fact, these amblyopic eyes practically never become amaurotic—that is, completely blind. We cannot agree that squint is less likely to occur in high degrees of hyperopia than in the more moderate degrees, as is stated on p. 35. Section 94 says that glasses should rarely be ordered for children under 3 years of age owing to the difficulty and danger attending their use. The modern teaching, which is confirmed by the good results obtained in practice, is that a child, even a baby in arms, should be fitted with spectacles as soon as a squint is noted. A young child with high hypermetropia will often cry for his spectacles; in fact, children are often far more intelligent in this respect than their parents. On p. 39 it is stated that "when divergent squint is developed, the only successful treatment is operation," but some have gone so far as to assert that the results of fusion training are even more successful in divergent than in convergent squint, and it is certain that the majority of cases can be greatly helped by accurate correction of the refractive error and by fusion exercises. The directions for testing for heterophoria are incorrect. If the Maddox rod be placed before each eye in succession, and one test gives a deviation of 8 degrees, the other of 4 degrees, the total error is not 12 degrees, as stated, but only 6 degrees. As a matter of fact the result should be the same in each case, and generally is. It is usual to place the rods before one eye and a coloured glass before the other; the deviation is read on a tangent scale, and brought to zero by a suitable prism. It is more usual to order one-third of the total error in the correcting prism, and not one-half, as stated. The use of prism exercises to train the defective muscle balance does not seem to be mentioned, but cases of muscular imbalance are better referred to a skilled ophthalmic surgeon.

NOTES ON BOOKS.

ONE of the medical matters that has had more than its fair share of publicity and discussion in the daily press recently is the subject of painless childbirth. The methods employed in its production are discussed in a semi-popular manner in two American works now before us. In both there are abundant references to the recent literature of the subject. Dr. HELLMAN⁶ sums up in favour of the "twilight sleep" obtained by the use of scopolamine and morphine in competent hands, such as those of Gauss of Freiberg. Dr. DAVIS⁷ finds the anaesthesia due to nitrous oxide and oxygen far preferable.

Miss NEWSOME's book on *Home Nursing*⁸ is based on her experience in teaching members of the British Red Cross Society in Gloucestershire. It contains twelve chapters, in which the effort is made to cover all the ground a nurse should traverse in her training. It contains much information; one may doubt whether the art of compression has not been carried too far in its preparation. Thus on p. 47 we read: "The abnormal respirations are: Cheyne-Stokes, dyspnoea, oedematous, stertorous, hiccoughs. Cheyne-Stokes is common in brain, heart, and the typhoid state."

⁶ *Amnesia and Analgesia in Parturition (Twilight Sleep)*. By A. M. Hellman, B.A., M.D., F.A.C.S. London: H. K. Lewis and Co., Ltd. 1915. (Cr. 8vo, pp. 197. 6s. 6s. net.)

⁷ *Painless Childbirth, Eutocia and Nitrous Oxide-Oxygen Analgesia*. By C. H. Davis, A.M., M.D. Chicago: Forbes and Co. 1916. (Cr. 8vo, pp. 134. 1.00 dol.)

⁸ *Home Nursing: Comprising Lectures given to Detachments of the British Red Cross Society*. By Edith Newsome, M.R.B.N.A. London: The Scientific Press, Limited. 1916. (Cr. 8vo, pp. 168; 38 figures. 2s. 6d. net.)

SIR WILLIAM POWER.

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I DOUBT whether any but a very small part of the medical profession realizes what a great man it has lost in the death of Sir William Power. As the official head of the Public Health Service of England some degree of publicity was unavoidable, but he shrank from notoriety as from a plague, and was never so happy as when he had succeeded in giving to some one else the whole credit for investigation and achievement initiated and largely accomplished by himself. This habit of effacement was

illustrated in many ways. He would not attend meetings where he might be called on to speak; he would not be photographed; the *Medical Directory* contained only the very minimum of information concerning him. All his official work as medical inspector and finally medical officer had to be done of course within the limitations of the administrative system of the Board which he served, but to those who had the privilege of knowing him well he was an inspiration, and there was no higher reward than his approval of a completed task. In spite of frequent illnesses—due especially to attacks of influenza—he was a tireless worker, and even insomnia was utilized as affording time to continue his labours. "The night cometh when a man can work" was his explanation of how he accomplished so much, and his daily railway journeys from and to his home in Kent or Surrey were devoted to official "papers." He complained sometimes of having to take a holiday, and argued against it because return to duty was apt to be followed by illness of some sort.

Power had an admirable mental equipment. He had a faculty of scientific imagination which helped him to the solution of difficult problems. "What hypothesis or hypotheses," he seemed sometimes to ask himself, "would satisfactorily account for this given series of puzzling facts?" It was mainly in this way that he evolved the theory of the relation of bacterial life to the plumbosolvency of certain moorland waters, and subsequent laboratory experimentation was found to justify his conception. His knowledge and study of natural history had impressed him with the possible or probable inter-relationship of the diseases of men and animals. This possibility he bore in mind in investigating, for example, the question of the conveyance of scarlet fever and of tuberculosis from the bovine to the human animal by means of milk. Though he exercised great care and took sufficient time in reaching conclusions, yet, having reached them, he quite disregarded the likelihood of criticism or dissent. His chief, Sir George Buchanan, used to say that Power was the most logically-minded man he had known. He followed where facts and the study of facts led, though the exploration might take him quite away from any beaten path. This was exemplified in his reports on the influence of small-pox hospitals in the spread of that disease.

Power had a remarkable faculty for mastering the principles and application of sciences which had been non-existent or in a comparatively elementary stage when he was a medical student. He had, needless to say, no opportunity for laboratory work in bacteriology or in the developments of chemistry, but he acquired a grasp of these subjects, which helped towards qualifying him to be an admirable chairman of the latest of the Royal Commissions on Tuberculosis and an invaluable member of the Royal Commission on Sewage Disposal. I think he had always misgivings as to some of the lines followed by the modern crusade against tuberculosis, lest disappointment should follow and the public health service be discredited, but where he could not give support he held his peace and did not interfere with the activities of more sanguine missionaries. It is not for an outsider to speak intimately of Power's relations to his colleagues in the medical department, but a long and somewhat intimate acquaintance with many of them may, perhaps, justify me in saying that he seemed not merely appreciated and respected, but admired and beloved alike by his seniors and by his contemporaries and by the juniors whose work he so wisely and kindly guided and supervised. His absolute unselfishness and his constant helpfulness, based on the tripod of great ability, great knowledge, and great capacity for work, could not but be of signal value to his colleagues and of signal service to the State.

On the personal side Power had a rare gift of friendship. His qualifications included a never-failing readiness to appreciate a point of view different from his own, and to throw his whole mind into the consideration and discussion of a question which was occupying the other man's thoughts. He used to say that officially his brain was a kind of gland through which all sorts of material had to pass for rejection or acceptance and digestion, and his half-amused grumble was that often it had not finished dealing with one substance before another was forcibly thrown into it. But this natural or acquired capacity for considering the most varied problems was always at the service of others.