PROPOSED COAT OF ARMS FOR THE BRITISH MEDICAL ASSOCIATION

BY

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The Coat of Arms suggested and advised by the Clarenceux King of Arms, and approved by the Council for submission to the Representative Body, embodies in its symbolism the foundation, the history, the Empire and Commonwealth links, and the aims and ideals of the British Medical Association.

I have been asked to describe the arms in non-heraldic terms, to explain the implications and symbolism of each item, to describe the coat in correct heraldic terms—that is, to blazon the arms—and lastly to give a few reasons why the British Medical Association should possess a coat of arms, and the uses which can be made of the “achievement.” It must be remembered that Her Majesty the Queen is our patron. As Sovereign, she is the fount of all Honour, and the Heralds and Kings of Arms, under the Earl Marshal, act for Her Majesty as officers of her Household.

The Shield

First, then, the shield. The lower two-thirds are divided vertically into two equal parts; on the right the background is gold, and on the left it is blue; superimposed across both these colours is the heraldic symbol of the Maunche, which is a representation of a mediaeval lady's sleeve, with the long extension at the wrist often used as a pocket. The Maunche has been used on the coat of arms

of the Hastings family since Plantagenet times. Our founder, Sir Charles Hastings, was a cadet of this great family and the Maunche was used by him. It is found on the lovely silver tray which originally belonged to him and is now in the possession of the B.M.A. In order not to use the identical emblem the B.M.A. colours of blue and gold are used on the Maunche in reverse to the colours of the background and also divided down the midline. Above this, on the upper third of the shield, that is “in chief,” the background is red with a golden lion passing from left to right and looking forward. This is the Royal Lion “differenced” by the position of its head, as no one can use the Royal Lion, which is Her Majesty's personal property; but it indicates heraldically that the Association is British, and covers the Empire, Commonwealth, and Dependencies; it also emphasizes the royal connexion, the Queen being our patron.

The Crest

Above the shield is the crest, which is made up of the rod and serpent of healing in gold and crossed by the torch of learning in blue, indicating that we are a learned society; both arising from a twist of blue and gold material. This twist would in ancient times have literally bound the crest to the helmet of the particular knight, and it was always in his main colours.

Supporting the shield on the right is the figure of Hippocrates, the founder of medicine and of medical ethics, holding in his right hand the apple of health. The supporter on the left is the figure of Harvey, the founder of modern British medicine, holding in his left hand a circle coloured red and blue, indicating his discovery of the circulation. Beneath the whole is the motto *Salus populi suprema lex*.

All this portrays heraldically the foundation, aims and ideals, and the Empire-wide connexions of the British Medical Association, and marks our loyalty to our Queen and appreciation of her patronage.

The Dignity of Arms

The prestige of the B.M.A., and its influence in affairs, both general and medical, at home and abroad, merit its bearing a coat of arms as do other great and learned institutions. It may help to maintain the prestige of the profession much threatened—even shaken—at the present time.

As to the uses which could be made of a coat of arms by the Association, first, it would be entitled to fly its own banner or standard on all appropriate occasions, national or international, and on such occasions as joint meetings with the Royal Society of Medicine or other learned bodies (who already fly their banners at such times); it also could be borne in procession at church services at the annual meetings. At other times the banner could be hung with great effect in the Great Hall behind the President's chair on the dais; this would end the peculiar anomaly whereby the banners of many cities and towns where we have held our annual meetings are hung in the Great Hall but nothing of our own. It could also be flown over B.M.A. House on such occasions as sittings of the Council or Representative Body. Secondly, the arms could be used on all Association publications, books, journals, and magazines, and add great dignity to the Association's letter headings. Thirdly, the arms could probably be used on the seal of the Association for all legal documents, deeds, and acts of the Association. Lastly, the arms could be used on badges of office for the President, fully blazoned; for the Chairman of the Representative Body with crest; and for the Chairman of Council with the plain shield: the present badges of office being used by the past President and past chairmen.

The full achievement should be described heraldically as follows:

Shield.—Per pale, or and azure, a Maunche counter-changed, in chief gules a Lion Passant of the first, horned and langued of the second.

Crest.—From a Twist or and azure, a Rod and Serpent of the first, and a Torch of Learning of the second flames issuant proper, in saltire.

Supporters.—Dexter: Hippocrates holding in his dexter hand an apple proper. Sinister: Harvey garbed in doctor's robes proper, holding in his sinister hand an annulet per fesse gules and azure.

Motto.—"Salus populi suprema lex."

THE FUNCTION OF LEUCOCYTES

A NEW YORK CONFERENCE

A large and well-attended Conference on leucocytic functions, under the auspices of the New York Academy of Sciences, was held in the Barbizon-Plaza Hotel on May 27-29. Two workers from England participated, Professor J. M. YOFFEY and Dr. O. A. TROWELL.

At the first session Professor O. P. JONES (University of Buffalo) gave a brief account of Dr. Downey's work, which began with a study of blood formation in fishes. Subsequently he demonstrated, jointly with Weidenreich, the origin of lymphocytes from fixed reticulum cells. Among his many other contributions were important studies on the myeloblast, infectious mononucleosis, myeloid leukaemia, and platelet formation. Dr. DOROTHY SUNDBERG (University

of Minnesota) considered the main development of lymphocytes and plasma cells to be through the differentiation of primitive reticular cells, though Downey had shown that, more exceptionally, plasma cells could also originate from all types of lymphocytes, perivascular cells, mesothelial cells, and fibroblasts. Lymphocytes could transform to many cell types, including plasma cells, macrophages, and granulocytes. So far as antibody production was concerned, much of the recent evidence suggested that it was the large basophilic cells, with reticular nuclear characteristics, which were the most important in antibody production.

Neutrophils, Basophils, and Eosinophils

Dr. J. C. SIERACKI (Detroit, Michigan) discussed some of the facts known about the neutrophil leucocyte. He first reviewed the evidence bearing on its life cycle, beginning with a probable developmental period of four days in the bone marrow before reaching maturity. Its viability after discharge from the marrow had been variously estimated to range from a few hours to 9-10 days. With regard to movement, he pointed out that its cataphoretic velocity was lower than that of the lymphocyte, and, further, that speed of movement and phagocytic activity did not always go together. The work of Vallee had shown that the neutrophil had an unexpectedly high content of zinc, which fell in leukaemia and appeared to rise in refractory anaemia.

Dr. R. S. SPEIRS (Bar Harbor, Maine) then discussed the eosinophilic and basophilic leucocytes. He emphasized the specificity of the eosinopenic response to adrenal hormones, which did not exert a direct eosinolytic action. He then described a technique for obtaining large numbers of eosinophils and mast cells for experimental study. The source of these cells was the exudate obtained after repeated intraperitoneal injection of sensitizing materials. Dr. JOHN REBUCK (Henry Ford Hospital, Detroit, Michigan) described a new technique for obtaining serial samples of cells from an inflammatory exudate in man. Lesions had been studied every few hours.

Tissue Culture

Dr. EDWIN E. OSGOOD (Portland, Oregon) then spoke about the role of tissue culture in the study of leucocytes. The double coverslip and hanging drop technique had yielded valuable information about the structure, movement, and mitotic activity of leucocytes. The roller tube method, on the other hand, seemed of little use for haemic cells, though a lymphosarcoma cell grown in roller tubes was in fact the first haemic cell to be cultured for a prolonged period. The gradient culture appeared to be the most promising of all techniques so far, and had given the first reliable and consistent multiplication of human haemic cells. Dr. Osgood also referred to data on the life span of human leucocytes, from which had emerged the somewhat unexpected result that leukaemic leucocytes live for a shorter time than do normal cells.

Drs. E. P. CRONKITE and GEORGE BRECHER (Naval Medical Research Institute, Bethesda, Maryland) discussed the effects of irradiation upon the leucocytes. After total body irradiation the number present in the blood depended upon both the dose and the time after exposure. There appeared to be a close relationship between mortality and the extent of the leucocyte depression. They also described their efforts to develop a method for preparing combined suspensions of leucocytes and platelets, for experimental transfusions in leucopenic states. Preliminary observations appeared to indicate that under these conditions transfused leucocytes would circulate in leucopenic dogs with aplastic bone marrow, and could also migrate from the blood to sites of infection.

Variations in the Leucocyte Count

Drs. M. B. VISSCHER and F. HALBERG discussed the question of diurnal variations in the leucocytes. In man and dogs a daily decrease in eosinophils occurred during the morning hours, but in rats and mice this decrease took place during the evening. Furthermore, the decrease was independent of stress reactions due to handling the animals.