Who's Who. Perhaps the best feature in the book is the extremely able article on 'The duties of a medical officer in a large factory,' by Dr. A. J. Amor, and we would advise all our readers interested in this subject to read it. To those interested in government departments and their committees, the book as a whole will be a useful reference volume.

K. M. A. P.

LA SILICOSIS PULMONAR

By Hugo Dooner

(Medical Officer to the Department of Industrial Hygiene of the San Vicente Hospital, Santiago)

This book is a review of silicosis and is written in Spanish; it contributes very little that is new or original to our knowledge of the subject. The worker is at

present in the Department of Industrial Hygiene in Santiago and was at one time medical Officer to a copper mine in Chile. He uses a classification of Pendergrass and Pancoast slightly modified to meet local requirements, and adds cases complicated by tuberculosis as an appendix. He divides his own workers into three groups; group 1, those with little or no physical incapacity and with little or no fibrosis, men whom he examined once a year; group 2, those with greater disability and more fibrosis, in whom he ordered a change of work and monthly examination; and group 3, those with marked fibrosis and gross incapacity, who were so badly affected that they were given life pensions. He reports at length the literature and gives an extensive bibliography. He discusses various forms of apparatus for counting dust particles and stresses the value of Greenberg and Smith's impinger.

G. C. P.

BRITISH AND FOREIGN OFFICIAL PUBLICATIONS

**MINISTRY OF LABOUR AND NATIONAL SERVICE.
INTERIM REPORTS OF THE JOINT ADVISORY
COMMITTEE OF THE COTTON INDUSTRY.**
1946. London: H.M.S.O. Pp. 18. 3d.

The first of these reports makes recommendations about sanitary accommodation, washing facilities, accommodation for clothing, medical and welfare services, decoration and vacuum cleaning. Sanitary accommodation should be made to conform to good modern standards as regards type, accessibility, lighting, and ventilation. Washing accommodation should be provided on the scale of one wash basin for each 20 persons employed, adequate provision being made for each work room; foot baths are necessary for mule spinners; and for these and others who work in hot conditions shower baths are desirable. Individual lockers in the work-room or changing-room are regarded as the best provision for clothing. For drying wet clothing a heated cloakroom is sufficient. In every mill there should be a first-aid room, a rest-room, and a first-aid attendant: the latter can be employed for other duties also. The increased use of canteens should be encouraged. Meals should not be taken at the work-place. All welfare amenities should be effectively supervised. Vacuums should be used for cleaning machinery and floors.

The second report deals with the control of dust in card rooms. Existing blowing-room machinery should be overhauled so that dust extraction is efficient. Leakage of dust from opening machinery should be prevented by the enclosure and exhaust ventilation. Pneumatic systems should replace manual methods in certain operations. Stripping should be done strictly as recommended in the 1932 report on card-rooms. The impor-

tance of proper maintenance of stripping plants is emphasized.

T. Bedford.

ARTIFICIAL SUNLIGHT TREATMENT IN INDUSTRY.

Dora Colebrook. *Industrial Health Research Board Report No. 89.* H.M.S.O. 1946. Pp. 64. 1s.

This is the report of an inquiry into the effects of ultra-violet light treatment on the health of clerical and industrial workers. It was carried out in an office, a factory and a coal mine during the winter months of 1944 and 1945. Sickness absence, duration of colds in clerical and factory workers, and injury and total absence among miners were the criteria used. In each group, one set of workers were treated with the full range of rays from mercury arc lamps, while there were two control sets, one irradiated with similar lamps from which the shorter ultra-violet rays were cut off, and the other untreated. In the clerical and factory workers there was no difference between the treated and untreated groups with regard to sickness absence, but in respect of colds there was actually a significant advantage to the untreated subjects. In the case of coal miners, both groups of treated men had a significant advantage over the untreated controls in respect of sickness and total absence. There was, however, evidence that the previous health of the untreated group had not been so good, and they were not a random sample. In all groups the person treated with the shorter ultra-violet rays did not differ significantly from those irradiated but not receiving these rays. This report is a valuable contribution in 'debunking' a form of treatment which was becoming very popular in industry with no evidence to support it.

K. M. A. Perry.