

These many awards attested to a remarkable medical career and affectionate esteem for a man in his seventies. They did not signal the onset of retirement, as might be expected, but, rather, marked the inauguration of the career of an author. In 1946 Dr. Harris published *Banting's Miracle*, a glowing tribute to a friend and one of the great benefactors of our time. In 1950 he wrote *Woman's Surgeon: The Life Story of J. Marion Sims*. This biography was dedicated to Dr. Charles Hooks Harris, father of Seale, a disciple of Marion Sims, and responsible for his son's lifelong admiration of the founder of modern gynecology. In 1952 Dr. Harris produced his final work, a political treatise: *Death of*

the National Democratic Party. Another work never completed because of a succession of mishaps and illnesses was: *Octogenarians, Nonagenarians and Centenarians Whom I Have Known*.

This talented and beloved physician died at the home of his daughter, Mrs. Josephine Harris Keegan, on March 16, 1957. It is fitting to repeat a sentiment editorially expressed in the *Southern Medical Journal* of December 1921 when Seale Harris assumed the presidency of the Southern Medical Association: "He is of keen mind, thorough education, scholarly attainments, rare culture, great breadth of vision, and with it all a most human personality."

CORRESPONDENCE

To the Editor:

The letter appearing in the July-August 1957 issue of DIABETES written by Dr. Joslin discussing the association of trauma with diabetes should be of tremendous interest to every practicing physician especially if he is called upon to render a professional opinion as to causal relationship.

Dr. Joslin gives his own personal experience citing uncontroversial data covering a period of over sixty years of clinical observations including case records of 49,000 patients studied in his clinic together with a terse statement of material on the subject covering two world wars, and reported experiences of his intimate colleagues in the Boston area as well as in Europe.

The early and continued animal studies of Long, Lukens, Young, Houssay, Ingle and many others on the relationship of other glands of internal secretion to diabetes mellitus with special reference to the anterior pituitary and the adrenal cortex; the use of certain glucogenic corticoids producing so-called "steroid diabetes" in selected experimental animals; and probably more recent observations and reports by Conn and others on the production of hyperglycemia in man by the use of corticotrophic substances, have induced some to feel that stressful situations resulting from trauma, and/or trauma alone can produce diabetes mellitus in man. Some have used the terminology "stress diabetes" as synonymous with so-called "steroid diabetes" and the clinical entity diabetes mellitus in man.

Despite the profound, exciting and enlightening experimental observations of the past fifteen to twenty years, this writer, for the present, agrees with Dr. Joslin

that trauma and the stressful situations frequently attendant thereto do not cause diabetes mellitus in man. Years of clinical observation confirm this position and there is insufficient experimental or clinical data to refute it.

As to the future, I shall be sincerely and keenly alert to all proven acceptable data confirming or disproving my present belief.

The question of trauma and stress as etiological factors while constituting a very small portion of the problem of diabetes as a whole, looms large and assumes considerable importance when the physician is called upon to render an opinion one way or the other, especially in a court of law. In the past several years I have been asked to review three such cases and give my opinion in three different cities. The legal implications are extensive and far-reaching and at times, appalling. An exhaustive review of the literature on the subject is intensely interesting and one is led to believe that some authors report the findings and statements of others without careful analysis and probably without integrating their own records and observations. As a result of my own recent experiences, I find myself again in agreement with Dr. Joslin and feel obligated to address this communication in the interest of the large segment of the future diabetic population of our country, "if it were considered likely that they would become diabetic if they underwent an injury."

JOHN A. REED, M.D.
Washington, D. C.

To the Editor:

Your recent article on Frederick William Pavy (DIABETES, November-December, 1956) provided a valuable appraisal of his contribution to medicine, particularly in

relation to metabolism and diabetes. There is, however, another aspect of his career much less well-known, but without which no final appreciation of his work is possible. This concerns his activities in the field of public health which are of no little historical interest and importance.

The Metropolis Management Act of 1855 required every Vestry and District Board in the London area to appoint a medical officer of health—the first occasion on which these appointments were made obligatory—and, in 1856, forty-eight men were duly appointed to the new posts. Among them was Dr. Pavy who, at the age of twenty-six, became the first Medical Officer of Health to the parish of St. Luke, Middlesex. His district comprised the crowded area immediately adjacent to the north side of the City of London, and later became the Metropolitan Borough of Finsbury.

A few weeks after taking up his new office, Pavy invited seven of his colleagues to his house at 3, Finsbury Square for a discussion of their work, and more particularly to consider the formation of a society. This meeting is a noteworthy event in the annals of public health. Its outcome was an invitation to all the medical officers of health in the Metropolitan area to attend a gathering on May 13, 1856, in the rooms of the Medical Society, Hanover Square. At this meeting, which was attended by thirty of those who had been invited, the Metropolitan Association of Medical Officers of Health was founded, with John Simon as its first President. This Association, which owed its inception to William Pavy, gradually widened its scope and membership, and has played an important part in the English public health movement since that time.

Pavy continued his work at St. Luke's for almost thirty years, while at the same time conducting his investigations into diabetes. This was a period which witnessed substantial improvements in the sanitary conditions of London, and the Reports which he submitted annually to his Vestry provide an interesting commentary on these changes and serve to illustrate his interest in matters concerning community health. Besides being Medical Officer of Health, Pavy was also the Public Analyst of his parish. He carried out this work himself, and it is interesting to reflect that while he was engaged on his studies on food and dietetics he was also testing the milk, foodstuffs and even the beer sold in the district he served. In 1884 he resigned his office in order to devote more time to his clinical studies and his private practice.

He retained his interest in public health to the end of his long life. When, in 1906, the Society of Medical

Officers of Health (as the Association later became) celebrated its Jubilee, Dr. Pavy, then aged seventy-seven, attended the commemorative banquet and made a short speech.

Although his principal interest lay in the field of clinical medicine, and it is for this that he is chiefly remembered, his work for public health is worthy of mention and should not, I think, be overlooked.

S. P. W. CHAVE
Lecturer in Public Health
University of London
London, England

BOOK REVIEWS

THE HUMAN BODY—ITS ANATOMY AND PHYSIOLOGY. By C. H. Best and N. B. Taylor. Third edition, \$6.75, 723 pp., Henry Holt and Company, New York, 1956.

The third edition of this well-known college text has been greatly altered and expanded. According to the authors it "might best be described as a new book with parts taken from the old." The increased emphasis on anatomy handled simply with good illustrations will make for a better understanding of the functioning of each organ. This is a desirable feature for nurses and premedical students. An introductory chapter sketches modern concepts of the structure and movements of atoms and molecules in order to give a better understanding of solutions, colloids, osmotic pressure, diffusion, and hydrogen ion concentration as they apply in the maintenance of vital body functions. The chapters on the skeleton and muscular systems are well illustrated by color and line drawings with strong emphasis on the anatomical structure as it relates to function. Brief discussions of muscular efficiency and the chemistry of muscular contraction are included. The chapters in Part Three on the fluids of the body provide good descriptions of the functions and composition of blood and lymph. Parts Four, Five and Six, concerned with circulation of the blood, respiration and digestion are suitably discussed and well illustrated. Part Seven is devoted to metabolism and nutrition, renal and cutaneous functions. The last four parts concerned with the nervous and endocrine systems, the special senses, and reproduction are quite sufficient for a text of this type. The Appendix provides convenient tables of weights and measures, proteins and amino acids. The limited tables of food values are of pedagogical rather than practical use.

This book should fill a real need for an elementary