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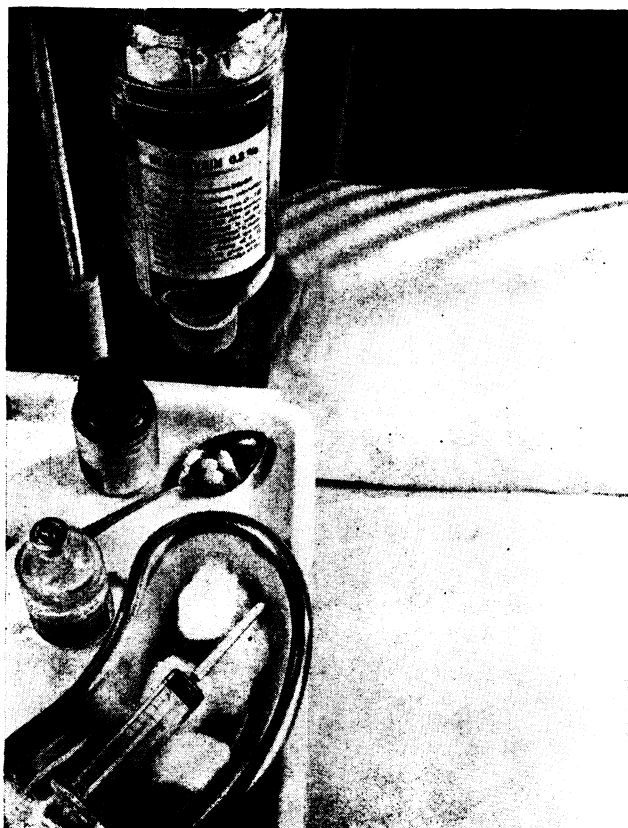
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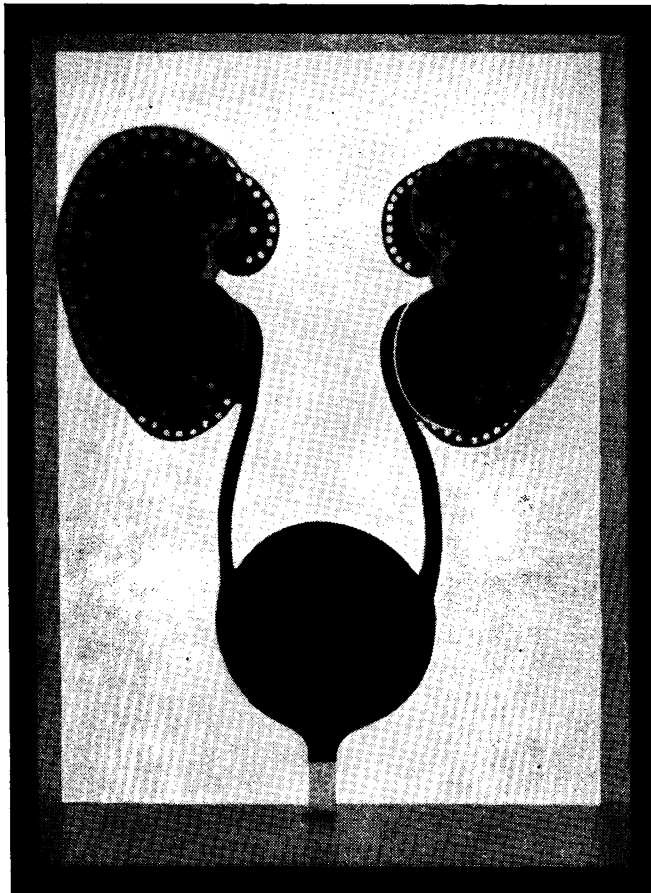
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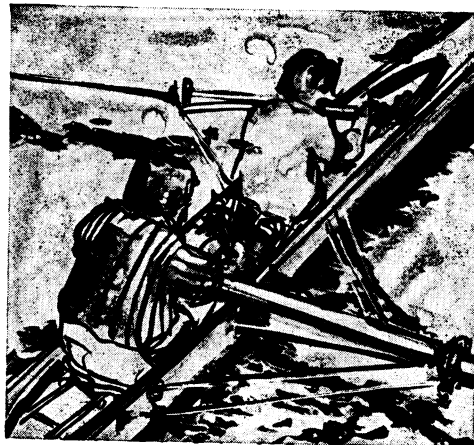
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such as LW/57, WP/60, and SS/61, descriptions were published in the *Newsletter* or *Journal* even though no pathogenic bacteria or viruses could then be isolated.

In order to discover those doctors who would contribute reports or take part in other investigations, a voluntary notification form was introduced in 1958, printed at the end of each issue of the *Journal*. On this and through the Unit, the 'haves' can communicate with the 'have nots'; those with affected patients or with access to wanted specimens can be put in touch with research workers elsewhere who need information or access to patients or a supply of material for pathological studies.

At the suggestion of Dr J. C. McDonald, the unit started in 1957 a series of enquiries relating to congenital abnormalities. Eventually a register of about 10,000 reports was collected which is still open for study by any research workers in this field. In 1962 a further register was started of any unexpected toxic or other reaction in a patient or offspring which the family doctor considered had followed the use of any therapeutic agent. Two years later, when the Committee on Safety of Drugs was set up, all the information in the College register was transferred to that committee.

During the last three winters the unit has helped to locate doctors who were willing and able to join a serologically-controlled study of a new antiviral drug. For obvious reasons the work had to be done during epidemics of influenza—not a time when most general practitioners can take on anything extra. In the latest epidemic over 70 doctors took part.

A compliment was paid to the idea behind the college unit when a member of the British Veterinary Association, Mr Colin Gould, in 1962 set up their Clinical Observation Unit among practising veterinary surgeons, which has completed a number of successful investigations. Both units would like to develop closer collaboration but this awaits the help of more enthusiasts among both doctors and vets with ideas or observations and the energy to pursue these to successful conclusions.

There is a limit to what a lone doctor or a lone vet can study within the ambit of one practice or the duration of a single season. For the study of transient epidemics or seasonal disorders, or conditions which are regionally variable, large populations and a research team of many observers are needed. The Epidemic Observation Unit is one of the ways, the earliest, by which this need of college members has in part been met. All readers of the *Journal* are reminded to look at the notices of the unit and are invited, whenever possible, to participate in current investigations by completing the notification form at the end of each issue. Better still, report your unusual epidemics or other puzzling cases and you may be put in touch with other doctors—equally puzzled—who could help you to study your mutual problems.

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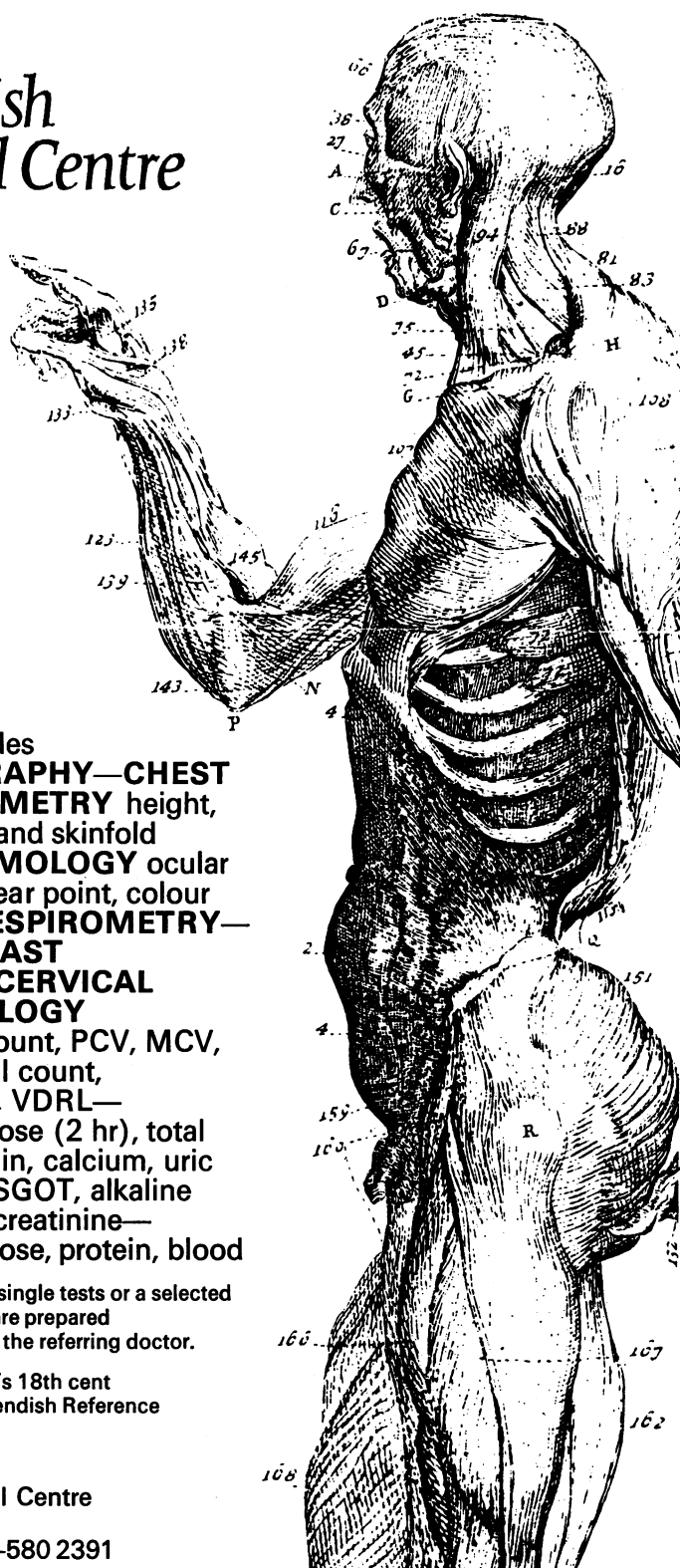
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These are the descriptive titles given by one author\* to two main groups of enuretic children. The 'soaker and waker' he describes as timid and apprehensive, though often intelligent. The 'saturated sleepers' are madcaps or tomboys who overexert themselves physically and mentally; they are often defiant and misinterpret attempts at control as lack of love. They are distinguished by their behaviour — 'Those in the first group awake, howling, immediately after wetting the bed. Those in the second group having exhausted themselves, sleep deeply and do not awake till the morrow'.

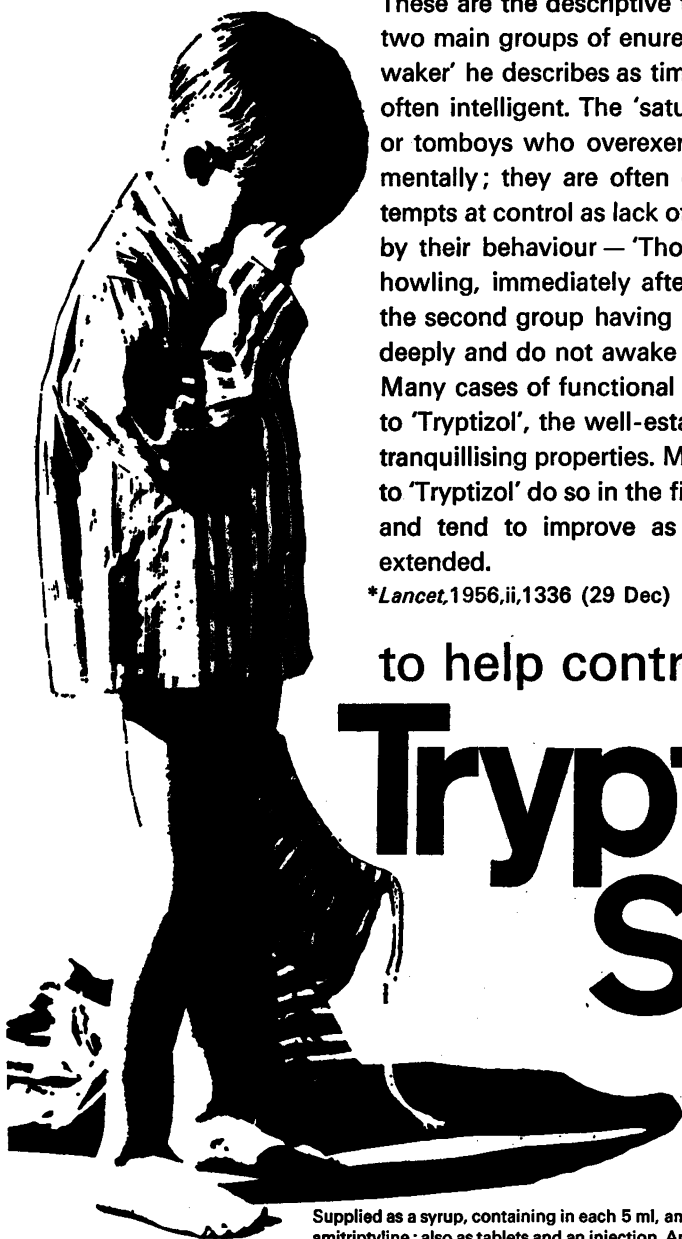
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*\*Lancet, 1956, ii, 1336 (29 Dec)*

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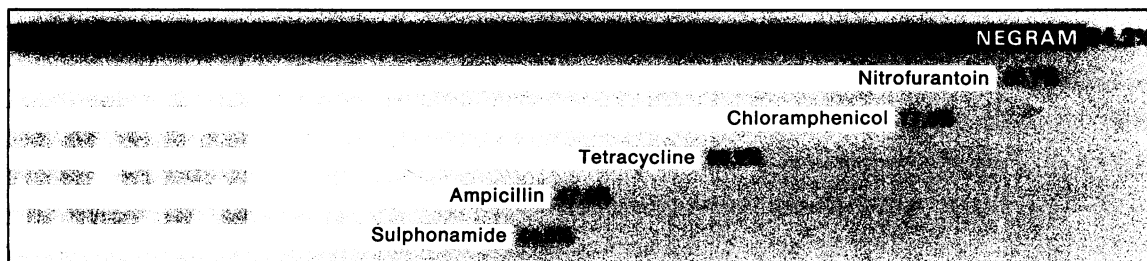
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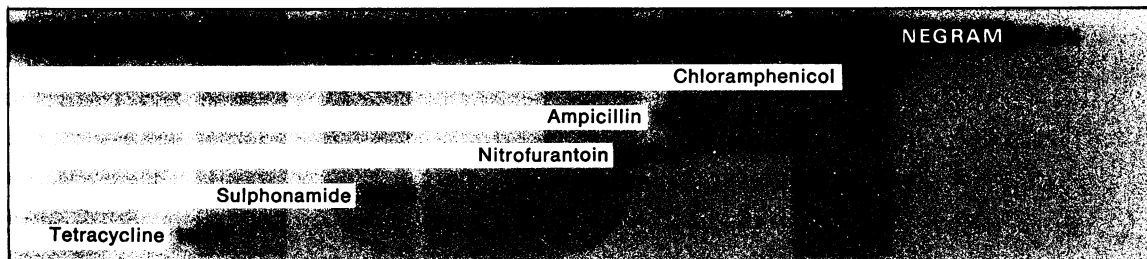
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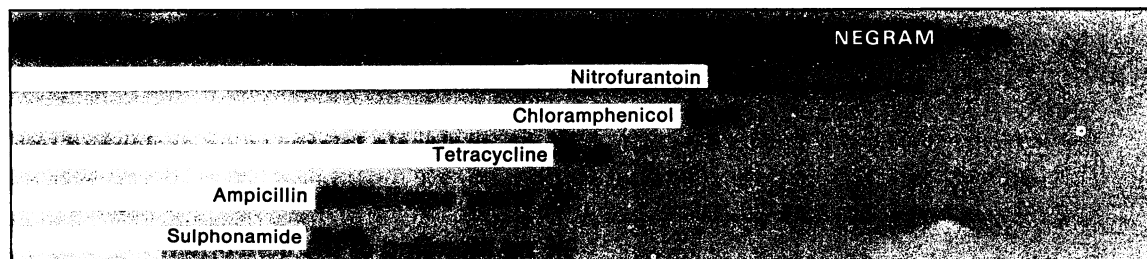
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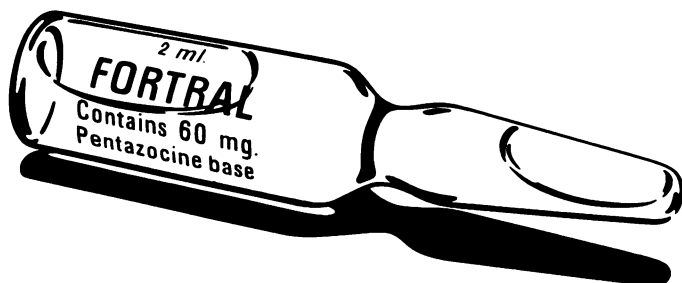
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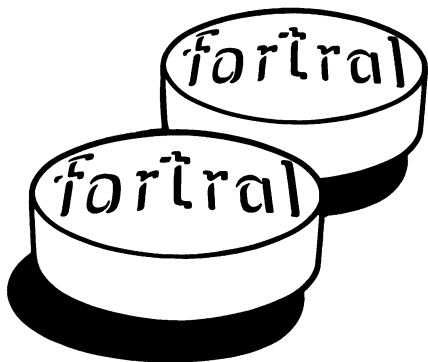


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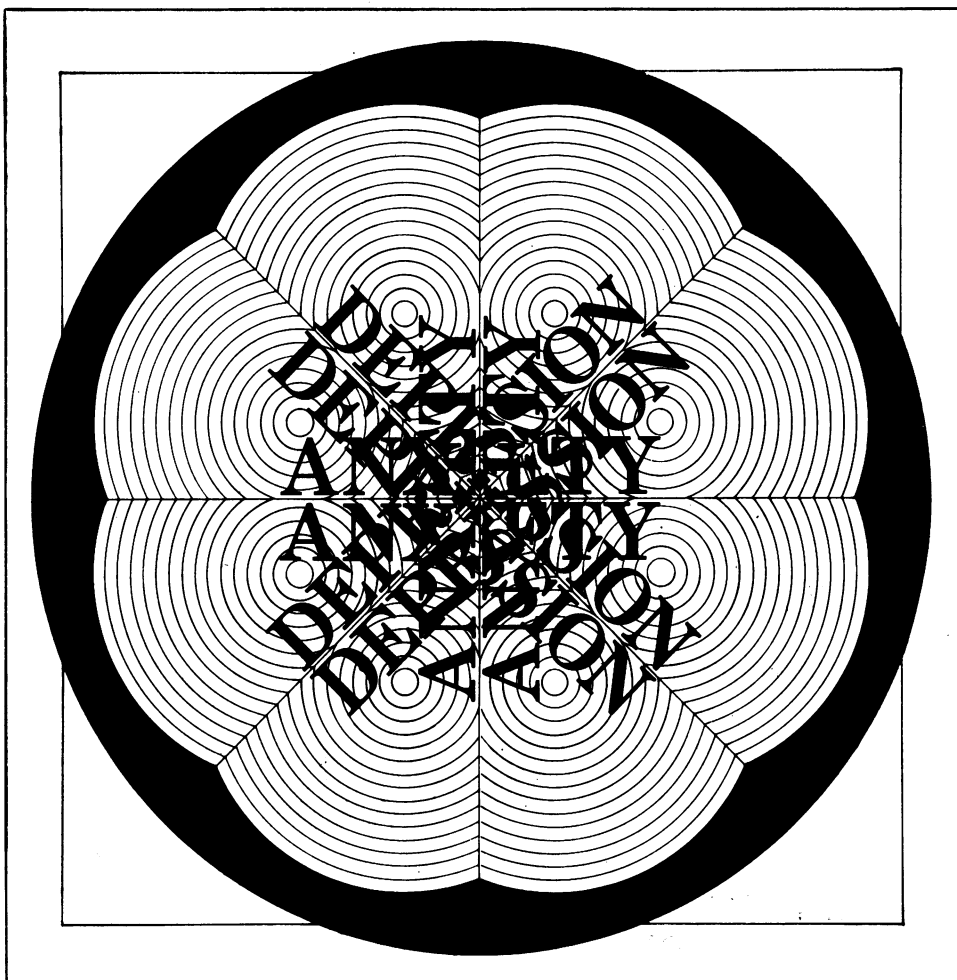
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1. Multi-centre clinical trials involving nearly 6,000 patients.  
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2. Rudel H.W. & Martinez-Manautou J. Animal and Clinical  
Pharmacologic Techniques in Drug Evaluation (1964).
3. Gual C. Amer. J. Obst. Gyn. (1967) 97(4): 443-447.



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This board holds funds for the furtherance of education in and for general practice, and is prepared to consider projects for personal or corporate education or educational research. They must not be such as would be covered by section 63 of the National Health Service Act, or any other similar provision.

Applications should set out the name of the applicant, the aims of the project, the methods to be employed, the estimated cost, the reasons why no other form of funding is likely to be available, and the anticipated commencing and finishing dates of the project. The board will require a typescript report of the results of the work undertaken.

Applications should be typed and sent to the Secretary, Education Foundation Board, The Royal College of General Practitioners, 14, Princes Gate, Hyde Park, London S.W. 7.

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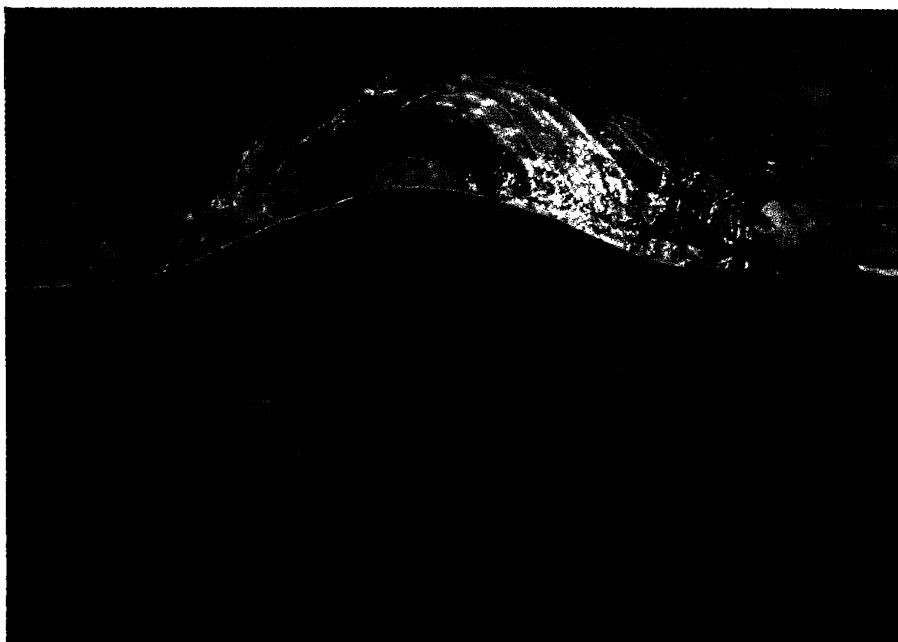
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1. Paper read to the British Dermatological Association Meeting, Aberdeen, July 1968.

2. Brit. J. Dermat. (1969) **81**; Suppl. 4, 88

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