omtrent 25% van alle tireoidkankers uit. Pogings met x-straal bestraling word aangewend.

Die diagnose van die drie groepe spreek duidelik uit 'n oorsig van die Massachusetts-hospitaal wat 180 behandelde karsinoom-
gevale oor 20 jare dek:

<table>
<thead>
<tr>
<th>Gediffereniseerd:</th>
<th>5 jaar</th>
<th>10 jaar</th>
<th>20 jaar</th>
</tr>
</thead>
<tbody>
<tr>
<td>Papillêr (49 gevale)</td>
<td>A 73%</td>
<td>60%</td>
<td>45%</td>
</tr>
<tr>
<td>Follikulêr (45 gevale)</td>
<td>B 71%</td>
<td>48%</td>
<td>24%</td>
</tr>
<tr>
<td>Ongediffereniseerd:</td>
<td>(45 gevale)</td>
<td>C 17%</td>
<td>17%</td>
</tr>
</tbody>
</table>

Hoe diagnosteer ons tireoid-kanker?

1. Harde knobbels: maar kanker van die skildklier hoeft nie noodwendig hard aan te voel nie. En andersyd mag 'n kolloide krop onder spanning gevul wees en daardie selfverdedigende reactie in die krop op die skildklier se oorafgekomte. Die enkelvoudige nodules, soos die van Ba edow se siekte: is daarin 'n matige toediening van hierdie jaar... en dan nei die groot probleem gestel van die skildklier bly dit moontlik dat nodulere krop oorte steeds verpligend vir chirurgiese behandeling behoort te kry. Vir die nodulere krop bestaan daar bowendien geen mediese behandeling nie.

III. NODULERE KROP EN HIPERTIREOIDE

En nou laaste vraagstuk van hierdie tema: hipertireoide word door nodulere kropsoorte. 'n Nodulere krop mag vir baie jare, of vir altyd non-tokiele bly. Dis glad nie selders nie. So 'n krop na 15 of meer jare eers toekomsverskynels gee nie. Neiging om selfverdedigend deur eie die krop te openbaarmaken, soms met hartspierkade, soos daadlik sal blyk, is 'n faktor van betekenis.

Van ons sal op twee beelde van toekomsstel let:

(a) Hier het ons 'n vooraf patologiese skildklier wat hiperaktief word met 'n vooraf normale kardio-vaskulêre stelsel. Die beeld wat ons kry in 'n floue afgeteel van die symptome en teken wat ek aanvanklik bespreek van die hierdie toestand (a) tus en hierdie toestand (b) vereenvoudigings van die skildklier. Nuwer as 'n jaar... en dan lei hy tot onherstelbare skade. Hierdie toestand van amper 'n jaar word tot tachikardie as gevolg van geringe oor-aktiviteit van die krop. "Tireo-toksiese fibrilasie" staan dus hier op die voorgrond. Hierdie skade-effek aan die hartspier of vaatstelsel deurgemaak het. Maar die feit bly, dat ook nadat die patiënt omgeskep is van die diffusse krop na die skildklier, die siekte ooraf as nuttig is. Dis dan nie onbeweeglik nie. Dis dan nie afdoende nie. Afdoende word die diagnose klinies eers beklyn as die volgende bykom:

6. Infiltratiewe groei.
7. Dispnee.
8. Gewigswes.

U sien dus dat al die spekifieke kliniese-diagnostiese kenmerke van kanker van die skildklier as gevorderde teken van hierdie siektetoestand moet geld (met uitsondering alleen van die papillêre tipe in jongere jare)

Is dit te versoeker dat die groot statistieke vir ons toon dat van histologies erkende karsinoom van die skildklier slegs 45% van gevale vooraf karies as rustic erken was. Daarmee word ons vir die groot probleem gestel van die interpretasie van enige nodules in die skildklier.

Wat hierdie probleem betref, is dit 'n vruglikheid, maar ek slegs voorgespoed aan wat die kwesbare kardiovaskulêre stelsel en behandelings skade tot tand kom. Hierdie bereiklik mag voordoen. Die kenmerk hier is Die krop be taan daar bowendien geen mediese behandeling nie.

Gedifferensieer,

verpligend chirurgiese behandeling behoort te kry. Vir die nodulere krop bestaan daar bowendien geen mediese behandeling nie.

Terapie by Noduliere Tokiele Krop

As 'n nodulere krop toekomsverskynels gee (hot nodule) is sy hipertireoide effekte somtjies medikamenteus te onderdruk, maar dikwels minder suksesvol as by die diffuse krop.

MINUTES OF A MEETING OF THE FEDERAL COUNCIL OF THE MEDICAL ASSOCIATION OF SOUTH AFRICA, HELD AT DURBAN ON 11, 12 AND 13 SEPTEMBER 1957

Following are the minutes of a Meeting of the Federal Council of the Medical Association of South Africa, held at B.E.S.I. Hall, Old Fort Road, Durban, on 11, 12 and 13 September 1957.

Present:
Border Branch: Dr. J. K. McCabe, Dr. R. Schauffer.
Cape Midlands Branch: Dr. A. P. Albert, Dr. L. E. Lane, Dr. R. A. Moore-Dyke.
Cape Western Branch: Dr. J. C. Coetzee, Mr. J. A. Currie, Dr. J. S. du Toit, Dr. M. Helman, Mr. J. D. Joubert, Mr. T. B. McMurrray, Dr. J. A. S. Marr, Dr. P. F. Oats, Dr. A. G. Paterson, Dr. J. H. L. Shapiro, Dr. A. W. S. Siche! Dr. L. Slabbert, Dr. A. A. Zabow.
East Rand Branch: Dr. E. M. Harem, Dr. M. Segal, Dr. E. W. Turton.
Griqualand West Branch: Mr. N. Kretzmar.
Kwazulu Coastal Branch: Dr. A. Broomberg, Dr. S. Disler, Dr. H. Grant-Wylie, Dr. N. A. Rossitter, Mr. A. G. Sweetapple, Dr. A. B. Taylor.
Natal Inland Branch: Mr. B. A. Armitage, Dr. T. H. Whitlitt.
Northern Transvaal Branch: Dr. J. H. Casewell, Dr. C. M. Grundlingh, Dr. J. H. Struthers, Dr. W. Waks, Dr. F. Ziady.

O.F.S. and Basutoland Branch: Dr. F. Hagen, Dr. D. Serfontein, Dr. R. Theron, Dr. G. F. C. Troskie.

Transvaal Branch: Dr. C. Adler, Dr. A. L. Agnanat, Dr. N. E. C. de la Hunt, Mr. W. Girdwood, Dr. J. Glanwine, Dr. S. C. Heymann, Dr. H. Penn, Dr. T. Radloff, Dr. L. S. Robertson, Dr. T. Schneider, Dr. M. Shapiro, Dr. L. O. Vercueil, Mr. J. Wolfowitz.

South-West Africa Branch: Dr. W. E. K. Loening.

Vaal River Branch: Dr. W. Chapman.

In Attendance: Dr. A. H. Tonkin (Secretary), Dr. L. M. Marchand (Associate Secretary), Dr. P. D. Combrink (Assistant Secretary, Transvaal).

Observer: Dr. T. Shadick Higgins (Editor).

WEDNESDAY, 11 SEPTEMBER

The Secretary declared the meeting open at 10.20 a.m. and, reminding members that this was the first meeting of a new triennium, invited nominations for the post of temporary Chairman. It was proposed by Dr. Sichel, seconded by Dr. Broonberg, that Dr. Schaffer be temporary Chairman. There were no other nominations and Dr. Schaffer was declared elected and took the Chair.

1. Notice Convening the Meeting, published in the Journal of 3 August 1957, was taken as read.

2. Nominations: The Secretary announced proxies as follows: Dr. W. E. K. Loening to act for Dr. W. H. G. Kushe; Dr. A. H. Tonkin to act for Dr. A. Landau; Dr. J. S. du Toit to act for Dr. J. H. Dommisse; Dr. R. A. Moore-Dyke to act for Dr. M. A. Robertson.

Apologies were noted from Dr. L. L. Alexander, Dr. A. Landau, Dr. M. A. Robertson and Dr. L. R. Solomon.

A telegram of good wishes from the President and members of the East Rand Branch was also read and noted.

3. Introduction of New Members: Dr. Schaffer asked that some members of the Branches introduce new members of Council.

Dr. Sichel introduced Drs. J. C. Coetzee, M. Helman, P. F. Oates, A. G. Paterson, J. H. L. Shapiro, L. Slabbert and A. A. Zabow, representing the Cape Western Branch. Dr. Agranat introduced Mr. W. Girdwood and Drs. N. E. C. de la Hunt and H. Penn, representing the Southern Transvaal Branch. Dr. Struthers introduced Drs. J. H. Casewell and C. M. Grundlingh, representing the Northern Transvaal Branch. Dr. Grant-Whyte introduced Mr. A. S. Sweetapple, representing the Natal Coastal Branch. Dr. Theron introduced Dr. F. Hagen, representing the O.F.S. and Basutoland Branch. Mr. Armitage introduced Dr. T. H. Whitissit, representing the Natal Inland Branch. Dr. Turton introduced Mr. D. E. Mackenzie, representing the East Rand Branch. Dr. Lane introduced Drs. A. P. Albert and R. A. Moore-Dyke, representing the Cape Midlands Branch. Dr. Schaffer introduced Dr. J. K. McCabe representing the Border Branch, Mr. N. Kretzman representing the Griqualand West Branch, and Dr. W. E. K. Loening representing the South-West Africa Branch.

4. Election of Chairman of Council: Dr. Schaffer called for nominations.

Dr. Sichel said that it gave him great pleasure to propose Dr. Struthers to be Chairman of Council. This was seconded by Dr. Schneider. There were no other nominations, and Dr. Schaffer declared Dr. Struthers to be duly elected. He referred to the service which Dr. Struthers had rendered to the Association during the past years, and congratulated him on his appointment.

Dr. Schaffer thanked the members for the confidence shown in him, and referred particularly to Dr. Sichel whom he thanked for the work done by Dr. Sichel and the high regard in which he was held by all. At the conclusion of his address, Dr. du Toit called for a vote of thanks to Dr. Sichel, which was Carried by members rising amid Acclamation.

5. Gift from the British Medical Association: Dr. Struthers referred to the recent visit of Dr. Wand, the Chairman of Council of the British Medical Association, and to the gift which he had brought from that Association in the form of a gavel and block of wood from a mulberry tree which stood in the grounds of the B.M.A. House which had been built on the site of the home and garden of the author Charles Dickens. He asked Dr. Sichel to report further in regard to this matter.

Dr. Sichel stated that he had received the gavel from Dr. Wand on behalf of the Association and had expressed to him the Association's appreciation of this gesture of goodwill.

Dr. Sichel went on to thank the President and the immediate Past President for their kind remarks, and in expressing his thanks he particularly mentioned the work which Dr. J. H. Harvey Pirie had done in remaining on Federal Council in the role of immediate Past Chairman of Council for a period of twelve years in spite of illness and a desire for rest. He praised Dr. Pirie's diligence and loyalty, and proposed that a vote of thanks be passed to him. This was seconded by Dr. Gluckman and Carried with Acclamation.

6. Election of Vice-Chairman of Council: The Chairman called for nominations for this position.

Mr. McMurray proposed Dr. Turton and was seconded by Dr. Ziady.

Dr. M. Shapiro proposed Dr. Schaffer and was seconded by Mr. Wolfowitz. Dr. Schaffer said that he would not wish to put his name forward, but he would prefer Dr. Turton to be elected.

A ballot vote was taken, Drs. Lewis Robertson and Combrink acting as scrutineers. As the result of the count, the Chairman announced that Dr. Turton had been elected Vice-Chairman of Council. Carried with Acclamation.

Dr. Turton expressed thanks for the confidence shown by Council in electing him as Vice-Chairman and said that he hoped he would be able to carry out his duties and assist the Chairman as far as possible.

Election of Vice-President/President-Elect: Dr. M. Shapiro proposed Dr. Schaffer and was seconded by Mr. Sweetapple. There were no other nominations and Dr. Schaffer was declared elected, amid Acclamation.

Dr. Schaffer thanked the Council for the honour bestowed on him, which he felt was also an honour to his Branch.

8. Appointment of Honorary Treasurer: The Chairman called for nominations.

Dr. du Toit proposed Mr. Joubert and was seconded by Mr. Armitage. There were no other nominations and Mr. Joubert was declared elected as Honorary Treasurer.

9. Appointment of Secretary of Council: Dr. Vercueil proposed Dr. Tonkin and was seconded by Dr. Gluckman. It was Agreed with Acclamation that Dr. Tonkin continue as Secretary of Council.

10. Election of Executive Committee: Council was reminded that it was usual that not more than three members of the Executive Committee be elected from any one Branch, and that in addition to the five ex officio members of the Committee, five were to be elected.

The nominations received were as follows: Mr. Currie was proposed by Dr. Sichel, seconded by Mr. McMurray; Dr. M. Shapiro was proposed by Dr. Gluckman, seconded by Mr. Wolfowitz; Mr. Armitage was proposed by Dr. Disler, seconded by Dr. Whitissit; Dr. Ziady was proposed by Dr. Waks, seconded by Dr. Casewell; Dr. Broonberg was proposed by Dr. Rossiter, seconded by Dr. Disler; Dr. L. S. Robertson was proposed by Dr. Agranat, seconded by Dr. Vercueil; Dr. Schaffer was proposed by Dr. Sichel, seconded by Dr. Struthers; Dr. Theron was proposed by Dr. Sichel, seconded by Dr. Troskie; Mr. Sweetapple was proposed by Mr. McMurray, seconded by Mr. Marr.

A ballot vote was taken, Mr. McMurray and Dr. Combrink acting as scrutineers.

During the count, the Chairman announced that certain additional Annexures to the Agenda had been tabled and that as they had not been scrutin by the Executive Committee, permission was sought from Council for them to be handed out.

The relevant papers were: (a) a memorandum from the General Practitioners' Group for information only; (b) a memorandum concerning negotiations between the Mines Benefit Society and the Southern Transvaal Branch; (c) a memorandum on the forth-
coming conference concerning ophthalmologists and optometrists which had apparently emanated from the Transvaal Sub-Group of the Ophthalmological Society. Council Agreed that the papers be distributed.

The Chairman stated that the ballot vote had resulted in Mr. Currie, Dr. Robertson, Dr. Schaffer and Dr. Theron being elected as the Executive Committee. There had been a tie between Dr. M. Shapiro and Mr. Armitage. A further ballot vote was taken. As a result of this vote, the Chairman declared Mr. Armitage to be elected. Acclamation.

11. Election of Federal Ethical Committee: The relevant By-Law was read and the Chairman called for nominations. Dr. Schneider was proposed by Dr. Robertson, seconded by Dr. Vercueil; Dr. Robertson was proposed by Dr. Agranat, seconded by Dr. Gluckman; Dr. Broomberg was proposed by Dr. Rossiter, seconded by Mr. Armitage; Dr. Sichel was proposed by Dr. Theron, seconded by Dr. Vercueil; Dr. Lane was proposed by Dr. Robertson, seconded by Dr. Schaffer; Dr. J. H. L. Shapiro was proposed by Dr. Zabow, seconded by Dr. Slabbert; Dr. Troskie was proposed by Mr. Currie, seconded by Dr. Hagen. Dr. Robertson asked permission to withdraw his name. Agreed. By-La was read and the Chairman called for nominations.

12. Election of Central Committee for Contract Practice: The Chairman explained the method of election of this Committee which had been decided by Council members previously, whereby the individual Branches, through their Federal Councillors, nominated members to this Committee on a proportionate basis.

Dr. Sichel announced that the Cape Western Branch members nominated Mr. McMurray, Dr. J. H. L. Shapiro, Dr. Zabow and Dr. Robertson; Dr. Agranat stated that the Southern Transvaal Branch members nominated Mr. Girdwood, Dr. Vercueil, Dr. L. S. Robertson and Dr. Gluckman; Dr. Taylor stated that the Natal Coastal Branch nominated Dr. Broomberg and Dr. Rossiter; Dr. Ziday announced that the Northern Transvaal Branch nominated Dr. Casewell and Dr. Lawrence; Dr. Schaffer announced that the Border Branch members nominated Dr. Alexander; Dr. Theron stated that the O.F.S. and Basutoland Branch members nominated Dr. Serfontein; Dr. Turton announced that the East Rand Branch members nominated Mr. Mackenzie; Dr. Lane stated that the Cape Midlands Branch members nominated Dr. Albert. The Chairman pointed out that the smaller Branches were entitled to three representatives, and he suggested that one of these be appointed from the Vaal River Branch. Only one other nomination, that of Mr. N. Kretzmar, was received.

The Chairman then announced that the persons nominated as above were declared elected and that no ballot vote would be necessary.

Dr. Sichel suggested that the Committees which had been elected should meet during the sessions of Federal Council in order to elect their own Chairmen. Council Agreed.

13. Election of Parliamentary Committee: The Chairman asked whether Council would agree that the Committee be composed as before, of the Executive Committee members in the Transvaal together with the Federal Council members in Pretoria.

Dr. Sichel pointed out that during the Parliamentary Session it was usual for the Executive Committee members in Cape Town to act on behalf of the Committee, should any representations have to be made to Parliament. It was proposed by Mr. Wolfowitz, seconded by Dr. Waks, that an additional member of the Southern Transvaal Branch and of the East Rand Branch be elected to the Committee. On being put to the vote, this was Lost by 21 votes to 23. Council Agreed.

14. Minutes of the Meeting held in Johannesburg on 27, 28 and 29 March 1957, were Confirmed and Signed, on the proposal of Dr. Gluckman, seconded by Dr. Agranat.

15. Honours: As a matter of urgency, it was requested that consideration be given at this stage to the award of certain honours, in order that the names of the recipients of awards might be published in the programme for the Opening Ceremony of Congress and the Adjourned Annual General Meeting of the Association. Council Agreed.

The Secretary referred to the Rules for the award of the Bronze Medal, stating that not more than four Medals could be awarded in any one year. He pointed out that two had been awarded at the last meeting of Federal Council in March 1957, and that four nominations had been received for consideration at the present meeting.

Citations were then read in regard to the work and service of Dr. R. Schaffer, Dr. A. Broomberg, Dr. L. O. Vercueil and Dr. R. Theron. After the reading of each citation, a ballot vote was taken. Finally the Chairman announced that Council had Agreed in each case to the award of the Bronze Medal of the Association for meritorious service. Acclamation.

Discussion followed regarding a decision as to which two should receive the immediate award of the Bronze Medal. It was proposed by Dr. Gluckman, seconded by Mr. Wolfowitz, that this be decided by ballot vote. An amendment was proposed by Dr. Sichel, seconded by Mr. McMurray, that the persons concerned should draw lots. On being put to the vote, the amendment was Carried.

As the result of the draw, the Chairman announced that Dr. A. Broomberg and Dr. R. Theron would receive the Bronze Medal in 1957, and Dr. R. Schaffer and Dr. L. O. Vercueil would receive it in 1958. Noted.

16. Emeritus Membership: The Secretary reported that two recommendations for this honour had been received, namely, Dr. J. Drummond of Durban and Dr. C. Martiny of Johannesburg.

The Secretary read the citation in respect of Dr. Drummond and Council Agreed Unanimously that he be elected to Emeritus Membership.

The Secretary stated that no citation had been received for Dr. Martiny, but he read a letter of recommendation which had been submitted by the Southern Transvaal Branch. Council Agreed that Dr. Martiny be elected to Emeritus Membership.

Matters Arising out of the Minutes:

17. Visit of Dr. T. C. Routley: The Secretary reported that Dr. and Mrs. Routley had arrived in the Union and had already attended a number of meetings in various Branches while on their way to Durban. Council noted that Dr. Routley would deliver the Public Address on the Sunday evening preceding Congress and would be present at a number of Congress functions, until the following Wednesday when he would leave for Johannesburg and Pretoria before proceeding to Istanbul to attend meetings of the World Medical Association.

It was reported that the Executive Committee had agreed to recommend to Council that Dr. Routley be asked to convey the greetings and good wishes of the Medical Association of South Africa to the World Medical Association on the occasion of the General Assembly in Istanbul, and had expressed the hope that Dr. Routley might be able to give the Assembly some impressions of his visit to the Union. Council Agreed.

As no member of the Association was to attend the Assembly to represent the Association on this occasion, it was proposed by Dr. Turton, seconded by Dr. Sichel, that Dr. Routley be asked to represent the Medical Association of South Africa. Council Agreed.

Council adjourned for Lunch from 1.5 p.m. to 2.15 p.m.

MINES BENEFIT SOCIETY

18. Mines Benefit Society: The Chairman stated that five representatives of the Mines Benefit Society were present to present their case regarding appointments to the Society. A memorandum on this subject, prepared by the Society, had been circulated, and a report which had been prepared regarding the work of the Liaison Committee representing the Branches in the Mines Benefit Society operated, had been submitted. He asked Dr. Agranat, as Chairman of the Liaison Committee, to present his Report.

Dr. Agranat amplified the Report and stated finally that an impasse had been reached in negotiations and that the whole matter had been referred to Council. The Society had asked that the appointments in the specialities of orthopaedics, gynaeo-
logy and urology be allowed to continue as temporary appoint­ments while negotiations proceeded, at least until 31 October 1957. To this the Committee agreed. It had also agreed that representatives of the Mines Benefit Society should be given the opportunity to present their case to the Federal Council.

The delegation from the Mines Benefit Society was then admitted and welcomed by the Chairman. The members of the delegation were introduced to Council by Dr. L. Adler, and they were Mr. Knox (General Secretary of the Society).

It would not be unethical Medica
to prefer to deal with the Association through the Mines Benefit Societies Medical Officers' Group, but that if this was not possible and

Resolved Nem Con.

Executive Committee had considered the lawyer's letter con­

The Executive Committee had agreed to recommend to Council that the recommendation of the Executive Committee be accepted.

In reply to a question from Dr. Gluckman, the Secretary stated that the correspondence be referred back to the Executive Committee to organize the deputation, with possibly a member from the

Council Agreed.

At the conclusion of the addresses, the Chairman invited members to ask questions of the deputation. A number of questions were asked and answers were given.

The Chairman then called on Mr. Kops to add the final points of the discussion. Mr. Kops did, and he thanked the Council also for receiving the deputation. Acclamation. The Chairman replied suitably to Mr. Kops.

Before the deputation left, Dr. Sichel asked whether the Mines Benefit Society would be willing to form a Liaison Committee with the Association. Mr. Kops replied that the Society would prefer to work with the Association through the Mines Benefit Societies Medical Officers' Group, but that if this was not possible it would be glad to deal with any other Committee suggested by the Association, rather than with any one Branch.

The deputation left the meeting at 4.50 p.m.

The Chairman stated that the matters which had been placed before the meeting were of the highest importance and he sug­

gested that Council meet during the evening and that the evening session be devoted to further discussion on this subject. Council Agreed.

19. Amendment of Article 9: The Secretary reported that the Executive Committee had considered the lawyer's letter con­

The Secretary stated that the Executive Committee had agreed to recommend to Council that the matter be referred back to the Medical Council with the request that Council give a deputation from the Association in order to discuss the whole question; further, that it be left to the Parliamentary Committee to organize the deputation, with possibly a member from the Cape Midlands Branch and the Orange Free State and Basutoland

Branch. Council Agreed.

21. Ophthalmologists and Optometrists: The Secretary stated that the Executive Committee had agreed to recommend to Council that three additional members of the Ophthalmological Society, to be nominated at the Society's Annual General Meeting, be recognized as the Association's representatives to the proposed conference convened by the S.A. Medical and Dental Council. Considerable discussion followed and an amendment was proposed by Dr. Gluckman, seconded by Dr. Birdwood, that the proposed Medical Council conference be postponed.

When put to the vote, the amendment was Lost.

The recommendation of the Executive Committee was then put to the vote and Carried.

22. Legal Defence—Full-time Medical Personnel: The Chair­

man referred to a letter contained in the Annexures to the Agenda, addressed to the Secretary of the Central Health Services and Hospitals Coordinating Council, and to an acknowledgment which had been received stating that the matter was receiving attention. Council Agreed that the correspondence be Noted.

23. Post-operative Care in Medical Aid Society Cases: Dr. Segal submitted the Report of his Ad Hoc Committee and drew attention to two recommendations which had been made. Dr. Segal proposed, seconded by Dr. Schaffer (1) That the surgeon should be responsible for all post-operative care, except in very unusual circumstances; and (2) That it would not be unethical for the general practitioner and the surgeon to agree to a fee for these services.

Further discussion followed and an amendment was proposed by Mr. Wolowitz, seconded by Dr. Gluckman, 'That in the event of a surgeon being unable to complete the after-care following an operation, the general practitioner shall render his own account to the patient. In the event of the patient being a Medical Aid patient, the surgeon shall reduce his fee to the Medical Aid Society to allow for the general practitioner to render his own account to the Society'.

A further amendment was proposed by Dr. M. Shapiro, seconded by Mr. Marr, 'That in the event of a surgeon who has operated on a Medical Aid Society patient delegating after-treatment to another practitioner, the surgeon shall be responsible to the other practitioner for his services on the basis of the Medical Aid schedule of fees for visits, special procedures, consultations etc.'

Following further discussion, this second amendment was withdrawn.

Dr. Vercueil reported that he had discussed this question with the Advisory Council of the Medical Aid Societies and had been informed that the Societies would not pay the general practitioner for any visits to a patient after an operation.

As a result, Council Agreed to refer this matter to the Central Committee for Contract Practice for advice and action.

24. Vaal River Branch: At this stage the President, at the request of the Chairman of Council, presented to Dr. W. Chap­

man an insignia of office of President of the newly-formed Vaal River Branch.

Dr. Chapman, on behalf of his Branch, accepted the insignia and thanked the President accordingly. Acclamation.

25. Transfer of Durban Medical Faculty: The Secretary reported that the Executive Committee recommended to Council that arrangements be made to give evidence to the Select Committee or Commission on the Bill if and when it may meet, and that the question of the appointment of a delegation be left to the Chairman of Council. Council Agreed.

26. Reorganization of the Association: The Chairman informed the meeting that the memorandum on reorganization of the Association had been prepared by Dr. Sichel, and he thanked Dr. Sichel for the amount of work he had put into the preparation of this comprehensive memorandum.

At the Chairman's invitation, Dr. Sichel amplified the suggestions made in the memorandum.

The Chairman then reported that the Executive Committee had not had time to consider the memorandum in detail. Certain suggestions had been made and it was felt that the question should be thoroughly debated by the Executive Committee before the memorandum was placed before Council for discussion.

Council Agreed that the matter be referred back to the Executive Committee for further consideration and report to the next meeting of Council.

27. Medical Council Enquiries: The Secretary stated that the Executive Committee had agreed to recommend to Council that the S.A. Medical and Dental Council be requested to set out its views on this subject in writing for the consideration of Council.

The Chairman explained the procedure which had been suggested by the Executive Committee of the Medical Council, and short discussion followed.

Finally, the recommendation of the Executive Committee was put to the vote and Carried.

28. Visiting Lecturers' Trust Fund: It was proposed by Dr. Grant-Whyte that in view of the present state of the Association's finances, this matter be referred to the Executive Committee for consideration at some later date. Council Agreed.

29. Indigent Litigants: The Secretary stated that the Executive
Council met at 9.15 a.m. The Chairman, Dr. Struthers, pointed out that Council had met for three long sessions on the previous day, and he appealed to members for their co-operation. He particularly asked that the time limit for speakers should be observed. Council agreed. The Chairman stated that he felt that the form of the Agenda should be followed as far as possible, but he added that the Executive Committee would meet at lunch-time in order to discuss the matters raised on the previous evening in connection with the Mines Benefit Society and a report of their meeting would be made after the lunch interval. *Noted.*

**THURSDAY, 12 SEPTEMBER**

Council adjourned at 11.55 p.m.

**Report of Executive Committee**

36. Report of Executive Committee: Dr. Sichel presented the Report of this Committee which had been set out in the Annexures to the Agenda. He stated that Council had met since the last meeting of Council, but that a number of matters had been dealt with by correspondence. These were as follows:—

37. Wholesale Prices of Drugs: The Report stated: ‘The Association was informed that the Council for the Pharmaceutical Trade and Industry had passed resolutions at a meeting on 8 May, 1957. These resolutions were designed to reduce the discount normally allowed to doctors from 35% to 10% where a doctor lived within a radius of five miles from a practising chemist. Members of the Committee were invited to express their opinions which were referred to the Convener of the Sub-Committee for Liaison with the Pharmaceutical Society of South Africa. The Sub-Committee met the representatives of the Council for the Pharmaceutical Trade and Industry, and a further report regarding this meeting will be made at the Federal Council meeting.’ *Noted.*

38. Policy on the Open Panel System: The Report stated: ‘This matter was referred back to the Executive Committee at the last meeting of Federal Council (Minute 46, March 1957) “for instruction as to how this policy can be implemented”. Members of the Committee were asked to express their opinions. These opinions were then circulated again to all members of the Committee for a further expression of opinion. The matter is to be discussed at the meeting of the Executive Committee which will be held in Durban, and any recommendations which may be made at that meeting will be made known to Council on the following day.’

The Secretary read the recommendation of the Executive Committee to Council, ‘That any decisions on this subject be postponed until the newly-appointed Executive Committee should have an opportunity to consider the question at a meeting to be convened as soon as convenient.’

After discussion Council *Agreed* that the recommendation of the Executive Committee be accepted.

39. Advisory Committee to the Workmen’s Compensation Commissioner: The Report stated: ‘A letter was received from the Honorary Secretary of the South African Orthopaedic Association, stating that the Orthopaedic Association had been asked to appoint an honorary advisory committee to assist the Workmen’s Compensation Commissioner when necessary on matters of principle in the evaluation and assessment of permanent disability. It was stated that consultations with this committee would be on questions of general issue or in specific cases presenting peculiar features. The Executive Committee agreed to sanction the appointment of such a committee.’

Council *Agreed* that the action of the Executive Committee be confirmed.

40. Cape Clothing Workers’ Sick Fund: The Report stated: ‘A request was received from the Cape Western Branch that the Cape Clothing Workers’ Sick Fund be allowed to appoint a women gynaecologist on a closed panel basis. The Committee
agreed that in the circumstances this appointment could be allowed.’

Short discussion followed, after which Council Agreed that the action of the Executive Committee be confirmed.

41. Re-organisation of the Association: The Report stated: ‘At the last meeting of Council it was agreed that the question of the orthopaedic services rendered to the S.A.R. & H. Sick Fund should be dealt with by the Central Committee for Contract Practice. The Chairman of the Central Committee for Contract Practice brought to the notice of the Executive Committee the fact that the Railways Sick Fund Board would not negotiate with any body other than the Railway Medical Officers’ Group. This fact has been made known at Federal Council meetings from time to time. The Executive Committee had no objection to this arrangements being continued. The Central Committee for Contract Practice stated that there was at present no power to rescind a resolution of Council. A further letter was received from the Secretary of the Sick Fund, stating that negotiations would only take place after September.’

Council Agreed that this be noted and that the matter would be discussed later in the Agenda.

42. Registration of Optometrists: The Report stated: ‘Members will recall that a memorandum from the Association was presented to the S.A. Medical and Dental Council. Since that time a deputa­tion from the Ophthalmological Association has discussed this question with the Executive Committee of the Medical Council. Eventually the Medical Council decided that a round table conference should take place between representatives of that Council, representatives of the Association and representatives of the Society of Optometrists. This was to have first to have taken place in Pretoria, but later the time and venue were changed to Durban during Congress week. The Executive Committee agreed that the Association’s representatives should be Dr. Sichel and Dr. J. S. du Toit. Both these nominees wish Dr. M. Franks, of Johannesburg, to accompany them.’

Council Noted that this matter had already been dealt with.

43. Re-organisation of the Association: The Report stated: ‘This question was submitted to the Chairman of Council for report to the Executive Committee. The Report will be discussed at the meeting of the Executive Committee to be held on 10 September. A copy is included in the Annexures to the Council Agenda.’ Noted.

It was proposed by Dr. Sichel, seconded by Mr. Joubert and Resolved that the Report of the Executive Committee be adopted.

44. Federal Ethical Committee: The Secretary stated that the Council had not met and that there was nothing to report. Noted.

FINANCIAL STATEMENT

45. Financial Statement by Honorary Treasurer: Mr. Joubert presented his Report and referred members to two documents which had been circulated. He said that in comparing the Estimates for 1957 with the actual state of affairs as found at the end of June, 1957, it had been noted that things were more or less as anticipated. The figures were available if there were any questions.

The Chairman asked Mr. Joubert to state his recommended conclusions.

Mr. Joubert said that he had gone into the possible methods of raising the revenue and of trying to save money. In 1956 the Association had been roughly £3,000 down, and a deficit of £6,900 was estimated for 1957. There was no reason to think that 1958 would be any better. If the subscriptions were raised by £2 2s. 0d., at the end of 1958 the Association would have received £11,550 extra which would then wipe out the accumulated deficit up to the end of 1957 and leave £1,500 to spare at the end of 1958. That did not take into account, however, the fact that if the subscription was not raised by £2 2s. 0d., the Association would be down by a further £7,000 at the end of next year. In other words, said Mr. Joubert, to get back to the state of solvency in which the Association had been in 1955 would take about four or five years at the rate of saving £1,000 a year and making up the deficit of £10,000. The Association also had no assurance that costs would not continue to rise in the immediate future. He pointed out that the realizable assets of the Association amounted to only £19,000 and that if these were to be drained away at the rate of £1,000 a year, they would be gone in 18 months. In these circumstances he could see no alternative but to ask Council to allow the subscription rate to be raised by £2 2s. 0d. per annum as from the beginning of 1958. He moved accordingly and was seconded by Dr. Turton. Prolonged discussion followed, during which time an amendment was proposed by Dr. M. Shapiro, seconded by Dr. Adler, that consideration of the increase in the subscription by £2 2s. 0d. be deferred to the next meeting of Council and By-Laws; was then put to the vote and Lost by 17 votes to 36.

The proposal by Mr. Joubert, seconded by Dr. Turton, That this Council agrees to an increase of £2 2s. 0d. per annum in terms of the Articles of Association and By-Laws, was then put to the vote and Carried by 44 votes to 9.

Council Noted that this matter would come up for confirmation at the next meeting.

The Chairman then informed Council that a resolution had been taken to end the Exchange of Medical Sciences, it was agreed that Federal Council should agree to a reduction of 50% in the increased annual levy applying to members in full-time employment. Members qualifying for this reduction should be approved of by Branch Council.

Discussion followed, and it was pointed out that the amount of subscription paid to the Association by members was not subject to variation. The amount of the subscription payable to Branches did vary from place to place, and it was within the power of a Branch to vary its subscription according to classes of members. In the circumstances reference would only be made to the following order and that no further discussion take place. Council Agreed.

Mr. Joubert then moved the adoption of the Financial Report, seconded by Dr. Turton. This was Carried.

HEAD OFFICE AND JOURNAL COMMITTEE

46. Report of Head Office and Journal Committee: The Chairman of this Committee, Dr. Sichel, presented the Report. He stated that there had been five meetings of the Committee since the last meeting of Council, the average attendance being ten members. All former members of Council had received the Minutes of meetings and so were informed of all that had taken place. In the circumstances reference would only be made to the following matters—

47. Office in Pretoria: The Report stated: ‘The Association’s office in Pretoria is situated on the Seventh Floor of Medical Centre, Pretorius Street, where three rooms have been rented. The Assistant Secretary in the Transvaal, Dr. P. D. Combrink, moved into these quarters during April, and Mrs. M. Esterhuizen was appointed full-time to his staff from 1 May. The volume of work in this office has made it increasingly necessary to give approval to the appointment of a second shorthand typist. Office equipment has been purchased to meet the needs of the staff.’

Dr. Sichel asked whether members had any questions to ask. There were no questions raised.

48. ‘History of Medicine in South Africa’: The Report stated: ‘The printing of this book is at present being carried out in Holland, and the page proofs are being received in this country for proof reading. It is unlikely that copies of the book will be ready in time for the Durban Congress, but it is hoped that they will be on sale before the end of the year. A prospectus and order form will shortly be sent to all members of the Association.’

For the benefit of members who were not aware of all the facts, Dr. Sichel gave a resume of what had taken place up to date. He stated that Council had dealt with the request of Dr. A. Shedrow, Chairman of the South African Medical Journal, the suggested terms of amalgamation were quite unacceptable, and an exchange of letters ended on a friendly note. Noted.

49. ‘South African Practitioner’: The Report stated: ‘An approach was made by the Managing Editor of the South African Practitioner regarding an amalgamation with the South African Medical Journal. The suggested terms of amalgamation were quite unacceptable, and an exchange of letters ended on a friendly note. Noted.

50. ‘Medicine in South Africa—1957’: The Report stated: ‘At the request of Dr. A. Shedrow, Chairman of the South African Medical Journal, the request for the publication of the South African Medical Journal, the suggested terms of amalgamation were quite unacceptable, and an exchange of letters ended on a friendly note. Noted.

51. ‘Medicine in South Africa—1957’: The Report stated: ‘At the request of Dr. A. Shedrow, Chairman of the South African Medical Journal, the request for the publication of the South African Medical Journal, the suggested terms of amalgamation were quite unacceptable, and an exchange of letters ended on a friendly note. Noted.'
Short discussion followed and Council agreed that this item be noted.

51. Visits to Branches: The Report stated: 'Towards the end of June the Secretary visited the Natal Coastal Branch at the request of the Organising Committee of Congress. At the same time he was able to visit Port Elizabeth and the East Rand Branch.

Dr. Sichel said that after his Report had been written, the Secretary had visited the Transvaal. There he had been able to address meetings of the Northern Transvaal Branch and the East Rand Branch.

Dr. Gluckman added that his Branch regretted that it had not been possible to arrange a meeting where the Secretary could address the Southern Transvaal Branch, as the only night available for a meeting had been the same night on which the Northern Transvaal Branch had arranged their meeting with the Secretary.

Council adjourned for lunch from 1 p.m. to 2.35 p.m.

52. Hamilton-Maynard Memorial Medal for 1956: The Report stated: 'It was agreed unanimously that the Hamilton-Maynard Memorial Medal for 1956 be awarded to Dr. Geoffrey Dean, of Port Elizabeth, for his paper entitled "Porphyria, a Familial Disease: Its Diagnosis and Treatment", appearing in the Journal of 21 April, 1956, on Page 377.' Noted with Acclamation.

53. Leipoldt Memorial Medal for 1956: The Report stated: 'It was unanimously agreed that the Leipoldt Memorial Medal for 1956 be made to Mr. H. Braude, of Kroonstad, for his paper entitled "Phenylketonuria", which appeared in the Journal of 28 January, 1956, on Page 83.' Noted with Acclamation.

54. Finance The Report stated: 'The Committee held a special meeting in order to consider a memorandum on the finances of the Association, drawn up by the Honorary Treasurer, Mr. J. D. Joubert. At that meeting the Committee unanimously agreed: "That the Committee is of opinion that we should at this stage be prepared to use Journal profits for general expenditure." It was also agreed: "That this Committee recommends that proceeds from insurance commissions and other agencies be allocated, as before, to general funds." It was agreed that a further special meeting should take place, but at the time of writing this Report this has not been held. Any further recommendation will be made at the time of the next meeting of Council.'

Dr. Sichel then moved the adoption of the Report of the Committee and was seconded by Mr. McMurray.

55. Report of Management Committee of Benevolent Fund: The Chairman of this Committee, Dr. Sichel, reported that there had been two meetings of the Committee since the last meeting of Council. The average attendance had been nine members.

56. Applications for Assistance Dr. Sichel reported that the following applications for assistance had received the attention of the Committee: Mrs. J. C. W. W. (Northern Transvaal Branch)—£10 per month as from 1 June, 1957; Mrs. S. W. K. (Cape Midlands and Cape West Branches)—£180 per annum in two half-yearly instamments commencing in 1957; Mrs. C. E. S. (Royal Medical Benevolent Fund)—£10 per month as from 1 May, 1957. He stated that the Committee sought confirmation of its action in making these grants.

Council agreed that these grants be confirmed.

57. Donations and Legacies: It was reported that a number of donations and legacies had been received and that these had been acknowledged both to the donors and in the Journal. Noted.

The Chairman particularly thanked the Vaal River Branch for the donations which they had made to the Benevolent Fund. He appealed to all members of Council and their colleagues to continue their efforts in raising funds.

At this stage Dr. Troskie stated that the District Surgeons' Group had raised a fund amongst themselves in gratitude for the work of the printer of the new Tariff Book, which had been increasing district surgeons' emoluments. He handed in a cheque for £357 0s. 0d. together with a list of the donors. Dr. Sichel thanked him and asked him to pass on the Committee's thanks to those who had contributed to the Fund. He added that due acknowledgement would be made in the Journal in due course.

Dr. Sichel then moved the adoption of the Report of the Committee. Council agreed that the Report be adopted.

MINES BENEFIT SOCIETY

59. Mines Benefit Society The Chairman reported that the Executive Committee had met informally during the lunch interval and now made the following recommendation to Council:

After considerable discussion, an amendment was proposed by Mr. Wollfowitz, seconded by Dr. Gluckman, 'That the Executive Committee, recognising that the policy of the Association is for "open panels", is instructed to meet the Mines Benefit Society, on the understanding that, pending finality in the negotiations, the Federal Council authorises the Executive Committee to give temporary facilities for medical service to the Mines Benefit Society'.

Further discussion followed and a further amendment was proposed by Dr. Turton, seconded by Dr. M. Shapiro, 'That the Executive Committee of Federal Council will be empowered to offer full services to the Mines Benefit Society until such time as the Medical Association of South Africa has investigated the finances of the members of the Mines Benefit Society as to the average various income groups. This information will determine whether the Federal Council will eventually apply the rule of exceptional circumstances which will apply to Benefit Societies'.

After further discussion, Dr. Turton's amendment was put to the vote and carried with one dissentient vote. It was also carried as the substantive motion.

After further discussion, it was proposed by Dr. McCabe, seconded by Mr. Mackenzie, that the recommendation of the Executive Committee be accepted. This was then put to the vote and short discussion it was proposed by Dr. M. Shapiro, seconded by Dr. Turton and resolved that the letter from the East Rand Branch be noted and that it be referred for information to the Central Committee for Contract Practice.

60. Mines Benefit Societies Medical Officers' Group—Protest Against Curtailment of Groups' Activities: A letter from the Mines Benefit Societies Medical Officers' Group was submitted, in which the Group protested against certain actions of the Federal Council in respect of its action in making these grants. Council agreed that the Secretary should reply to the letter in terms of the resolutions taken at the present session.

61. Income Ceilings for Medical Aid and Benefit Societies: A letter from the East Rand Branch was submitted, containing a resolution reading: 'This Branch Council is in favour of altering the structure of Benefit Societies and strongly recommends that average income ceilings for Benefit Societies are unrealistic and impracticable, and we now recommend that separate ceilings for Benefit Societies and Medical Aid Societies be established and that the principle of average income be abolished.'

Dr. Turton explained what his Branch had in mind, and after short discussion it was proposed by Dr. M. Shapiro, seconded by Dr. Turton and resolved that the letter from the East Rand Branch be noted and that it be referred for information to the Central Committee for Contract Practice.

62. Report of Central Committee for Contract Practice: Dr. Vercueil, Chairman of the Committee, referred to meetings which the Committee had held, and presented his Report which had already been submitted to members as an Additional Annexure to the Agenda. Council agreed that the items be dealt with in due course.
constituted, the old Committee had unanimously agreed to recommend to Council that further negotiations with the Medical Aid Societies be left to the incoming Committee. Council Agreed.

66. Metropolitan Company of S.A. Ltd. Medical Aid Society: The Committee had considered the question of members of the Society being served by the Vanderbijlpark Medical Benefit Fund and now recommend to Council that this problem be referred to the Vaal River Branch for consideration and the subsequent submission of a recommendation to the incoming Central Committee for Contract Practice.

The Chairman of Council stated that the Vaal River Branch had discussed this matter and had decided that the Society should function as an independent Medical Aid Society. This was Noted and Council Agreed with the recommendation of the Committee.

67. Natal Industries Medical Aid Society: It was reported that this Society had also incorporated new firms without the prior approval of the Association. The Natal Coastal Branch had now informed the Committee that the Society was co-operating with the Association. The Committee felt that if this firm was a branch of a parent firm which was a member of the Natal Chamber of Industries Medical Aid Society, it should be permitted for the employees of the branch firm to join the Society, subject to certain minor amendments being made to its rules. The Committee now reported that a satisfactory reply, agreeing to the amendments, had been received from the Secretary of the Society. Noted.

69. Charge for Secondary Operation (Closure of Colostomy) After Previous Abdominal Operation: It was reported that the Committee had consulted the Association of Surgeons for a ruling as to whether the closure of a colostomy was a new operation or part of the after-treatment of a previous operation. The Committee recommended to Council that the closure of a colostomy be regarded as a new operation and not part of the after-treatment of a previous operation, and that it be permissible to levy a fee in respect of the secondary operation. Council Agreed with this ruling.

70. Applications for Approval of New Medical Aid Societies: (a) Associated Employers Medical Aid Society: It was reported that this was an application for a combination of fourteen firms representing 274 members and 375 dependents. Provision had been made for the Society to apply to the Association for further firms, subject to certain conditions which included the obtaining of contingent approval by the Association. Certain minor amendments to the Constitution had been suggested to the Society and these had been accepted. Considerable discussion followed on the question of the income group of the members and also whether Council should agree to a 'conglomerate body' being recognised. Finally Council Agreed to the recommendation of the Committee that the Society be approved, subject to certain minor alterations being made in its rules and the receipt from the Society of an assurance that the average income of its members conformed to the rules of the Medical Association.

(b) Medical Aid Society for the European Employees of the Murley Floor Tile Co. S.A. (Pty.) Ltd. and Frank Wright (Pty.) Ltd. and Associated Companies: It was reported that negotiations had not yet been completed, and therefore Council Agreed to leave the consideration of this application in abeyance until the next meeting of the Central Committee for Contract Practice.

(c) Waverly Gold Mines Medical Aid Society: It was reported that negotiations had not yet been completed, and therefore Council Agreed to leave consideration of this application in abeyance until the next meeting of the Central Committee for Contract Practice.

(d) Northern Assurance Company Ltd. Medical Aid Society: It was reported that this Society had been established for the employees of the Northern Assurance Company. Provision had been made in the Constitution whereby the Society could indemnify a member in respect of fees charged by non-registered persons. On request from the Committee, the Society had since agreed to delete this item from its Constitution. The maximum annual benefits were liberal, viz. £200 in respect of a member as well as £200 in respect of his wife and £75 for each child. Members earning over £2,500 per annum were required to pay private fees and not to represent themselves as ordinary members of the Society.

On the recommendation of the Committee, Council Agreed to grant recognition to this Society in view of the alteration which had been made in its Constitution.

71. Amendments to Constitutions: The Committee recommended to Council that amendments to the Constitutions of the following Societies be approved, pointing out that these amendments did not adversely affect medical practitioners, in that they dealt with administrative matters, increased benefits to members, or brought certain clauses into conformity with the rules of the Association:

(i) Bloemfontein Municipal Employees Medical Aid Society.
(ii) Elwamba Medical Aid Society.
(iii) Metal Box Company of S.A. (Pty.) Ltd. Medical Aid Society.
(iv) Printing Industry Medical Aid Fund.
(v) Federated Employers Medical Aid Society.

Council Agreed that these amendments be Approved.

72. Chamber of Mines Medical Aid Society: It was reported that this Society had agreed to include another constituent body, but that no reply had been received regarding the average income of the employees of the constituent body.

Council Agreed that this matter be left in abeyance until the next meeting of the Central Committee for Contract Practice.

73. S.A.A.M.E. Medical Aid Fund: It was reported that this Society had requested certain rules relating purely to administrative matters, and also for the inclusion of a new clause reading: 'The Fund shall not be liable for any portion of amounts due by a contributor for immunization, treatment or accommodation in respect of any infectious disease, unless the Council in the special circumstances of any case decides otherwise.'

The Committee recommended approval of the rules regarding the administration, but not the rule regarding infectious diseases. The Committee had, however, recommended a clause reading as follows: 'The Fund shall be liable for the treatment in fever hospitals of notifiable infectious diseases, or for immunization where such immunization is provided by the local health authority.' The Society had since advised that it was not prepared to accept the clause as recommended by the Committee, but that it would pay the doctor and obtain a refund from the member.

Considering that this amendment would, therefore, not affect the medical practitioner adversely, Council Agreed to Approve the proposed amendments.

74. General Mining (Associated Companies) Medical Aid Society: Dr. Verey proposed that Council should consider certain amendments submitted by the Society, but that certain further amendments had been submitted subsequent to the meeting of the Committee.

Dr. Verey recommended, and Council Agreed, that this matter be left in abeyance until the next meeting of the Committee.

75. Medical Aid Society of the Federation of Master Printers of South Africa: It was reported that this Society had submitted a complete schedule of the 111 employer members participating in this Society with 926 members and 1,167 dependents. In discussion, doubt was expressed as to whether this Society did not contain persons with high incomes comprising more than the definite percentage allowed by the Association. It was further reported, however, that in the negotiations for approval, the Society had given the assurance that the requirements of the Association had been met by the members. As a result, Council Agreed that this list of employer members be Noted.

76. Medical Account—Natal Industries Medical Aid Society: It was reported that an account rendered to a member of the Society had been in dispute and that the Natal Coastal Branch, which had considered the matter, had ruled that the practitioner was entitled to £71 0s. 0d. and not to the amount of £121 0s. 0d. which he had charged. The practitioner had appealed to the Committee against the ruling of the Branch, claiming that the case had been one of prolonged treatment for extensive abscess of the abdominal wall following an abdominal operation. The Committee supported the action of the Natal Coastal Branch, but referred the matter to Federal Council to take what further action it might deem fit as regards the desirability of referring the entire matter to the S.A. Medical and Dental Council.

It was proposed by Dr. Broomberg, seconded by Dr. M. Shapiro
and Resolved that the action taken by the Natal Coastal Branch be confirmed and that the matter be not referred to the S.A. Medical and Dental Council.

77. S.A.R. & H. Sick Fund—Salaried Pathologist: It was reported that the S.A.R. & H. Sick Fund had advertised for a pathologist in Pretoria, but that the Northern Transvaal Branch had declined the appointment. The Federal Council's policy of 'open panels' and the fact that the services were being rendered at Medical Aid rates less 20% on an open panel basis at the time. Although there was only one firm of pathologists in Pretoria, the Branch had recommended that the Sick Fund should offer the position for a second time. The provision for distinction on a pro rata basis to all such pathologists as may render service, according to the amount of work carried out. The Sick Fund had indicated that it would be willing to appoint more than one practitioner if there were more than one application, but it could not be bound to allow others to participate in the future beyond the needs of the service.

The Committee suggested that as appointments on similar lines had been approved in Johannesburg, the Northern Transvaal Branch should also approve of this post in Pretoria.

Dr. Vercueil, however, stated that only one applicant had applied for the post in Pretoria and the matter was now settled. Noted.

78. Additional Charges for Tests and Procedures Undertaken During Routine Examinations: It was reported that certain specialists had taken exception to the fact that provision had been made in the Tariff to charge an extra fee for microscopic examination of urine, but that other specialists could not do so. The Northern Transvaal Branch had brought this matter to the notice of the Committee, and the Committee, taking into account that there was a Medical Council ruling on this subject, recommended to Council 'That no additional charge should be levied in respect of microscopic examination of urine by any practitioner when carried out as a part of a routine examination, and that the relative item in the Physicians' tariff be deleted.'

Indecisive discussion followed and eventually Council Agreed that the matter be referred back to the Central Committee for Contract Practice for further consideration.

Council adjourned at 6.30 p.m.

FRIDAY, 13 SEPTEMBER

Council met at 9 a.m., Dr. Turton being in the Chair.

79. Stewarts & Lloyds Medical Aid Society: Council was informed of the differences which had arisen between this Society and some of the doctors practising in its area. Dr. Vercueil gave a short résumé of the circumstances and mentioned that the Vaal River Branch had suggested three alternatives: (1) The Society should revert to a Medical Benefit Fund. This would cater only for the lower income group of employees which would take in roughly 50% of the employees, and the Society was not keen on excluding the other 50% from benefits. (2) They should employ full-time doctors with whom the Society may make some arrangement to employ six part-time doctors at a salary of approximately £2,000 per annum, to deal with their members. (3) The Society should remain a Medical Aid Society but be allowed to exclude some doctors whose accounts had been consistently very high in proportion to the number of members they had treated.

Discussion followed and eventually Dr. Vercueil informed Council that at a meeting of the Vaal River Branch held on 19 August, 1957, the following resolution had been adopted: 'That Stewarts & Lloyds Medical Aid Society should remain a Medical Aid Society with the right to limit their panel of medical practitioners in consultation with the Medical Association of South Africa'.

Further discussion followed and the resolution noted above was moved by Dr. Chapman, seconded by Dr. Vercueil. On being put to the vote, this was Carried with two dissentient votes. Dr. M. Shapiro, however, requested that their votes be recast against this resolution.

80. Sasol Medical Benefit Society: Dr. Vercueil reminded members that what had once been a Medical Aid Society in Sasolburg had been changed to a Benefit Society on account of the unionizing of the employees of the Sasol Medical Aid Society in the town. More trouble had arisen in this instance, mainly due to the fact that some of the medical practitioners would not keep to regular consulting hours and would not advertise the hours at which they normally consulted. The Committee of the Society now wished either to appoint three full-time medical practitioners or three part-time medical practitioners to carry out the work of the Society.

The whole question was thoroughly discussed, and it was proposed by Dr. Vercueil, seconded by Dr. Waks, 'That as special circumstances pertain at Sasolburg, Federal Council allows the Sasol Medical Benefit Society to appoint three or four part-time general practitioners with limited private practice, and that the position be reviewed after two years'.

An amendment was proposed by Dr. M. Shapiro, seconded by Dr. Heymann, 'That it be recommended to the Sasol Medical Benefit Fund to appoint three or four part-time general practitioners with limited private practice, and that the position be reviewed after two years'.
agree to this and therefore recommended to Council 'That neurosurgeons' reduced fees for repeat procedures remain unchanged'.

(ii) Item for Visual Field Charting: In the negotiations leading up to the compilation of the Tariff, the Ophthalmological Society of South Africa had objected to the item in the tariff for neurosurgeons, by which a fee for visual field charting had been laid down. It was considered that this was part of the ordinary consultation and should not be charged for separately. The Committee recommended to Council 'That visual field charting should be part of the ordinary consultation and that neurosurgeons should not levy a separate charge therefor'.

(iii) Maximum Fee for Pre-Operative Procedures: Repeated efforts had been made by the Medical Aid Societies to obtain some relief in the fees charged for an item in the tariff for neurosurgeons, by which a fee for arteriography was provided. The fees charged for this investigation were fixed so as to keep the total cost of the case to a maximum of £100. 0s. 0d.

The Committee recommended to Council that the schedule as suggested by the Group be accepted. This advice had been received too late to be included in the Tariff book.

(iv) Note re Assistants: The Committee recommended to Council 'That the Note appearing in Section M (iv) regarding Assistants should be deleted from the existing Tariff as it is covered by Section U.' This Note referred to the remuneration of a second assistant.

(v) Remuneration of Assistants: The Group of Neurologists, Psychiatrists and Neurosurgeons had agreed to the recommendation that the schedule as now appearing in the Book should remain unchanged.

(e) Section T: Item for Introduction of Lipiodol: The Medical Aid Societies had drawn attention to the fact that the fee for this item in the Physicians' tariff was £5 4s. 0d. and in the Thoracic Surgeons' tariff the fee was £7 10s. 0d. The Committee recommended to Council 'That in Section T the fee for this item remain unchanged at £7 10s. 0d.'

Council Agreed.

83. Complaint from the Pollock Group Medical Aid Society: It was reported that a complaint had been received from this Society in regard to the attitude towards the Society by the Honorary Secretary of the Southern Transvaal Branch. The Committee had agreed to recommend to Council that this complaint be referred to the Southern Transvaal Branch and that the Secretary be informed accordingly. Council Agreed.

84. Proposal by Dr. L. L. Alexander regarding Benefit Society Matters: It was reported that the Committee had considered a proposal by Dr. Alexander 'That all Benefit Society matters should be dealt with by the Central Committee for Contract Practice in the same way as Medical Aid Society matters, especially in view of the fact that numerous queries and requests come to the Committee in connection with Benefit Societies'.

The Committee recommended to Council 'That Branch Councils should be empowered to refer Benefit Society matters to the Central Committee for Contract Practice if they so desire. Once, however, a problem has been referred to the Central Committee for Contract Practice, it should not be entirely out of the hands of the Branch Council concerned'.

After discussion, it was proposed by Dr. Zabow that the words 'until referred back to the Branch Council' be added to the Committee's recommendation. Council Agreed accordingly and the recommendation was carried as amended.

86. Loyal St. George Lodge: It was reported that the Cape Western Branch had agreed to the appointment of one medical practitioner to serve the 100 non-European members of this Lodge, but that the Branch required the concurrence of Council before the appointment could be made. Council Agreed accordingly.

BLOOD TRANSFUSIONS

87. Fees for Blood Transfusion: It was reported that the Committee had received a deputation from the S.A. Blood Transfusion Service to discuss fees for blood transfusions. Representatives of the Pathologists' Group had also been present. Discussion had taken place on the basis of the points contained in a memorandum prepared by Dr. Bell, the Chairman of the S.A. Blood Transfusion Service, a copy of which had been submitted to members of Council. As a result of the discussion, the Committee had agreed to recommend to Council:

(i) That, as many members of the profession were not aware of the fact that free ante-natal services were provided by the Government, mention of this fact should be made in the new Tariff Book.

(ii) That it be specified in the new tariff book that plasma produced by blood voluntarily donated in South Africa costs £3 per unit as against £8 10s. 0d. per unit for the imported commercial product.

(iii) That the following tariff of medical fees for blood transfusions be accepted:

(a) Transfusions of blood or plasma.

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Fee per Unit</th>
</tr>
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<tbody>
<tr>
<td>Under 3 years of age</td>
<td>£2 12s. 6d.</td>
</tr>
<tr>
<td>3 to 18 years of age</td>
<td>£2 12s. 6d.</td>
</tr>
<tr>
<td>Over 18 years of age</td>
<td>£3 11s. 6d.</td>
</tr>
</tbody>
</table>

(b) Compatibility tests.

The fee to be £2. 0s. 0d. for compatibility tests.

(c) Exchange Transfusions.

No definite recommendation re the reduction in the fee for exchange transfusions from £25 0s. 0d. to £12 10s. 0d. was adopted, but the Committee agreed to bring this matter to the notice of Federal Council. As Dr. Shapiro had raised various points which were not included in Dr. Bell's memorandum he was requested to draw up a further memorandum to include these points. The Assistant Secretary (Trans-vaal) was instructed to forward both memoranda to the Cape Western, Border, Cape Midlands, Natal Coastal and Natal Inland Branches and at the same time to inform these Branches of the decisions made by the Committee. This would enable these Branches to discuss the matter with the Paediatric Sub-Groups in their areas which in turn would enable the Federal Councillors representing these Branches to present the point of view of the Paediatricians when the matter is considered by Federal Council.

N.B. No discussion was held on the fees of Benefit Societies, Medical Aid Societies or private patients. In the case of donors and their dependants who are not insured for medical services by a benefit or medical aid society or insurance fund, the operator's fee shall be charged and the service at the rate of two-thirds of the above schedule.'

After making his report, Dr. Vercueil suggested that Dr. M. Shapiro should amplify what had already been stated.
This Dr. Shapiro did in an address which was noted with acclamation.

Dr. Vercueil then read a resolution which had been received from the Cape Western Branch, as follows: 'That the fees for the groupings, iso-matching and administration of blood should remain at their present level in the Cape Western area, except in the case of paediatricians whose fees should be increased as laid down at their Annual General Meeting in 1956'.

The question of exchange transfusions, which had been referred to the Paediatricians' Group, was then commented on by Dr. Heymann, and discussion on this aspect followed.

After further discussion on this general subject, it was proposed by Dr. Struthers, seconded by Dr. Heymann and Unanimously resolved 'That Council considers that the comprehensive service for blood transfusion such as exists in the S.A. Blood Transfusion Service is the best type of service. As there is no comprehensive service in the Cape, Federal Council suggests no alteration in the fees'.

A further resolution, proposed by Dr. Gluckman and seconded by Mr. Wolfowitz, was then put to the vote and Carried unanimously. The resolution read: 'That Item (i) [re free ante-natal services provided by the Government be not published in the Tariff book but in the Journal.'

88. Adoption of Report of Central Committee for Contract Practice.

Dr. Vercueil said that before he moved the adoption of the Report, he would like to express his thanks to the members of the Committee for the work they had done. He reminded members that with the production of the new Tariff book the fees for specialists would be binding for at least three years, unless there should be a considerable rise in the cost of living. He said also that he wished to thank the doctors and general practitioners who had attended meetings of the Committee in order to assist in the formulation of tariffs. He also thanked Dr. Marchand and Dr. Combrink for their services.

Mr. Currie rose to propose a vote of thanks to Dr. Vercueil for his able Chairmanship of the Committee and for the admirable way in which he had presided over its meetings. Acclamation.

Mr. Wolfowitz raised the question of the Traduna Medical Aid Society, and it was Agreed that this matter be referred to the Central Committee for Contract Practice for discussion.

Dr. M. Shapiro referred to the dissatisfaction amongst general practitioners in Johannesburg where, he stated, the benefits of the new Tariff were negligible.

Dr. Vercueil then moved the adoption of the Report of the Committee. This was Carried unanimously.

S.A.R. & H. SICK FUND

89. Orthopaedic Services to S.A.R. & H. Sick Fund: The Chairman informed members that consideration of this question had been deferred until the meeting could be addressed by Mr. C. T. Möller.

Mr. Möller was then invited to address Council.

After reviewing the history of the establishment of the orthopaedic services to the Railway Sick Fund, Mr. Möller referred in detail to the recent differences of opinion which had arisen between the Orthopaedic Surgeons' Group and the Sick Fund. Mention was made of the decisions which Federal Council had taken in this regard, and it was pointed out that at its last meeting Council had agreed that further negotiations should be conducted by the Central Committee for Contract Practice. The Sick Fund Board had not agreed to this proposal and had stated that it was prepared to negotiate only with the Railway Medical Officers' Group.

At the conclusion of Mr. Möller's address, the Chairman asked members whether they had any questions to put to Mr. Möller. A number of questions were asked.

Council adjourned for lunch from 1.7 p.m. to 2.25 p.m.

On resuming, the Chairman pointed out that there was still a large amount of business to be attended to, and it was proposed by Mr. Currie, seconded by Dr. Zabow, that Council sit that night. Council Agreed.

Further questions were then asked of Mr. Möller and replies given.

When there were no further questions, the Chairman thanked Mr. Möller for having addressed Council and having answered questions. He stated that Mr. Möller might remain at the meeting during the discussion of the next item if he so wished.

Dr. Turton said that he felt it was necessary at this stage to draw attention to Minute 21 of the Council meeting held at Vereeniging in April, 1956, in which Council had agreed that the orthopaedic appointments being made to the Railways Sick Fund should be temporary for a period of one year and that they be re-advertised after that period. This was Carried, that the main opposition to the Railway appointments had come from the Southern Transvaal Branch and that he had reported to Council that the Branch had eventually agreed that there were special circumstances attaching to the appointments whereby 'exceptional circumstances' were recognised in favour of closed panel appointments being made in so far as orthopaedic appointments were concerned.

It was then proposed by Dr. M. Shapiro, seconded by Dr. Heymann, 'That future negotiations with the Railway Sick Fund shall be at the level of the Federal Council'.

Further discussion followed, and eventually it was proposed by Dr. Gluckman, seconded by Mr. Wolfowitz and Agreed that the motion be put.

On being put to the vote, the proposal by Dr. M. Shapiro was Carried.

It was then proposed by Mr. Schaffer, seconded by Dr. Turton, 'That the present holders of orthopaedic appointments be requested to continue their service until such time as negotiations with the Railway Sick Fund have been concluded and conditions for future services are approved by Federal Council. Should Federal Council not be satisfied that a suitable agreement has been arrived at, Federal Council will decide what shall be done.'

Further discussion followed and eventually it was proposed by Mr. Wolfowitz, seconded by Dr. Gluckman and Agreed that the question be put.

On being put to the vote, Dr. Schaffer's proposal was Carried with three dissentient votes.

It was then proposed by Mr. Wolfowitz, seconded by Dr. Gluckman, 'That an ad hoc committee be set up to conduct negotiations with the S.A. R. & H. Sick Fund, such committee to include representatives of the Railway Medical Officers' Group'. On being put to the vote, this was Agreed.

It was proposed by Dr. M. Shapiro, seconded by Mr. Wolfowitz and Resolved that the Committee should consist of Dr. L. S. Robertson, Dr. Turton and representatives of the Railway Medical Officers' Group.

PRESENTATIONS

90. Presentations to Dr. A. W. S. Sichel and Dr. J. S. du Toit: At this stage of the meeting, the President, Dr. H. Grant-Whyte, paid tribute to Dr. Sichel and Dr. du Toit for the work which they had done for the Association over many years. On behalf of the members of Council he presented to Dr. Sichel a silver tea service and a leather brief case, and to Dr. du Toit he presented a silver and glass soup service. Acclamation.

Both the recipients expressed thanks for the gifts and for the tributes which had been paid to them.

PARLIAMENTARY COMMITTEE

91. Report of Parliamentary Committee: Dr. Struthers, Chairman of the Committee, presented his Report, stating that the Parliamentary Committee had met on several occasions since the last meeting of Council and had dealt with a number of issues.

92. Meeting with Ad Hoc Committee of S.A. Medical and Dental Council: It was reported that as the recent amendment to the Medical, Dental and Pharmacy Act of 1928 had removed certain doubt as to the validity of the Council's Ethical Rules, the Parliamentary Committee had met a special ad hoc committee of the Council on 6 June, 1957, to discuss possible changes in certain of these Rules.

A number of recommendations for the consideration of Federal Council were submitted. Council Accepted the recommendations of the Committee.

93. Remuneration of Doctors—Third Party Insurance: It was stated that the Commission appointed by the Government to investigate the Third Party Insurance Act had completed its Report without finding it necessary to take any evidence from interested parties. In view of this fact and after consideration of a memorandum submitted by Dr. J. G. A. du Toit and Dr. P. D. Combrink on this subject, the Committee recommended to Council that no further action be taken by the Association. Council Agreed.
94. Native Laws Amendment Act: It was reported that in view of the alterations which had been made to Section 29 of the Act and in view of a letter which had been addressed to the Association by Dr. Carel de Wet, M.P., the Committee recommended to Council that no further action be taken. Council Agreed.

95. Natal Motor Transport Ordinance: It was reported that the Natal Coastal Branch had sought the assistance of the Committee in connection with the medical examination of prospective drivers, as these persons were at present being diverted to the Addington Hospital and the King Edward VIII Hospital for examination. It was noted that the Traffic Department had attempted to have a panel of private practitioners appointed but had met with no concrete action. As the Ordinance laid down that an applicant for a licence should submit himself for examination to ‘a medical practitioner nominated by the Officer-in-Charge of the Bureau,’ the Committee felt that this was a matter which should be taken up with the Provincial authorities by the Augmented Executive Committee for Natal. It recommended accordingly. Council Agreed.

96. Deduction of Membership Subscription to Association from Total Income by Doctors for Income Tax Purposes: It was stated that the Commissioner for Inland Revenue had been interviewed by the Assistant Secretary (Transvaal) and had consented to allow all doctors, whether in private practice or in full-time employment, to deduct their Association subscription from their total income for income tax purposes. Noted.

97. Income Tax Concession in Relation to Post-Graduate Overseas Study Tours: The Committee reported that the proposed concessions, as contained in its last Report to Council, had been accepted by the Commissioner for Inland Revenue and the Minister of Finance, and that an official letter from the Commissioner might be expected in the near future.

Dr. Gluckman raised a point in regard to courses of study which might be taken in one place and an examination conducted in another. Council Noted the report and Agreed that the matter raised by Dr. Gluckman be referred to the Parliamentary Committee for discussion.

98. Remuneration of Part-time Medical Officers in Employ of Department of Defence: It was reported that an exchange of letters had taken place between the Committee and the Department of Defence in regard to this matter. The Secretary for Health had also been approached in order that the question of the remuneration of part-time doctors employed by the Union Department of Health might be increased.

Council Noted the matter was still under negotiation.

99. Remuneration of Part-time Medical Officers Rendering Services at Clinics Run by Various Local Health Authorities: Council was reminded that this matter had originally been raised by the Society of Medical Women. The scale of part-time salaries for general practitioners and specialists was submitted, and it was reported that the Committee had interviewed the Secretary for General Practitioners and Specialists and the Minister of Health to discuss these scales. For various administrative reasons, Dr. le Roux could not be persuaded to recommend an increase in the scales. He had, however, informed the Committee that a minimum of 85% of the work performed by the incumbents of these posts was in connection with tuberculosis patients, and in view of this fact the Committee now recommended to Council that the matter be not pressed. Council Agreed.

100. Temporary Appointments: It was reported that a letter had been addressed to the Registrar of the S.A. Medical and Dental Council, in which the Committee recommended on behalf of the Association the following:

- ‘When a medical post is advertised, the period of notice provided for in the contract must be of sufficient length of time to enable a new appointment to be made in that time. Should the post, for any reason, be suddenly vacated, the Association would have no objection to a locum tenens being appointed temporarily to fill the vacant position; the unexpired period of notice provided for in the contract.’

Council Agreed with this recommendation.

101. Adoption of the Parliamentary Committee Report: Dr. Sichel proposed a vote of thanks to the Parliamentary Committee and to its Chairman and the Assistant Secretary (Transvaal) for the considerable amount of work which had been done in connection with the various matters mentioned above.

Dr. Struthers pointed out that the work had been made a great deal easier by the appointment of the Assistant Secretary (Transvaal). He then moved the adoption of the Report. This was Carried.

102. Report of Workmen’s Compensation Act Sub-Committee: Dr. Verceil, as Chairman of this Committee, stated that the Committee with a few co-opted members representing various national Groups, had met the Workmen’s Compensation Commission in order to discuss certain items in the new Tariff book. He submitted a lengthy Report covering all the aspects of the discussion which had taken place. These were Accepted by Federal Council.

Mr. MacKenzie moved the adoption of the Report, seconded by Dr. Patterson. This was Carried.

103. Election of Workmen’s Compensation Act Sub-Committee: It was proposed by Dr. Turton that the new Sub-Committee consist of Dr. L. O. Verceil, Dr. C. M. Grundlingh, Dr. J. H. Case­well, Dr. M. Segal and Mr. J. Wolfowitz. Council Agreed.

104. Report of Sub-Committee on Rehabilitation: It was reported that the Sub-Committee was at present drawing up a suitable memorandum on the subject of expert medical assistance in rehabilitation projects in sheltered employment. Noted.

After short discussion it was proposed that Dr. C. Adler consti­tute the Sub-Committee with power to co-opt. Council Agreed.

Report of Sub-Committee to Advise Controller of Imports: It was reported that a letter had been received from the Chairman of the Pharmaceutical Advisory Committee, stating that import control had been relaxed and that it would be unnecessary to continue with the detailed screening of applications for currency permits for the importation of new ethical pharmaceutical preparations. A letter had also been received from the Controller of Imports and Exports, expressing the thanks and appreciation of his Department to the Committee for services rendered.

Dr. Sichel proposed that the Sub-Committee be discharged. Council Agreed that the Sub-Committee be discharged with thanks to Dr. Sichel and the Sub-Committee for the work which they had done. Acclamation.

105. Report of Sub-Committee on Groups within the Association: Dr. Waks presented this Report, and after referring to discussions which had taken place he stated that the Sub-Committee now recommended to Council that the following clause be added to its original memorandum: ‘Notwithstanding anything contained here­tofore, Federal Council shall be empowered to delegate to a Group the right of negotiation on a particular issue, provided that no decision arrived at shall be binding unless and until this is approved of by Federal Council.’

In the discussion which followed, Dr. M. Shapiro moved the previous question, seconded by Mr. Wolfowitz. On being put to the vote, this was Lost.

The recommendation of the Sub-Committee was then put to the vote and Carried.

106. Sub-Committee on Medical Fees for Private Practice: In the absence of Dr. Landau, Chairman of the Sub-Committee, Mr. Currie presented the Report, stating that since the last meeting of Council the Committee had received from the Cape Town Division of the Cape Western Branch a schedule of fees pertaining to general practitioners. The schedule was submitted to Council, and the Committee recommended that it be forwarded to the S.A. Medical and Dental Council for information. Mr. Currie stated that all schedules of fees received to date had been forwarded to that Council after approval by Federal Council. Council Agreed accordingly.

As the main purpose of the Sub-Committee had been fulfilled, it was recommended that the Sub-Committee be discharged. Council Agreed that the Sub-Committee be discharged. A vote of thanks to the Sub-Committee was proposed by Dr. Struthers, seconded by Mr. MacKenzie. Council Agreed.

107. Sub-Committee for Liaison with Dental Association of South Africa: Dr. Schneider, the Convener, reported that there had been no meetings of the Sub-Committee. Noted.

On the suggestion of Dr. Struthers, Council Agreed that Dr. Schneider and Dr. L. S. Robertson would act as the new Sub­Committee.

108. Sub-Committee for Liaison with S.A. Nursing Association: Council Noted that there was no Report from this Sub-Committee. It was Agreed that the Federal Council representatives of the Northern Transvaal Branch would continue to act as the Sub­Committee.
PHARMACEUTICAL MATTERS

110. Sub-Committee for Liaison with Pharmaceutical Society of South Africa: The Convener, Dr. Verwey, presented the Report of this Sub-Committee. He referred first to the proposal by the Council for the Pharmaceutical Trade and Industry to reduce the discount allowed to doctors on ethical preparations, and said that he felt that Federal Council should lodge an objection with that Council against this resolution.

Dr. Sichel referred to the Executive Committee's report on this subject. A member, who stated that he was a dispensing doctor in an urban area, pointed out that the majority of his patients were non-Europeans and that the cost of medicines supplied was part of his consultation fee.

It was proposed by Dr. M. Shapiro that the Council for the Pharmaceutical Trade and Industry be informed that this Federal Council would view with grave concern the implementation of the proposals submitted to the Medical Association with regard to the cost of drugs to doctors, and that unless they repudiate these proposals, the Association will not discuss the matter with them.

On being put to the vote, this was Carried.

Later, in regard to the Pharmaceutical Society of South Africa, Dr. M. Shapiro reported that there should be no further negotiations with the Society unless they repudiated any objection with the proposal of the Council for the Pharmaceutical Trade and Industry. Council Agreed.

As a result of the reading of a letter from the Society, Dr. M. Shapiro appointed the Sub-Committee to Renegotiate.

After discussion Dr. M. Shapiro proposed that a Vigilance Committee be appointed in regard to pharmaceutical matters, instead of the Sub-Committee for Liaison with the Pharmaceutical Society of South Africa. Council Agreed. Council further Agreed that the members of the Vigilance Committee should be Dr. E. W. Turton, Dr. A. L. Agranat and Dr. L. O. Verschu"el.

On the suggestion of the Chairman, Council Agreed that the questions put to the Pharmaceutical Society of South Africa in a letter dated 11 June, 1957, and the replies to those questions received in a letter dated 17 June, 1957, should be included in the Minutes for general information. The matter referred to is the proposal by the Council for the Pharmaceutical Trade and Industry to reduce the discount allowed to doctors, contained in a resolution passed by that Council at a meeting in Cape Town. The questions and answers are as follows:-

(a) Whether or not your Society was a party to this resolution, or alternatively

(b) Whether or not your Society has representation on the Council for the Pharmaceutical Trade and Industry, and so on.

(c) Whether or not your Society's representatives on the Council supported the resolution.

Answers:

(a) My Society was not called upon to consider the resolution before it was adopted by the Council for the Pharmaceutical Trade and Industry.

(b) The Society is represented on the Council.

(c) The resolution was unanimously adopted and was supported by our representatives. It was subsequently reported to the Society's General Council and enjoys the wholehearted support of the Pharmaceutical Society of South Africa.

111. Sub-Committee to Enquire into Medical Education and Internships: The Convener, Mr. McMurray, requested that his Report be held over until the next meeting of Council as his Committee was still in the process of gathering information. Council Agreed that Mr. McMurray and Mr. Joubert be re-appointed as members of the Sub-Committee.

112. Report of Augmented Executive Committee in Transvaal: The Chairman of the Committee, Dr. Struther, presented this Report in which it was stated that there had been several meetings of the Committee since the last meeting of Council. Council Agreed that the matters in the Report be dealt with seriatim.

113. Hospital Appointments: It was reported that the Director of Hospitals in the Transvaal had advised the Committee that his Administration reserved the right, in exceptional cases, to fill clinical medical posts without advertising. Correspondence had taken place regarding this decision, and in view of the probable alteration by the S.A. Medical and Dental Council of its Ethical Rule 19, making the advertising of all clinical medical posts compulsory, the Committee recommended to Council that this matter be left temporarily.

114. Rates of Pay for Interns in Provincial Hospitals: After reporting on this matter in so far as the Transvaal Province was concerned, Dr. Struther informed Council that the matter was now before the Central Health Services and Hospitals Co-ordinating Council and that nothing further could be done at present.

NOTED.

RADIOGRAPHIC SERVICES

115. Provision of Radiographic Services by Province to Department of Health: It was reported that the Provincial Administration in the Transvaal was continuing to provide a radiographic service to the Union Department of Health, and that objections had been raised to this service on the grounds that it constituted unfair competition with radiologists in private practice and because the service was incomplete. Having considered the matter, the Committee recommended to Council that no further action be taken, as the service provided was part of the health service to the community as a whole and that difficulty would be experienced by private radiologists in accommodating a large number of non-European patients in their practices.

Dr. Gluckman referred to a letter from the Southern Transvaal Branch on this subject.

On being put to the vote, the Committee's recommendation was Carried.

116. Appointment of Part-time Radiologists in Radiological Departments of Johannesburg General Hospital: It was reported that the Director of Hospitals had been interviewed by Dr. Struther and two representatives of the Radiological Society. The Director had pointed out that he agreed in principle with the making of mixed part-time and full-time radiological appointments at the Hospital, but that until the new Hospitals Ordinance had been passed, it would be impossible to create the necessary establishment. Accordingly the Committee recommended to Council that no further action be taken until such time as the new Hospitals Ordinance became effective. Council Agreed.

117. Fees Paid by Private Patients for Radiological Services Obtained in Provincial Hospitals, with Special Reference to the Two Teaching Hospitals in Johannesburg and Pretoria: It was reported that this matter had been discussed with the Director of Hospitals and that the Director had stated that he agreed in principle that it was right that the fees paid by private patients should accrue to medical men. As no action could be taken until such time as the new Hospitals Ordinance became effective, the Committee recommended to Council that no further action be taken at this stage. Council Agreed.

118. Ambulance Services Outside Municipal Areas: Council was reminded that this matter had been referred to the Augmented Executive Committee at the last meeting of Council as it was considered to be a matter for discussion with the Transvaal Provincial Administration.

After preliminary investigation it had revealed the many difficulties which would be experienced in negotiating with the numerous Local and Central Authorities at present responsible for ambulance services in the various areas, the Committee had reached the conclusion that the proposal could only satisfactorily be solved if the Provincial authorities were to take over all ambulance services. Accordingly the Committee recommended to Council that no further action be taken until such time as the new Hospitals Ordinance became effective. Council Agreed.

119. Treatment of Mines Benefit Society Patients in Provincial Hospitals: It was reported that a recommendation had been made by the Committee that Mines Benefit Society patients should be accommodated in the Bethel Hospital as hospital cases, and that a local panel doctor was acting as recommending officer. The Director of Hospitals and the Secretary of the Hospital Services Department had been interviewed and the Committee had been informed that it was possible to have the relative regulations so changed as to enable the Hospitals Department to remove from the list of recommending officers any person who did not exercise his powers in a fit and proper manner. It was suggested that the Association could itself solve this problem by recommending recommending officers of this fact. This was Noted by Council.

120. Staffing of New South Rand Hospital: It was reported that
the Southern Transvaal Branch had requested the Committee to approach the Provincial Administration with a view to general practitioners having the opportunity of participating in the clinical work of this hospital in many of its departments; also, that provision would be made for all doctors to be allowed to treat private cases in the hospital as did their colleagues in Pretoria and the Plattielland. It was reported that in an interview with the Director of Hospitals it had been stated by the Director that he could see no reason why the requests of the Association could not be met. It was probable that 200 beds would be set aside for hospital patients and approximately 165 beds for private patients. Later it had been stated only 120 beds might be required for teaching and that a further 80 beds would become available for private patients. It was reported that the Director of Hospitals had agreed in principle to the idea of general practitioners being on the staff of the hospital.

Some discussion followed, and eventually Council Agreed that this item be Noted.

121. Facilities for the Treatment of His Private Patients in the General Hospital by a Non-European Doctor: It was reported that a non-European doctor practising in Pretoria had been refused permission to treat patients in a non-European ward, owing to the fact that the ward was in the charge of a European nursing sister. As this was no longer the case, the doctor had requested his application. The doctor had been advised to persist in his application to the Pretoria Hospital Board and that if the necessary permission was withheld, he should lodge an appeal against the decision with the Administrator.

122. Treatment of Mental Hospital Patients in Public Hospitals: It had been reported to the Committee that whereas Mental Hospital patients, who had required treatment in a public hospital, had previously been admitted as Departmental patients under a private doctor, they were now being admitted as hospital patients with a recommendation form issued by the Superintendent of the Mental Hospital concerned. Investigation had shown that these patients were entitled to free treatment if they were normally resident in the Province and provided that all the other requirements relating to the admission of a patient as a hospital patient were complied with. It was explained that a 'Departmental patient' was one who, by virtue of his employment in the service of any Department of State, was entitled to medical or hospital treatment at the expense of such Department. Mental Hospital patients did not come into this class.

In the circumstances the Committee recommended to Council that no further action be taken. Council Agreed.

Dr. Struthers then moved the adoption of his Report, which was Carried.

THE EXECUTIVE COMMITTEE

123. Appointment of New Augmented Executive Committee in the Transvaal: After short discussion, Council Agreed that the new Committee consist of Dr. J. H. Struthers, Dr. E. W. Turton, Dr. Lewis S. Robertson, Dr. F. Zuday, Dr. M. Shapiro and Mr. D. E. Mackenzie.

124. Report of Augmented Executive Committee in the Cape: The Chairman of the Committee, Dr. Sichel, reported that there had been no meetings of the Liaison Committee between the Medical Association and the Administration since the last meeting of Council.

The question of the termination of the honorary system of medical staffing of the hospitals in Port Elizabeth had not yet been settled.

Dr. Albert elaborated on the memorandum which his Branch had submitted, and it was reported that the Director of Hospital Services in the Cape had stated that he had received no complaints from the men who were dissatisfied and from the Livingstone Hospital Board, and that as soon as he received something from them he would be prepared to act.

Dr. Sichel then moved the adoption of his Report, which was Carried.

125. Appointment of New Augmented Executive Committee in the Cape: Council generally Agreed that the new Committee should consist of Dr. A. J. M. Routley, Dr. H. W. Plattel, Dr. J. A. Currie, Dr. R. Schaffer, Dr. L. E. Lane and Mr. N. Kretzmar.

126. Report of Augmented Executive Committee in Natal: Council Noted that there was no Report from this Committee.

It was Agreed that the Natal Augmented Executive Committee in the future would consist of Dr. H. Grant-Wyate and Mr. B. A. Armitage.

127. Report of Augmented Executive Committee in Orange Free State: The Chairman of the Committee, Dr. Theron, presented this Report and stated that at last the Provincial Administration had given the Medical Association representation on the Boards of Provincial Hospitals. In each area there would be two representatives of the Association appointed by the Administrator from a panel of names to be submitted. Noted.

Council Agreed that Dr. Theron should act for the Executive Committee in the Orange Free State and that he have the power to co-opt members of his Branch Council when necessary.

Council adjourned for dinner from 6.15 p.m. to 8.30 p.m.

ECONOMICS OF MEDICAL PRACTICE

On resuming, Dr. Struthers was in the Chair.

129. Sub-Committee on Economics of Medical Practice: Dr. Struthers drew attention to the Report of this Sub-Committee which had been published in the Journal, and for the sake of new members of the Council he gave a brief résumé of what had taken place during the last few years. He asked Dr. Turton to continue the explanation of the scheme as put forward by the Committee.

Dr. Turton moved the adoption of the Report of the Sub-Committee, which was Carried.

The Chairman then suggested that a vote be taken in regard to the principles embodied in the Plan as submitted. This was done and it was Carried with two dissentient votes.

Dr. Struthers moved the adoption of the Report of the Sub-Committee, which was Carried.

130. Appointment of Sub-Committee on Economics of Medical Practice: The Chairman proposed that the Federal Council members of the Southern Transvaal Branch should constitute the Sub-Committee, with powers to co-opt. After short discussion, Council Agreed.

131. Serving of Tea: Dr. J. H. L. Shapiro proposed a vote of thanks to the ladies who had provided morning, afternoon and, on two occasions, evening tea, for members of Council. This was accorded with Acclamation, and Dr. Shapiro was asked to convey the thanks of Council personally to the ladies concerned.

At the request of the Chairman, Dr. Turton then took the Chair, and Council Agreed that only such matters as were urgent and important should be considered during the rest of the evening session. Dr. Turton stated that the matters remaining on the Agenda would be taken seriatim and Council would decide whether to deal with them or refer them to the Executive Committee for attention. Council Agreed.

132. S. A. Medical Congress, Durban, 1957: The Chairman of the Organising Committee, Dr. Bloemagne, reported that arrangements were well in hand. He made a number of announcements and appealed to members to support the Trades Exhibition and take as much interest in it as possible. He said that he and his Committee were confident that the Congress would be a very happy gathering.

Dr. Bloemagne's report was Noted with Acclamation.

133. "Medical Centres": A letter from the Registrar of the S.A. Medical and Dental Council was submitted regarding buildings which were being used for consulting room purposes and named
A HISTORY OF MEDICINE IN SOUTH AFRICA

Messrs. A. A. Balkema have issued a prospectus of Dr. Edmund H. Burrows' book which they are publishing—"A History of Medicine in South Africa to the end of the 19th Century". Sponsored by the Medical Association, the authoritative work may be regarded as the official history of medicine in South Africa. The prospectus sets out in detail the contents of the 18 chapters of the book and remarks that its 480 pages contain over 200 biographies of South African medical practitioners of earlier days, and is documented with nearly 2,000 references from over 300 different sources.

The story is written in an interesting style, often as colourful as a historical novel, and the work is well printed and well illustrated and contains maps and many hitherto unpublished historical photographs. The price of the book bound in cloth will be 42s., but members of the medical association are entitled to copies in special de luxe binding at the preferential price of 25s.