

teach at both undergraduate and postgraduate levels. Experience of the application of the different specialties can be identified and it is not unlikely that needs can be matched with means.

A prerequisite to a balanced curriculum of medical education is the recognition that no single specialty is at present adequately covered and in consequence no subject can be adequately taught.

THE HOPEWELL HYPOTHESIS

ON 9 OCTOBER 1761 the ship *Hopewell* arrived at Halifax with between two and three hundred immigrants destined to settle in Nova Scotia. Many of these were of Scottish extraction who had sought to escape oppression of the Presbyterians during the reign of James I by migrating to Ulster, and the group of immigrants became known as the 'Ulster Scots'. From a first settlement in Colchester County, Nova Scotia, descendants of this immigrant group have spread throughout North America.

During the last 20 years Bode and Crawford observed a number of families in which nephrogenic diabetes insipidus was prevalent among patients seen at the Massachusetts General Hospital, and noticed that many of these claimed descent from the original settlers of Nova Scotia. This observation led to a study of the genealogies of families known to have been aboard the *Hopewell* and into the folklore surrounding the 'water-drinkers'. Both folk-legend and genealogical evidence strongly suggest X-linked transmission of the trait.

Thus historical and medical research can meet and complement one another. In this instance the observation was made at a general hospital but the next might as easily be made in a general practice. It may well be that practitioners in the British Isles or in Canada can carry this story further, adding more to our knowledge not only of nephrogenic diabetes insipidus but perhaps also identifying other conditions which may be associated with it. This fascinating paper in the *New England Journal of Medicine* (280, 750-754) 3 April 1969 is a challenge to us.

MATERNAL DEATHS AND MATERNITY SERVICES

THE current triennial Report on Confidential Enquiries into Maternal Deaths in England and Wales¹ relating to the years 1964-1966 brings together interesting items of background information relating to the maternity services. The birth rate, which had been rising since 1955, reached a peak of 18.8 in 1964 and fell steadily to 18.0 in 1966, a fall which continued after the review period to 17.2 in 1967. This was so complete a reversal of trend that it fell in three years by more than it had risen in the previous five.

The number of first births, which had been rising for several years, continued to do so. On the other hand second births, rising until 1964, fell in 1965 and remained at the same level in 1966. Third and subsequent births each reached a peak in 1964