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deficiency and metabolic disorders have been particularly studied, a fact which is recalled by such well-known names as Garrod (father and son), Barlow, Stark and many others, while those of Manson, Rogers, Evans, Leishman, Donovan, Bruce and Boyd recall the British contribution to the knowledge and treatment of infectious and tropical diseases.

Cardiology is certainly one of the fields in which the British clinicians and researchers have won the greatest laurels: Heberden, Fothergill, Withering, Cheyne, Graves, Burns, Adams, Parry, Stokes, number among the principal founders or promoters of a specialty for which the way was opened by Harvey's discovery; by their electrophysiological studies, Waller, MacKenzie and Lewis were among the first to give cardiology its present-day scientific orientation. It is all the more to be regretted that it has not been possible for the corresponding chapter to be more amply developed.

The book contains interesting information on the Anglo-Saxon contribution to paediatrics and genetics. Some particularly interesting pages refer to the role of England, its hygienists and its social legislation, in the development of public health during the industrial revolution, under the impetus of Chadwick, Cobbett, Simon, Southwood-Smith and their followers.

This volume, the authors of which and all those involved in its production are to be warmly congratulated, will effectively fill a gap in every medico-historical library. It satisfies in all respects the hopes of those who had been waiting for so long for the publication of a history of British medicine.

CHARLES COURY

The Detective-Physician: the Life and Work of Sir William Willcox, by PHILIP H. A. WILLCOX, London, Heinemann Medical Books, 1970, pp. xiv, 332, illus., £3.50.

In this book Dr. Philip Willcox has described the life and work of his father, Sir William Willcox, K.C.I.E., C.B., C.M.G., M.D., F.R.C.P., who was physician to St. Mary's Hospital from 1907 to 1935 and an expert forensic adviser to the Home Office from 1904 to 1941. It is much more than a work of filial piety. It describes a brilliant career, the like of which is no longer to be seen in the modern world. As Dr. Willcox writes in his introduction: 'Here was the case of a man who, without outside influence or financial support in his youth, at first earned his living as a schoolmaster, paid for his own medical education at St. Mary's Hospital at a time when there were no state-sponsored scholarships, qualified as a doctor, became a Home Office pathologist and analyst, consultant physician and lecturer in several subjects at his medical school.'

Before the first world war, Sir William Willcox gave evidence in twenty-five trials for murder or manslaughter, including those of Crippen, Steinie Morrison and Seddon. After the war, he gave evidence in other famous trials and throughout the whole of these periods he was on the consultant staff of St. Mary's Hospital, treating patients and teaching students and also running a large private practice in the West End of London. His retirement from the staff of St. Mary's was marked by a packed and emotional final ward-round about which the Dean (the late Lord Moran) wrote: 'What everybody thinks was shown by the turnout. I have never seen anything like it.'

Sir William Willcox was born at Melton Mowbray in 1870 and throughout his

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life he indulged in the hobbies of a country squire: hunting, hacking and shooting. In the sunset of his life I myself remember shooting with him when he was on a visit to my parents in Buckinghamshire. Sir William Willcox first took a degree in chemistry and then taught chemistry for four years in a private school, becoming a Fellow of the Institute of Chemistry. Clearly these years laid the foundation of his great knowledge of toxicology. He did not begin to study medicine until the age of twenty-five and he qualified with brilliant Honours in the London M.B. at the age of thirty.

Soon Willcox joined the distinguished line of Home Office pathologists—Sir Thomas Stevenson, Pepper, Luff, Webster—and in his turn he trained Spilsbury and Roche Lynch.

It is interesting to record that all of Willcox's distinguished honours from the State were won on war service in World War I. He served with the Gallipoli expedition and in Mesopotamia, where he made a great contribution to the recovery of the British Army from the early disasters of the campaign. Everyone who is immunised with TAB vaccine (as I myself am each year) should remember that this was pioneered by Willcox and Sir Robert Archibald.

In 1918 General Sir Alfred Keogh, the great Director-General of Army Medical Services in World War I, who was honoured with the Grand Cross of the Order of the Bath, a very singular honour for a medical man, wrote to Willcox and cast his mind forward to the post-war period: 'To you and to me the great interest is of course the question of the national health, its relation to national efficiency, to housing, to poverty and the relation of industrialism thereto. I have some—but not very strong—hopes that the medical profession will come to realise that its part in these great questions is bigger than they have been in the habit of imagining. But we have to get away from the ideas that are so prevalent, if not voiced, that we are merely technical advisers and cannot like other professions produce leaders of men. . . . I see little sign that "Public Health" is really recognised to be that which it is. All the talk is of sick benefit clubs, halfcrowns for the practitioner and so on. The great things are forgotten.'

Sir William Willcox was one of the first to be concerned about the problem of barbiturate addiction, and in 1926, while engaged on this topic, we find him writing: 'The BMA representatives are very obstinate and very difficult to deal with.' *Plus ça change, plus c'est la même chose.*

Sir William Willcox lived in considerable style in Welbeck Street, in the house where he had his private consulting rooms. He kept horses and rode every morning in Rotten Row. I remember a very senior general practitioner in the country, just after World War II, bemoaning the decline in standards of dress. He remarked that consultants now come to consultations in the country in small fast cars and wearing tweed jackets, whereas Sir William Willcox used to be driven down from London by his chauffeur in a Rolls Royce car and wore a morning coat and top hat, and 'the patients were very pleased to pay a guinea a mile for *that*'.

Dr. Willcox has rightly eschewed any temptation to sensationalize the narrative of his father's great work in forensic medicine and in dealing with drug addiction. The facts stand on their own, and the life and work of Sir William Willcox make fascinating reading. Unfortunately, the book is somewhat marred by a considerable number of printing errors (for example 'tetronal' is wrongly spelt on page 255 and Norman

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Kerr's name is wrongly spelt twice on page 284. (What has happened to the proof-readers that all publishers used to employ?) But this small imperfection does not diminish the great interest of this biography, and Dr. Willcox is to be warmly congratulated on it.

E. GREY-TURNER

The Classical Brain Stem Syndromes (translations of the original papers with notes on the evolution of clinical Neuroanatomy), edited by JOHN K. WOLF, Springfield, Illinois, C. C. Thomas, 1971, pp. xvi, 166, illus., \$9.50.

Many neurologists and neuropathologists will find this a very useful little book. It contains well translated and illustrated versions of ten papers, published between 1855 and 1910, which significantly advanced our knowledge of brainstem function and are remembered today as the source of eponymous syndromes (Weber's, Foville's and so on). The editor contributes good, brief prefatory notes which add to the value of this compilation.

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