

## *Abstracts and Annotations*

### **THE DOCTORS' WINDOW IN GUILDFORD CATHEDRAL**

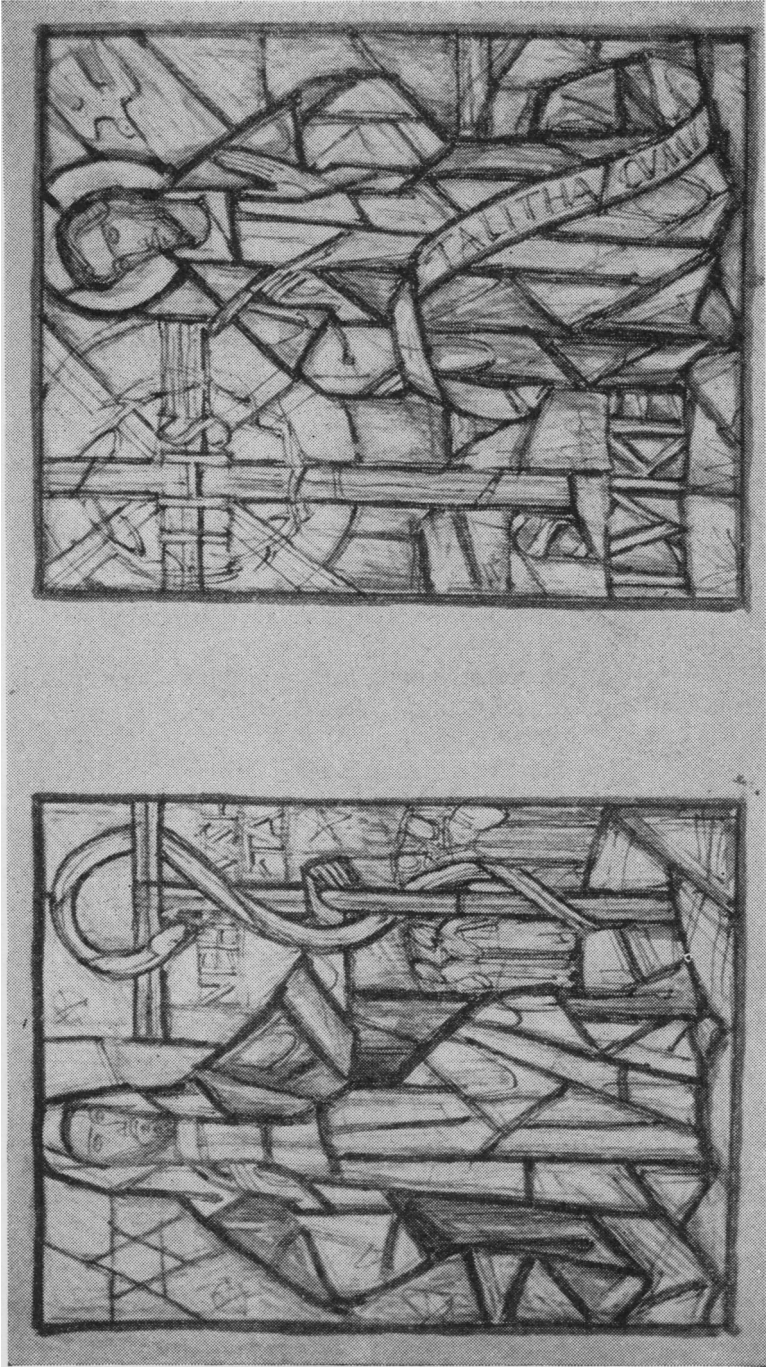
The artist chosen to design the doctors' window for the nave of the new Cathedral of the Holy Spirit at Guildford is Miss Moira Forsyth, who has already designed and made the Rose Window over the altar. Each nave window, of which there are seven along the south side, consists of a double lancet mainly of hand-made clear glass, but at the bottom of each lancet is a coloured panel. Miss Forsyth was invited to depict two scenes, one from the Old Testament and one from the New, connected with healing. The example from the Old Testament was Moses setting up the serpent of brass upon a standard (Numbers XXI, 8-9: "And it came to pass, that if a serpent had bitten any man, when he looked upon the serpent of brass he lived".) From the New Testament the story chosen was the raising of Jairus' daughter, which is told by both St Mark and St Luke, the physician (Chapter VIII, 41-56). St Mark in Chapter V, 41 gives the Hebrew words "Talitha Cumi: which is, being interpreted, Damsel, I say unto thee Arise."

Miss Forsyth's interpretation of these two scenes will be acknowledged by everyone as perfectly balanced. In the left panel the serpent of brass (Nehushtan) is shown set upon a Tau cross, similar to that in the coat of arms of the Royal Society of Medicine. This contrasts vividly with the crucifix in the right panel. The dove of inspiration and the Holy Spirit, approaching St Luke as he writes, is balanced in the left panel by the Cross of David, shown behind Moses' head. What cannot be appreciated from the reproduction on this page is the beauty and brilliance of the colours in Miss Forsyth's glass.

Contributions to the doctors' Cathedral window fund have so far totalled over £800, or more than half the amount which it is hoped eventually to raise. Most of the contributions have come in through the efforts of the British Medical Association and the Society of Apothecaries, and it is hoped to show the shields of these two bodies in the clear glass above the coloured panels. So that the medical profession shall not lag behind others which are also contributing windows to the Cathedral, further contributions are urgently invited and should be sent to the secretary of the fund:

**Dr F. A. Belam, 1 Westfield, Epsom Road, Guildford, Surrey,**

as soon as possible.



Sketch Design for the Doctors' Window, Guildford Cathedral

Scale approx. 2in.—1ft.

**Oral Penicillin in General Practice.** DAVID WHEATLEY, M.D. *Brit. med. J.* (1958), 2, 907.

The Northern Home Counties Faculty of the College of General Practitioners sent a questionnaire to 85 willing members (out of 180 possibles), and from this enquiry it was found that oral penicillin was used by 92 per cent of them, 10 per cent of them for child patients only. The percentage of doctors treating each condition with oral penicillin was as follows:

Tonsillitis .. .. .	91 per cent
Acute otitis media .. .. .	88 per cent
Acute bronchitis .. .. .	69 per cent
Pneumonia .. .. .	47 per cent
Furunculosis and boils .. .. .	44 per cent
Finger infections .. .. .	20 per cent
Various other conditions—less than .. .. .	10 per cent

Penicillin V was most popular (65 to 75 per cent), with benzathine penicillin useful for children (36 per cent). Combinations of penicillin with sulphonamides were used by 21 per cent of those reporting. Dose schemes varied widely, but 66 per cent used penicillin V 60 mg. three- to six-hourly for children, and double that dose for adults. Four to five days treatment was favoured by 78 per cent of the participants.

The majority of the doctors taking part were quite convinced of the efficacy of oral penicillin therapy.

**Outlines of General Practice.** Second Edition, 1959. The Midland Faculty of the College of General Practitioners. pp. 69.

This booklet provides a syllabus of general practice for teachers of the subject. After briefly defining the family doctor and his work it notes the features of ideal premises, gives lists of equipment, discusses staffing and organizational details, and puts down the arguments for and against an appointments system. It outlines the running of antenatal and children's clinics, and analyses record systems. It gives lists of forms in general use, and abbreviations (six pages of them). Laboratory work and dispensing are not forgotten, and relations with public and social services are summarized. A list of police and court fees is included, with a note on ethical behaviour, another on keeping up-to-date, some comments on financial matters, and a miscellaneous section covering five pages. A bibliography of over 100 publications completes this most valuable booklet.

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**Corrigendum**

In the supplement to Journal No. 22 the *Memorandum for the Guidance of Trainers* Messrs Benger Laboratories Ltd were incorrectly described. We apologize for any inconvenience that this error may have caused.