward trend which began in 1946 and shows little sign of reaching a level. As well as the investigations carried out for the wards and out-patient departments of the Middlesex Hospital, we perform biochemical analyses for the associated Hospitals and Institutions of the Middlesex; and we have been pleased to help many outside Hospitals and Organisations, especially in the field of steroid hormone analysis. The estimations of blood urea and sugar, and similar routine analysis of blood and urine for the more common constituents, still form the major part of the work of the laboratory; advances in clinical biochemistry, with elaboration of tests of metabolic function and increasing reliance on laboratory control of vitamin and hormone therapy, have led to an interesting and not unwelcome increase in the range and complexity of our work. A great strain has been put on laboratory resources by the increasing demand from clinicians for the elaborate analytical procedures required in many of these modern tests—it is most essential that if the best use of the laboratory facilities available is to be made that the closest co-operation should take place between clinicians and those performing the tests.

In the future this laboratory hopes to continue to play its part in maintaining the high reputation of the Hospital in the services that it renders to its patients.



## BARNATO JOEL LABORATORIES

DIRECTOR :

Professor J. E. Roberts, D.Sc., F.Inst.P.

The services provided for the Hospital by the Laboratory staff have shown appreciable increases both in numbers and extent during the year. Routine and research work for the department of Radiotherapy has been maintained, and collaboration established in clinical and experimental problems with other departments, such as Medicine, Surgery, Otology, Orthopaedics, as well as departments of the Medical School.

Perhaps the most striking advance has been in the work involving radioactive isotopes, which are now widely used in the Hospital and School. The Laboratory staff have collaborated with the clinical departments in a number of projects, including :—

- (1) Diagnostic investigations of a variety of thyroid conditions with radioactive iodine.
- (2) Treatment of suitable cases with radioactive iodine and phosphorus.
- (3) Investigation of peripheral circulation in normal and claudicant patients using radioactive sodium.
- (4) Investigations of bone growth and repair, using radioactive calcium.

A supply of radioactive cobalt has been received and it is hoped to put this into clinical use during 1950, with a view to finding out whether this material is a suitable alternative to Radium.

In conjunction with the Courtauld Institute an extensive investigation is being carried out into the possibilities of bio-assay of desoxycorticosterone, cortisone and other adrenal cortical hormones, using radioactive sodium and potassium. There is reasonable hope that this work will have clinical applications in the near future.

Instrumentation for isotope work has been considerably improved during the year and the erection of a Mass Spectrometer, the gift of the British Empire Cancer Campaign, was commenced.

Considerable progress has been made in the examination of the properties of centimetre wavelength radiations. The heating effects of these radiations on tissues have been examined and a new continuous wave unit for clinical use constructed. Fundamental work on the absorption of the radiations in materials of biological interest has continued.

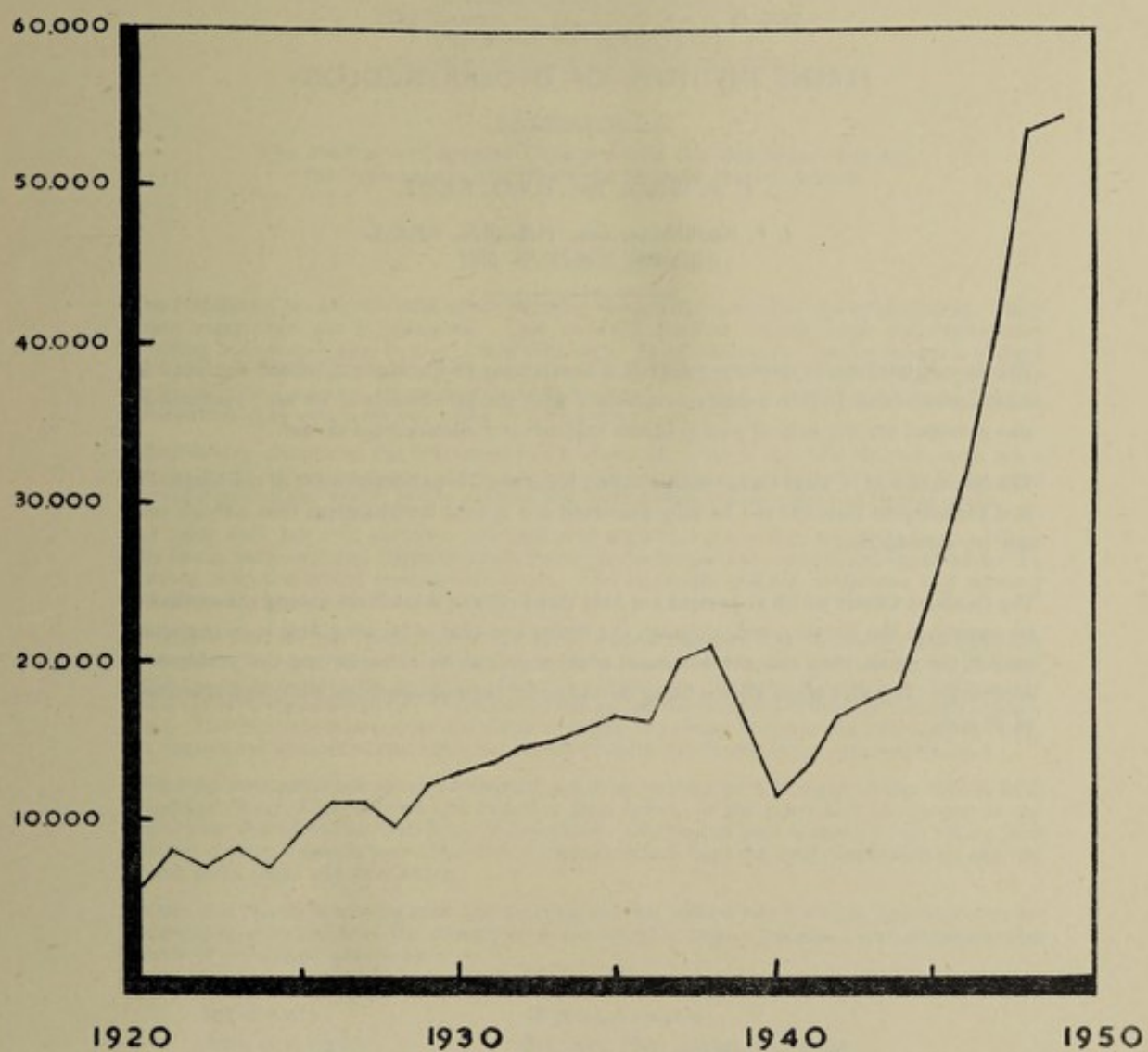
A small unit has been set up within the department to collaborate with the Ferens Institute of Otolaryngology on the physical problems of hearing. A wide range of instruments is being acquired and constructed, and a number of investigations commenced.





## BLAND SUTTON INSTITUTE OF PATHOLOGY

Graph to show number of specimens received for examination each year  
1920-1949





## FERENS INSTITUTE OF OTOLARYNGOLOGY

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C. P. Wilson, Esq., C.V.O., F.R.C.S.

J. P. Monkhouse, Esq., M.B., B.S., F.R.C.S.

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The Ferens Institute of Otolaryngology is a department of the Medical School, equipped for carrying out research into problems connected with the Ear, Nose and Throat. Facilities are also provided for the help of post-graduate students and visitors from abroad.

The Institute acts in close liaison with the Ear, Nose and Throat department of the hospital so that pathological material can be fully examined and special investigations into difficult cases can be carried out.

The Deafness Clinics which at present are held three times a week were among the earliest to be opened in the country, and, although the fitting and trial of Hearing Aids is an important part of the work, they also provide much of the material for research into the problems of Audiology. This part of the work is being carried out in close co-operation with the Department of Physics.

## SCHOOL OF NURSING

### MATRON

Miss M. Marriott

### PRELIMINARY TRAINING SCHOOL STAFF

Miss Slater, S.R.N., D.N., Sister Tutor in Charge  
Miss Biron, S.R.N., S.C.M., D.N.  
Miss Jackson, S.R.N.

### NURSING SCHOOL STAFF

Miss Fawkes, S.R.N., S.C.M., D.N., Sister Tutor in Charge  
Miss Fowler, S.R.N., S.C.M., S.R.C.N., D.N., B.A.  
Miss Jede, S.R.N., S.C.M., D.N.  
Miss Bromby, S.R.N., S.C.M., S.R.C.N., D.N.  
Miss MacCallum, S.R.N., S.C.M.  
Miss Webb-Johnson, S.R.N., S.C.M., D.N.

### LECTURERS

The Medical and Surgical Consultants of the Middlesex Hospital.  
The Professors in the Middlesex Hospital Medical School.

## THE NURSING SCHOOL

The Middlesex, in common with other Teaching Hospitals, has no shortage of applicants. Many more apply than can be accepted. Two hundred Student Nurses enter the Preliminary Training School each year in four sets of fifty each. The Preliminary Training School is housed in a pleasant building in Lancaster Gate, overlooking Hyde Park. Each set of Nurses receives instruction in Anatomy, Physiology, Invalid Cookery, etc., and is taught the simple Nursing Procedures they will carry out when they first enter the Wards.

After having completed the first month in a Ward each Nurse sees the Matron—who has a report of the Nurse's progress in front of her—and together they discuss it. The Nurse then moves into another Ward, and at the end of a further two months sees the Matron again.

All being well, her trial period is over and soon after this she will go on Night Duty. When the Nurse has completed Night Duty she has seen the Hospital as a whole and has cared for the patient over the whole twenty-four hours. She is rapidly gaining confidence and learning more about the Art of Nursing every day.

It is now time for the remainder of her three weeks' holiday. On her return she generally enters her first year block of study—a period of six weeks which she spends in the Class Room with no responsibility for patients. She has revision in Anatomy, Physiology, Hygiene and receives her surgical lectures. At the end of this period she takes the Preliminary State Examination. The first year is now over and she is no longer the Junior Nurse in the Ward, but is ready to receive her epaulettes and become a senior Probationer having more responsible work.

The next two years are spent alternating practical instruction and work in the Wards with Blocks of Study, Examinations and Holidays (four weeks in the year) and, at the end of the third year she takes the Final State Examination. The fourth year is spent as an Acting Staff Nurse—a most valuable year this, with no examinations but with real responsibility, and the nurse gains poise and confidence.

When the Nurse has completed her training she has before her limitless opportunities for interesting work either in this country or in the world at large ; because a well trained British Nurse is welcomed everywhere.

Age of entry :	18 years, 9 months
Dates of entrance :	February, May, August, November.
Average length of waiting list :	9 months, but unexpected vacancies occasionally occur.
Intake :	50 nurses each session
Qualifications for entry :	School Certificate standard of education. Good health and physique.
Period of training :	4 years.

Applications for entry to the School of Nursing should be made to the Matron, who is pleased to interview candidates any time after they have passed their sixteenth birthday and to enter their names on the waiting list.



## ANCILLARY SCHOOLS

### SCHOOL OF RADIOGRAPHY

#### X-RAY DIAGNOSTIC

Medical Director

Sir Harold Graham Hodgson, K.C.V.O., F.R.C.P., M.B., B.S., D.M.R.E.

Head Teacher

Miss M. Frank, M.S.R., F.R.S.

The training consists of instruction given in the use of X-ray apparatus and of taking X-ray films to assist in the accurate diagnosis of illness and accident.

The required course demands a good level of intelligence and a high degree of practical ability.

Age of entry :	18
Dates of entrance :	March and September
Average length of Waiting List :	2 years
Qualifications for entry :	School Certificate with the subjects Chemistry and Physics included. Proof of Physical Fitness.

### SCHOOL OF RADIOGRAPHY

#### X-RAY THERAPY

Medical Director

Professor B. W. Windeyer, F.R.C.S., D.M.R.E.

Head Teacher

Miss Craig, S.R.N., M.S.R.

X-ray Therapy, or Radiotherapy, is the treatment of disease by the application of X-rays and the radiations from radio-active substances such as Radium.

The Students' curriculum covers instruction in the nature and use of the various kinds of apparatus and materials used for this purpose, and also their practical application to the patient.

Age of entry :	18
Dates of entrance :	March, September
Average length of Waiting List :	1 year
Qualifications for entry :	School Certificate with the subjects Chemistry and Physics included. Proof of Physical Fitness.

Application for entry to these Schools should be made to the Matron.

### SCHOOL OF PHYSIOTHERAPY

Medical Director

Dr. F. Howitt, C.V.O., M.D., F.R.C.P.

Head Teacher

Miss M. Duffield, M.R.S., T.M.E., T.M.M.G.

Physiotherapy is one of the aids that Medical Science can call upon when treating the Sick. The training is an interesting one calling for a high theoretical standard and muscular skill, combined with a delicacy of touch and flexible hands. Candidates receive instruction in massage, remedial exercises, electrical treatment, including artificial sunlight.

The first three months are a trial period and students completing this satisfactorily complete the three year training.

New premises for the School and the Department have recently been opened, and students now have the pleasure of working in one of the finest Departments in London.

Age of entry :	18
Dates of entrance :	April, October
Average length of Waiting List :	2 years
Intake :	24 students each session
Qualifications :	Proof of general educational standard. (School Certificate or its equivalent). Post Certificate year at school. General curriculum to be followed should include General Science (or Chemistry and Physics) and Biology if these subjects have not been included in School Certificate. Physical Education should be included in the curriculum. Proof of Physical Fitness.

Early application for entry to the School should be made to the Matron.



## THE ALMONER'S DEPARTMENT

Head Almoner

Miss M. J. Roxburgh

Illness brings inevitable disruption to the routine of many patients' lives—difficulties arise concerning their dependents or other responsibilities, their work, their future plans—difficulties with which they may be in no condition to deal. It is part of the function of the almoner to be available to advise and help in these circumstances. At this Hospital, an almoner is attached to each ward and each out-patient clinic, and every patient who needs to consult her has the opportunity of doing this.

In many cases the almoner gives the required help by the use of one or more of the statutory and voluntary agencies which form our social services. For example, if the doctor advises that a patient should change the nature of his work, the almoner will inform the rehabilitation officer of the Ministry of Labour. With him she will work out a plan which may entail residence at a Retraining Centre under the Ministry before the patient is placed in a suitable post. For a different need the almoner may enlist the help of a voluntary agency, such as the Family Welfare Association of the British Red Cross Emergency Help Society.

Many patients require a period in a convalescent home as an interlude between hospital and a return to normal life. The almoners know what convalescent homes are available, what each of these can offer in the way of accommodation, recreation, food, rest, and those general amusements which everyone needs during a period of convalescence. The Hospital's own Convalescent Home at Clacton is always full and, in addition, patients have during 1949 been sent to 35 other Homes within reach of London.

For a relatively small number of patients, it is necessary that the almoner should keep in touch over a long period. This group includes patients seriously ill with cancer, who have periodic visits from a member of the almoner's staff, in order that any special comfort may be supplied. It also includes patients suffering from a nervous or rheumatic disease who need periodic help and encouragement in order to persevere. Or the after care may be of short duration, for example, assistance in getting arrangements made for a home help.

## PATIENTS AMENITIES

### AND THE WORK OF THE LADIES ASSOCIATION

For the purpose of this section the term "amenities" denotes special facilities, comforts and luxuries for the patients, the cost of which has been borne by private funds at the Board's disposal, as distinct from Exchequer funds.

Expenditure of this kind has been incurred in the belief that the comfort and contentment of the patients can help them to derive the maximum benefit from their medical treatment.

The following are examples of amenities which have been maintained or newly provided during the past year. In many of these things the Hospital is deeply indebted to the voluntary workers of the Ladies Association who are untiring in their efforts on behalf of the patients:—

#### LIBRARY

The Middlesex has its own library of some 7,000 books. Frequent regular visits are paid every week by the Librarians to all the wards with trolleys of books for the patients.

#### MOBILE SHOP

The Ladies Association undertake regular visits to the wards with trolleys from which patients can obtain stationery, toilet articles, sweets etc.

#### WIRELESS

During 1949 the original wireless installation was replaced by a rediffusion system giving every patient a choice of three broadcast programmes, to which they can listen in with their headphones.

#### FLOWERS

The flower-beds in the courtyards of the Hospital are carefully cultivated. Window-boxes decorate the front of the Hospital. The flowers in the main entrance hall and in the various waiting-rooms have become a feature of the Hospital.

#### SOFAS AND CHAIRS

Wooden benches in the Out-Patient and Casualty Departments and in the waiting rooms at treatment clinics have all been replaced by chairs and sofas, comfortably upholstered. A number of garden chairs and seats have been provided for the patients.

#### CONVALESCENT HOME

Many improvements have been made to the interior of the Home, including the provision of television and radiogramophones, window curtains and chair covers, toys for children. The garden has also been re-designed and greatly improved.

#### MISCELLANEOUS

Many minor amenities have also been provided throughout the Hospital, including hair dryers and the services of a hairdresser for the women patients. The cost of Christmas fare and festivity was heavily subsidised to produce the usual high standard.



# THE UNIVERSITY OF CHICAGO

THE UNIVERSITY OF CHICAGO

CHICAGO, ILLINOIS

The University of Chicago is a private research university in Chicago, Illinois. It was founded in 1837 as the first American university to be organized on the basis of the European model. The university is known for its commitment to academic excellence and its role in the development of modern higher education in the United States.

The university is organized into several divisions, including the Division of the Physical Sciences, the Division of the Biological Sciences, the Division of the Social Sciences, and the Division of the Humanities. Each division is further divided into departments, which are responsible for the teaching and research in their respective fields.

The University of Chicago is also known for its commitment to public service. The university has a long history of involvement in the community, and it continues to be a leader in the field of public service. The university's commitment to public service is reflected in its many programs and initiatives, which are designed to address the needs of the community and to promote the well-being of society.

The University of Chicago is a member of the Association of American Universities (AAU), which is a national organization of research universities. The AAU is committed to the advancement of higher education and to the promotion of research and scholarship. The University of Chicago is proud to be a member of the AAU and to contribute to the advancement of higher education in the United States.

The University of Chicago is a leader in the field of research and scholarship. The university has a long history of producing world-class scholars and researchers, and it continues to be a leader in the field of research and scholarship. The university's commitment to research and scholarship is reflected in its many programs and initiatives, which are designed to promote the advancement of knowledge and the development of new ideas.

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