

## Book Reviews

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*The First Ten Years of the World Health Organization.* Geneva: World Health Organization, Palais des Nations, 1958; pp. viii + 539. Illustrated with photographs, maps and charts. 25s.

This book (the author or authors unmentioned) is introduced by a foreword from Dr. Marcolino G. Candau, the Director-General of the World Health Organization. Part I describes the evolution of international public health, and Part II the establishment of the World Health Organization. Part III is devoted to a review of the Organization's history during the past ten years.

For centuries the spread of epidemics from one country to another has been a matter of concern to the nations of the world. International conferences were held from 1851 onwards to stop the great epidemic visitations of plague and cholera (particularly those in the Levant) and to lessen the danger of their spread to Western Europe. In the initiation and organization of these conferences Great Britain, the pioneer in public health, took a leading part.

An international conference in Venice in 1892 gave rise to the first Sanitary Convention followed by others in Paris in 1803, 1912 and 1926. Important stages in this history were the setting up of the Sanitary Maritime and Quarantine Board of Egypt and the Office International d'Hygiène Publique in Paris in 1907. The office did much to prevent the spread of cholera by pilgrims to the holy places of Arabia. It also supplied epidemiological data and information to the fifty countries of the world signatory to the International Sanitary Convention of 1926, and secured international agreement on many problems of disease. In the New World co-ordination of information on epidemic diseases and their control was begun when the Pan-American Sanitary Bureau was created by an International American Conference in 1901 and organized by the first Pan-American Sanitary Conference in 1902.

After the First World War disease was prevalent in many parts of the Continent, and particularly in Eastern Europe, where typhus fever threatened to spread. An Epidemic Commission was formed through the League of Nations National Council in 1920, which organized a successful system of health defence and control.

The Health Organization of the League of Nations began in 1921, and its constitution was finally adopted by the fourth Assembly of the League in 1924. Its work up to 1939 was most successful. It established close relations between the health services of various countries, served as a bureau of information on public health questions, and helped to secure agreement for international action in public health affairs.

When the Second World War ended, there were three world-wide governmental organizations concerned with international health work. The most active was the United Nations Relief and Rehabilitation Administration (UNRRA). Though its existence was brief, its labours controlled European epidemics, averted famine, and supplied a temporary urgent need. There were also the Paris Office and the residue of the Health Organization of the League of Nations. In July 1946 a World Health Conference was held in New York, after which the World Health Organization (WHO) was constituted and established.

WHO is therefore the result of more than a hundred years of increasingly effective co-operation in health by the nations. It has inherited the experience and methods of a number of earlier international health bodies, and took over their services in

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international quarantine, biological standardization and other subjects. Its organization operates in six regions of the globe. As was inevitable, it has encountered difficulties and set-backs, but the record shows that it is steadily moving towards its objective, which is the attainment by all peoples of the highest possible level of health.

In the checking of epidemics WHO has been endowed with the triumphs of recent medical research for preventing and treating disease, unknown to earlier international organizations. Here may be mentioned especially the antibiotics, immunization against bacterial and virus diseases and the insecticides against vectors of malaria, typhus, etc. The chapters on malaria, virus diseases, tuberculosis, nutrition and atomic energy in relation to health are of special interest.

In this important book, well illustrated and produced, WHO has given a commendable account of faithful stewardship during its ten years of existence.

ARTHUR S. MACNALTY

*Alexander Gordon, M.D., of Aberdeen.* IAN A. PORTER, M.B., CH.B. Edinburgh: Oliver & Boyd, 1958; pp. xii+92. Illustrated. 12s. 6d.

It is commonly supposed that evidence pointing to the transmission of an infectious agent to women in labour by those attending their confinements was first brought to light by Oliver Wendell Holmes of Boston, U.S.A., and, a few years later, by Semmelweiss of Vienna.

But in fact the credit for recognition of this important landmark in obstetrics would seem to belong rather to Alexander Gordon, who practised in Aberdeen fifty years before Holmes produced his classical paper (1843)—in which, incidentally, he frankly acknowledged Gordon's earlier work.

Dr. Ian Porter has made a valuable contribution to the history of obstetrics by reviewing the scanty knowledge (and the speculations) about puerperal fever before Gordon's time: by telling us the circumstances in which Gordon made his observations and also a good deal that has not been known hitherto about Gordon himself.

Briefly the story of his puerperal fever work may be summarized as follows: he studied some seventy-seven cases (twenty-eight fatal) occurring in a period of fourteen months in and around Aberdeen, most of them in their own homes. In many of them puerperal fever had followed delivery by a doctor (sometimes Gordon himself) or a midwife who had been in contact with another febrile obstetric case. It was on this association, so often repeated, that Gordon based his hypothesis. Erysipelas complicated the puerperal fever in some cases, and it was unusually prevalent in non-obstetric patients during the same period. Recovery, in early cases of puerperal fever, sometimes followed vigorous bleeding and/or purging, but even in cases so treated the mortality was high.

LEONARD COLEBROOK

*Sir Charles Bell, His Life and Times.* SIR GORDON GORDON-TAYLOR and E. W. WALLS. E. & S. Livingstone Ltd., 1958; pp. 288, with 50 illustrations. 42s.

Strangely enough, this is the first full-length biography of Sir Charles Bell. From the 'letters', written to his brother George and published in 1870 by Lady Bell, and from