the thirty-sixth week or it does not. In all humility I suggest the radiologists are the only people who can answer the question accurately. If, as Blair Hartley suggests, the foetal head does not enlarge during the last four weeks, then all those who induce labour prematurely for apparent disproportion, either in primigravidae or in multiparae, will need to have a very clear idea of what they hope to achieve thereby. For, apart from the size of the skull, the mere bulk or weight of the foetus is the only other factor which can helpfully be reduced by premature induction of labour. And while it can be argued that such reduction in bulk is of great importance in breech delivery it can hardly be considered of common importance in cephalic delivery. It is for this reason that I suggest that this question is of no little significance.—I am, etc.,

London, S.E.18.

ARCHIE G. MURRAY.

REFERENCE

¹ *Proc. R. Soc. Med.*, 1949, **42**, 301.**What is Social Medicine ?**

SIR,—In the *Journal* of July 16 (p. 125) you published a paper by Professor W. Hobson entitled "What is Social Medicine"? I happen to be one who has spent a lifetime in the Public Health Service and in the study and practice of preventive medicine, and I confess I have been somewhat mystified by the term "social medicine" which has become so fashionable in recent years, wondering in what way it differed from the public health work with which I had been connected. So, with the hope of having my doubts answered by Professor Hobson, I read his paper with great interest and expectation.

Although I must say I found the paper admirable in many respects, I could not find in it anything to show that social medicine in its objects and practice is very different from the old public health or preventive medicine as practised in this country during, say, the last 25 years. Social medicine is defined by Professor Hobson as the study of those environmental factors which affect health and the application of that study to the benefit of man. Surely this is nothing new, for such study and application have always been the role of public health work. Indeed, by quoting a sentence from the Memorandum of the Ministry of Health on the duties of medical officers of health to the effect that he, the medical officer of health, should endeavour to acquire a knowledge of the influences—social, environmental, and industrial—which may operate prejudicially to health in his district, Professor Hobson himself shows that all these factors were not overlooked in the old public health.

Professor Hobson says that the term "social medicine" is necessary because the older terms—public health and preventive medicine—are too limited in their scope, and that there are many factors not mentioned in the Public Health Acts which affect health. This is quite true, for the Public Health Acts deal mainly with requirements which can be enforced by law, but surely it is not true to say that public health work in the past has been confined to the enforcement of these Acts. Indeed, Professor Hobson himself supports this view when he quotes as an example of the need for studying factors outside the physical environment the researches of the late Dr. M'Gonigle on the health of people transferred from slums to new housing estates, but Dr. M'Gonigle was a medical officer of health, and no doubt he regarded these inquiries as part and parcel of his official duties. A study of the annual reports of medical officers of health for many years past, or the annual reports of Arthur Newsholme, George Newman, and their successors at the Ministry of Health, will demonstrate that many and varied researches have been made by these officers and their staffs into matters now considered to be the particular concern of social medicine.

It is true that during the last century and in the earlier years of this century public health work, apart from infectious diseases, was almost wholly concerned with drainage, water supplies, nuisances, and the like, but with the introduction of maternity and child-welfare and school medical services, followed by those for tuberculosis and venereal diseases, a

great change came over the scene, and public health became infused with new interests, largely social in character. I have been concerned in this letter only to vindicate, if that is not too strong a word, the work of "public health" in the past, for I see clearly that great changes are impending, and are indeed unavoidable. I can see a great break-up of the environmental work of the medical officer of health, and if social medicine can infuse new life into a service which is threatened with death by inanition then I say, God speed to social medicine.

I hope Professor Hobson will forgive me the few mild criticisms which I have submitted, for I really enjoyed reading his paper and agreed with much he had to say, particularly where he pleads for a closer integration between preventive and curative medicine.—I am, etc.,

Torquay.

THOMAS GIBSON.

Intrauterine Manipulations

SIR,—With reference to the "overglove" for intrauterine and other manipulations described by Dr. J. A. Moyse (July 23, p. 230) I should like to mention a similar device designed by me and described in *Ginekologia, Polska* (1933) under the title "Sterile Access to the Uterine Cavity."

It consists of a rubber cuff about $4\frac{1}{2}$ in. (11 cm.) long which extends at one end into a flattened shield with a metal frame attached to its edge. The longitudinal silk threads inside the rubber prevent stretching of the cuff lengthwise while the transverse stretch remains unhampered. The cuff is lined with gauze, the folds of which allow the cuff to be stretched transversely but not longitudinally. When in use the metal frame is attached with clips to the sterile sheet covering the operating field in such a way that the flat rubber shield covers the perineum and the surrounding skin of the vulva and the opening of the cuff comes opposite to the introitus of the vagina. Then the cuff may be inverted into the vagina when the hand passes through the vagina, or by a tubular or any other vaginal speculum.

Because the cuff is non-stretchable lengthwise, it cannot slip over the surface of the vaginal membrane when inverted, and it thus prevents the transfer of the bacterial flora from the lower to the upper part of the vagina. The gauze lining, which is turned towards the skin of the vulva and the membrane of the vagina, absorbs the mucous secretion which otherwise would be spread over the rubber surface of the cuff, and it thus prevents the transfer of organisms to the upper part of the vagina. The grasp of rubber in the frame takes the place of the hand pulling the "overglove" in Dr. Moyse's diagram, and thus the left hand is free. This is important, as the free hand should be placed on the abdomen over the fundus of the uterus when passing the other hand through the vagina to the uterine cavity.

The usefulness of the instrument was confirmed by the bacteriological examination of the pieces of the gauze lining taken from several places corresponding to the different levels of the vagina after the instrument had been used.

This instrument can be used for vaginal examination before or during labour, and for all obstetrical operations done by hand or instruments inside the uterine cavity. Although the consequences of infection are less dangerous now in the era of sulphonamides and penicillin, there is no doubt that Dr. Moyse is right in his opinion that the problem of the sterile access to the uterine cavity will always be one of great importance.—I am, etc.,

London, W.3.

C. UHMA.

Breast-feeding

SIR,—Dr. F. H. M. Dummer will not mind an observation on one sentence of his excellent article (July 2, p. 14) from a class-mate and fellow breast-feeding supporter. He says, "The number of babies completely breast-fed at 6 months was estimated at the low figure of 13.2%." Now rightly or wrongly this gives the impression that a higher figure would have been considered more desirable. If it is correct that it is necessary to give a breast-fed baby vitamin supplements from an early age, then presumably Nature, which could not have foreseen the generosity of the Ministry of Food, must have intended