Act of 1919 which transfer from the Medical Council to the judicial courts the power to remove names from the register in the case of practitioners guilty of fraud, misdemeanour, or infamous conduct in a professional sense. As an act of partisan warfare the Tasmanian authorities have not hesitated to take away from the practitioners of the island the power of professional self-government—a power which, according to universal recognition, has been justly merited and justly used; a power which has played a significant part in maintaining a high standard of professional conduct, and a power which has at many junctures jealously safeguarded the interest of the general public. Whether the Tasmanian Legislature has in this matter exceeded the legitimate limits of its activity remains to be determined.

The position was brought to the notice of the Representative Body at Cambridge, when it unanimously instructed the Council to investigate the grave situation which has arisen in Tasmania. The Chairman of Council assured members in Tasmania that the Association would do all that was in its power to assist them.

MOTOR NOTES FOR MEDICAL MEN.

By H. MASSAC BUIST.

THE UNDUE OVERHANG MENACE.

AN important problem concerning the safety of road travel is presented by the motor char-à-banc with very wide coachwork and excessive overhang at the back. Medical men are complaining of "incidents" when encountering them in ever-increasing numbers all over the country. Commercial enterprises are locking up large sums of money in putting such vehicles on our high-roads and by-roads. Our relatively narrow main and secondary thoroughfares are not designed for them. Whether the matter be regarded from the point of view of the road user approaching or desiring to overtake such a vehicle, it is equally dangerous. One has only to follow an example along the road to realize that, with the continual deviation of our highways and byways, such char-à-bancs practically block up the whole road. Overhauling them, therefore, is attended with considerable risk, for when taking a corner the back sweeps threateningly. The Government departments concerned are tardy to act, though they are prompt to announce that they will inquire concerning the need to take action. Hardship would be caused if the Government were so deliberate in its procedure that commercial enterprises were to spend further sums of money in the acquisition of vehicles of a kind the use of which is manifestly undesirable and is subsequently to be prohibited. Some have suggested that these char-à-bancs should be confined to the main roads, and their use on the by-roads forbidden. Certainly in narrow thoroughfares and the lanes, as in Devonshire, where they are frequently encountered at this season, they are a positive menace. They occupy the entire road. Even if one has the luck to scrape by it is only by getting so much under the hedge that one's tyres get destroyed by loose stones, broken glass, and so on, and there is no foundation under the wheels on the side right against the hedge, consequently one's car is apt to become uncontrollable. The fact that the individual's vehicle is so much lighter than these char-à-bancs means that any damage they would sustain would be a mere nothing compared with that wrought to the car by its impact on such a massive and weighty structure. Orders placed with the manufacturers for such vehicles indicate that hundreds more are coming on to the road. Therefore it is impossible to judge the degree of danger of the situation from evidence on the highways at the moment. A solution of the problem short of one involving loss of capital is hard to devise.

ENTIRELY DIFFERENT CHASSIS NEEDED.

In connexion with such vehicles the law should compel the design of the chassis and, above all, of the coachwork to be submitted to the authorities, and require them to deal with these problems ahead of the event, as it were, not after a mistake has been committed and money has been spent on building undesirable types of machines. Some would say that the best solution is to make double-deckers of these machines, accommodating the given

number of passengers on a much shorter and narrower body. This, however, is scarcely practical. The public appreciates travelling in an open vehicle without any roof over the head, and at a normal altitude above road level, so that there is no sense of topheaviness. The routes these vehicles travel in the course of taking sightseers about the country render it undesirable for the double-deck system to be employed. If, therefore, such machines are not to have excessive overhang, but are yet to have normal wheel bases, it follows that they cannot be run economically because they cannot carry enough passengers. An entirely different sort of chassis would be needed. Moreover, if the wheel base of, say, a 30 cwt. chassis were lengthened to accommodate half the number of passengers carried by a three-tonner, yet without undue overhang, still the lesser machine would be relatively difficult to manoeuvre on the road, though nothing like as bad as the larger.

Of course local authorities are likely to take action in respect of their own districts; but this is never a satisfactory form of dealing with such an important matter as road traffic. We should approach all such business from the national, not from the local standpoint. We are likely to witness a campaign on the subject, for of course the traders affected are concerning themselves greatly in the matter already. They have on their side a popular cry, "co-operative motoring." But they have ranged against them pedestrians, pedal cyclists, those who use horse-hauled vehicles, and users of motor vehicles of the types and sizes for which our roads are suitable. If we are to have entirely different highways, built on the straight Continental principle, wide, with no hedges, whereby we should sacrifice a vast amount of scenic beauty, then there would be no cause for concern about the use of bulky char-à-bancs. As it is, there is no gainsaying that they render the road quite unsafe for other users, though doubtless they are secure enough from the point of those driving and travelling in them.

MOTOR FUEL DISTRIBUTION.

The Automobile Association has now got going, near Bath, the second of its demonstration roadside bulk storages for the supply of benzol to passing motorists. The scheme is exactly akin to that at Aldermaston, beyond Reading. Through the enterprise of the Anglo-American Oil Company it is being supplemented quite independently by the setting up at garages all over this country of a series of curbstone motor fuel supply pumps on the principle of delivering spirit stored in bulk below the surface of the ground direct into the tank of the motorist in quantities from a gallon to five gallons, thereby both eliminating the causes of dissatisfaction and decreasing the cost of fuel distribution in retail. The two-gallon can has always been expensive; difficult to keep clean; liable to leakage; fraught with the risk of condensation leading inevitably to complaint that the petrol is adulterated with water, and so on. The elimination of these sources of complaint and the reduction of distribution cost are therefore to be welcomed, particularly as the scheme has been carried out on a principle that does not prevent the motorist from knowing what brand of fuel he is buying. In the United States of America, where the curbstone supply system is common, motor spirit is not sold under any brand name. In this country, however, it is possible for the individual motorist to know exactly what brand of spirit he is buying. The curbstone pumps are quite sightly and absolutely accurate as to measurement. There is no risk of spilling; the evaporation that occurs is the least possible; and cleanliness is ensured in a way quite impossible when handling a painted can which probably has dust on its exterior, which takes quite a time to empty, and so forth. At night the curbstone supply pumps are easily recognizable. Each is surmounted by an electric lamp. On either side of the bulb in connexion with it there appears the brand name of the particular spirit supplied through the installation. It is a development long awaited in this country, and one which will be rapidly in general evidence.

CAR PRODUCTION AT LAST.

During the last two months I have visited a number of motor factories both in the north of England and the Midlands and am happy to be able to report, in brief, that we are now on big scale production in general. The only

cloud on the horizon is the objection of certain Sheffield workers to the three shift day principle as the only current means of enabling the immediate demand for steel to be coped with. Provided this does not interfere with the output of springs for certain makers, there is no question that at last the paralysis of production occasioned by the long series of strikes will have passed. Quantity production will make a very rapid and marked change in the situation alike in regard to supplies of vehicles and to prices. Big output has taken longer to get going than the work of small makers and assemblers owing to the sheer scale of such enterprise. For example, the hold up of the supply of one component, such as dynamos, springs, lamps, or what not, prevents the output of cars, though all the other parts be available. Further, a firm must have an enormous number of finished parts manufactured before it can begin assembling on what is called the track system, such as Wolesleys are using for their two four-cylinder models. I have seen at the works at Adderley Park, Birmingham, which occupy thirty-five acres, 1,000 complete sets of finished parts for the 15 h.p. four-cylinder model. The stores will always contain about that number, since it is impossible to assemble one car every two and a half hours on any other terms. The Angus-Sanderson, the Bean, and such like new style propositions are also beginning to come through very satisfactorily. Rover attained all but 100 per cent. long ago. Moreover, the vast factory they acquired at Birmingham to build the two-cylinder V type air-cooled engined light car, examples of which did so well in the London-Edinburgh and the London-Exeter trials, is now delivering. Now the big machine is set in operation, of course output will rise rapidly. Austin is another big manufacturer who is turning out well over 100 complete cars a week.

FUTURE PROVISION OF MEDICAL SERVICES.

MUNICIPAL REPRESENTATIVES' MEETING AT BRISTOL.

A MEETING of the Bath and Bristol Branch of the British Medical Association was held at Bristol on July 9th to consider the report of the Consultative Council. Previous to the meeting of the Branch, which was held in the Council Room of the University, a luncheon was given at the Royal West of England Academy by Dr. P. Watson-Williams, President of the Branch. Among those who accepted the invitation to meet Lord Dawson at the luncheon were the Lord Mayors of Bristol and Cardiff, representatives of the medical profession, of all the hospitals, the University and the Education Committee of Bristol, and the Bristol branch of the Red Cross, and visitors from neighbouring towns, representing principally the hospitals of their localities, including Cardiff, Exeter, Salisbury, Bath, Gloucester, Cheltenham, Hereford, Taunton, and Swindon, as well as the medical officers of health for Somerset, Wiltshire, Gloucestershire, and Bath rural.

Dr. WATSON-WILLIAMS, in proposing the toast of "The Consultative Council," said that it was the British Medical Association which initiated the movement culminating in the creation of a Ministry of Health. The West of England had an interest in that movement from the beginning. A suggestion made by Dr. Rumsey of Cheltenham at the annual meeting of the Association in Dublin in 1867 led to a joint committee being formed by the British Medical Association and the Social Science Association to pursue it further. In the following year a deputation from the British Medical Association, including representatives from Bristol, Bath, and Cheltenham, waited on certain members of the Government to ask for the setting up of a Royal Commission on the chaotic state of public health administration; and on June 6th, 1868, the BRITISH MEDICAL JOURNAL went further and urged "the appointment of a Minister of Health." Over and over again during the fifty years which followed the British Medical Association had reiterated its plea, until, in 1918, the Representative Meeting resolved to urge upon the Government the importance of establishing a Ministry of Health immediately. The recommendations of the Consultative Council aimed at supporting rather than supplanting existing organization. Their object was not the effacement of the present provisions but their co-ordination and evolution. The Council constituted an organized nexus between the Ministry and the medical profession, and was intended to

be an official channel by which the profession could give direct expression of its views to the Ministry.

Lord Dawson began his speech with a tribute to the Minister of Health. It was by no means a usual procedure for reports made by Councils to Ministers to be published for the open criticism of the public and of the profession most concerned. That such a course was followed in this instance was due to the liberal-mindedness of Dr. Addison. At the beginning of the eighteenth century, save for provision for paupers and perhaps a few religious institutions, there were no hospitals in the modern sense of the word. Soon, however, the great movement for the establishment of voluntary hospitals began, and Bristol was one of the first cities to rise to the occasion with the setting up of its Royal Infirmary. The interesting book in which Dr. Munro Smith had written the history of that great institution showed in a startling way how very modern in many respects was the hospital organization and even the amenities of the staff nearly two hundred years ago. Now that a new chapter was opening in the story of the hospitals of this country, the west of England was once more in the forefront. Already in the county of Gloucester a scheme had been laid down by the medical officer of health, Dr. Middleton Martin, whereby general practitioners were brought into relation with primary hospitals, which were staffed by themselves, and these primary hospitals were further brought into relation with secondary hospitals in the larger towns. Such a scheme, although it had not yet reached the stage of fruition, showed that here in the west the responsible people were thinking in terms of 1920. The provision for the health of the people in hospital or otherwise was demonstrably inadequate. It needed not to be swept away, but to be expanded and adjusted. Hospitals were inadequate because the population had grown more rapidly than they; also because the basis on which hospitals had been distributed was not determined by the needs of local populations, but by the chance existence of public spirit and benevolence in the district; again, recent progress in medicine demanded increased institutional treatment, which the present hospital system was not elastic enough to supply. It was not a case merely of providing more hospitals, but of the careful grading and linkage of hospitals. Another reason why change was imperative was to be found in the awakening of the public conscience on health matters; people had now a positive instead of merely a negative conception of health, and there was a sharper demand for preventive measures and for dealing with incipient disease. The general practitioner of the future must be more closely identified with preventive medicine and have access to necessary equipment. The present state of the hospitals proved how completely they had been outgrown. Many hospitals had waiting lists hundreds deep, and this was the more lamentable because these waiting lists comprised the people in whom disease was in its early stages and whom it was most important to cure from the point of view of the community. The disability from sickness was a great weight upon the nation. In 1916 sickness benefit in England, for men alone, amounted to nearly 3½ millions sterling, representing 6,800,000 weeks of sickness and consequent withdrawal from employment. The average annual loss due to sickness and disablement in the case of both sexes for the years 1914-16 worked out at 270,000 years, and in these estimates all light sickness (of shorter duration than four days) was excluded, as well as all maternity cases and cases in sanatoriums. If an adequate health organization existed these figures should at least be halved. The criticism had been levelled at the report of the Council that it would entail a huge expenditure on medical services at the time when the country was impoverished; but he and his colleagues recognized that great wars must be followed by strict economy, and that however desirable certain changes might be, it was necessary to wait for the full development and to do the best that could be done in the meantime. All that was asked at the moment was that stock be taken of the position, that a review should be made of what existed at present compared with what should exist, and that a scheme be devised in outline sufficient to reveal the plan according to which the health organization of the future should be shaped. There was already a patchwork of medical services—tuberculosis, venereal, and