been encountered. . . . Sympathetic nerve block . . . should temporarily relieve the sympathetic type of pain. However, since the origin of the pain is probably not peripheral, care should be exercised in evaluating therapy suggested by this procedure. Procaine hydrochloride anesthesia of ‘trigger points’ . . . should be used in all cases in which they . . . can be demonstrated. Caudal or extradural procaine hydrochloride anesthesia . . . will temporarily relieve somatic pain but often will not influence psychic pain. Controlled spinal anesthesia . . . has been used in a modified fashion to demonstrate the likelihood of success of intraspinal procedures. Each of these test methods may give permanent benefits, especially if they are repeated . . . Bilateral chordotomy performed high up, below the arm area, is presented as the best answer to the problem of somatic and sympathetic pain in the trunk and lower limbs of patients with injury of the spinal cord.” 9 references.

J. C. M. C.


“The Medical and Dental Education Committee of the South African Medical Council has accepted by a large majority, according to the Star, Johannesburg, of 13th March, 1947, the amendment of Prof. Middleton-Shaw that the Diploma in Anaesthesia to be instituted at the Witwatersrand University be available to both Dental and Medical graduates and be regarded as an additional qualification. This resolution was passed despite the views of the Medical Association of South Africa, expressed through its Federal Council, and the South African Society of Anaesthetists, whose prime object is to promote the development and the study of anaesthetics and their administration, and the recognition of anaesthesia as a specialized branch of medicine. . . . Unfortunately, probably no other field of medical practice is less well understood than anaesthesia, and this lack of understanding of the importance of modern anaesthesia is so widespread among the profession and lay public that it constitutes a serious hazard to the advancement of the specialty. . . . “Prof. Shaw is reported, inter alia, to have said that there is no difference between dental and medical anaesthesia, that dentists were trained to give anaesthetics during the war, and that because they received the same training in the basic sciences, there really was no valid argument against giving the dentists the same facilities for obtaining the Diploma in Anaesthesia as would be given to medical graduates. . . . If then a diploma is instituted, let it be the ‘hallmark’ of a trained anaesthetist and not merely a certificate held by an anaesthetic technician. . . . The Medical Association has given its views, as has the South African Society of Anaesthetists—the latter not with a view to keeping anaesthesia a close preserve for doctors and anaesthetic specialists, but because of its anxiety to provide a good anaesthetic service for the peoples of South Africa.”

J. C. M. C.


“This report covers the period from January 1, 1946, to December 31, 1946, and is the second Annual Report issued from this Department. During the year an Assistant Honorary Anaesthetist and a Registrar joined the Department, and there were some unset-