

**Foreign Letters****LONDON***(From Our Regular Correspondent)*

June 13, 1942.

**Lives Saved by Iron Table Shelters**

The latest form of shelter against bombing is an iron table capable of sustaining many tons. In a recent raid the value of the shelter was shown by the escape of an adult and two children in a home demolished by a direct hit. This occurred in spite of the fact that the shelter was hurled 46 feet over an outdoor shelter and into a first floor room of another house. When assisted from the shelter the adult and one child were found to be injured and were taken to a hospital, where they are recovering. The other child was unhurt. In another case, as the result of a direct hit, the debris of a two story building completely buried a table shelter on the ground floor. When rescuers arrived five persons were helped out, shaken but uninjured. In a third case in which the house was demolished, the shelter was lifted sideways 6 feet and upward 4 feet onto debris. The shelter held four persons, who were unhurt. A report of the experts of the Ministry of Home Security on thirty-nine bombing incidents in which the table shelters were involved shows that they have stood up well to severe tests. Of one hundred and nineteen persons in these shelters only four were killed, seven were seriously injured, fourteen were slightly injured and ninety-four escaped uninjured.

**Casualties of the British Empire in the First Two Years of the War**

In the House of Commons Mr. Attlee, secretary of state for the dominions, gave the casualties in the armed forces of the British Empire from Sept. 3, 1939 to Sept. 2, 1941 (excluding deaths from natural causes) as:

	Officers	Other Ranks	All Ranks
Killed.....	6,296	42,677	48,973
Wounded.....	4,064	42,299	46,363
Prisoners of war.....	3,374	55,084	58,458
Missing.....	953	28,803	29,756
Total.....	14,687	168,863	183,550

**New System for Hospital Outpatients**

Before the war the need for a scheme to curtail the long period of waiting for patients attending the outpatient department of Guy's Hospital was recognized. The fact that many of these patients are now engaged in work of national importance and can ill afford to wait long hours has made the problem urgent. Under the previous system the waiting period extended to three or four hours. A new system has been introduced under which appointments are made in hourly blocks, so that one batch of patients attends from 9:30 to 10:30, the next from 10:30 to 11:30 and so on. Thus no patient has to wait more than an hour and many much less. The number of patients booked for each hour varies in different clinics. It has been found that physicians deal with 2 to 4 new cases an hour or 8 old cases, but surgeons see 6 new cases an hour. An unavoidable disadvantage of the scheme is that patients who are booked may fail to attend and make a gap in the sequence of cases. This sometimes can be filled by other patients, but on occasions the physician has to wait for the next patient. On the whole the new scheme has proved advantageous. It relieves the congestion of the outpatient department and succeeds in its main object of relieving the waiting period. It permits the nurse to prepare more efficiently for the manage-

**The Head Louse and Modern Hairdressing**

The managing director of a well known firm of hair dressers has written to the *Times* suggesting that, contrary to common belief, permanent waving is conducive to hair hygiene and elimination of the head louse. This led to a reply from Kenneth Mellanby of Sheffield University, who recently made a report of an investigation, undertaken on behalf of the Board of Education and the Ministry of Health, into the incidence of the head louse. He wrote "Modern styles of hairdressing are, unfortunately, likely to favor an increase of the number of head lice. I have heard of frequent cases of young women with long permanently waved hair which is apparently never disturbed for weeks and which forms an ideal breeding ground for parasites." He has since learned that the reason these women do not comb their hair is not the permanent wave. Two processes are involved in producing an elaborate coiffure. First, if the hair is straight its structure is deformed to produce a result like natural waviness. This change is permanent and will survive brushing and washing. The second process consists in "setting" the hair, which may be arranged in any type of bizarre confection. This "set" is a delicate structure easily disturbed, and its production requires time, patience and skill. Mellanby says that the hairdressers will do much to reduce the incidence of the head louse if they can persuade women to avoid elaborate "sets," which, because of the difficulty of replacing them, are often left uncombed and unwashed for long periods. Further, the shorter the hair the less liable it will be to louse infestation.

**Effects of the War on Human Fertility**

The birth rate has fallen to a level which in the near future means a decline of population. The number of persons in this country between the ages of 14 and 64 is 33 million, and two thirds of them are engaged in the war effort, whether in the armed forces, civil defense or war industries. No country has ever before mobilized its man power to the extent we have. The effect of the war on the birth rate is interesting. Except as it causes a temporary loss of births by separation of man and wife and a permanent loss of potential fathers and mothers by violent deaths, it seems that the war may have a favorable effect on fertility in the long run by bringing about a change in values and removal of some of the deterrents to childbearing. There has been a remarkable increase in marriages. This is in part due to the large number of girls reaching the ages of 19 and 20 owing to the high birth rate which followed the last war. But more important are the allowances provided for the wives of the fighting men. The birth rate for the first quarter of 1942 was higher than for any other first quarter since 1931, in spite of the disruption of family life produced by the war, including the bombing of our cities and their evacuation on a large scale.

**Demand for Further Measures in Prevention of Venereal Diseases**

At a meeting of the Medical Society for the Study of Venereal Diseases a discussion on the need for further powers to deal with sources of infection, contacts and defaulters was opened by Major S. M. Laird. He pointed out that now any person is free to have venereal disease and to communicate it as much as he chooses and is not obliged to be treated or to continue treatment until cured or rendered noninfectious. He is under no obligation to assist in tracing his infective consort, who is free to refuse examination and treatment. In the absence of notification no accurate knowledge of the incidence of these diseases exists. Control is prevented in this country by three factors—technical imperfection of the medical profession, the defaulting patient and the untraced sources of infection