CORRESPONDENCE

The Editor,

Medical Journal of Malaysia.

Dear Sir,

Strokes, Scalds and Monoarticular Arthritis

During the last three years, I have had astonishingly successful results in treating these cases.

STROKES

If mixed vitamins are injected and also given by mouth, rapid improvement takes place. An Indian man, aged 63, was treated within one hour of his stroke occurring. In three days, he was able to walk. After 9 months, he is still walking, though rather feebly. Another even faster case, aged 70, was treated within four hours of his stroke occurring. After a few days he could walk, and he still can walk although the stroke took place nearly two years ago. These are the most dramatic of many cases of stroke treated here.

SCALDS

If scalds are treated immediately after their occurrence with liquid brown honey, they will recover in eight days. The treatment is soothing, effective and inexpensive. No heloids ever ensue.

MONOARTICULAR ARTHRITIS

If his affliction, either traumatic or idiopathic, is treated by giving 600 units of Vitamin E or 2400 mgm of Vitamin C daily, complete recovery can be expected in a matter of weeks or months.

I should be most grateful if a research team would investigate these treatments. I would submit my detailed paper to them. I consider that the matter is urgent because an estimated 100,000 cases of stroke occur in England and Wales annually and 200,000 cases in the U.S.A.

> Reid Tweedie, Sungei Siput, N., Perak.

Book Reviews

HEALTH IN A DEVELOPING COUNTRY. By R.L. Pulsford and J. Cawte. Jacaranda Press, Milton, Queensland, Australia, 1972.

IRRESPECTIVE OF GEOGRAPHICAL location, the signs and symptoms associated with any disease state are the same. What differs from one region to the next is the epidemiological or ecological context in which the disease manifests, and the sociocultural response of the community and of its individual members. It has become increasingly recognised that the conventional system of medical education, in which a great deal of, if not total, emphasis is placed on basic and clinical medical sciences with a consequent neglect of the factors that make up the socio-cultural environment in which the doctor will practise, leaves a hiatus in the training of the doctor. The newer medical schools around the world have responded by including in the medical curriculum varying quantities of the social sciences together with some practical field work.

This book by Mr. Pulsford and Professor Cawte is the result of seven years of teaching anthropology and sociology to medical students in the University of Papua New Guinea, and fulfills the local need for a general textbook with a distinctly Melanesian background. Unfortunately the very nature of anthropology and sociology implies that the content is primarily local and undoubtedly each region, be it Melanesian, East African, Spanish-American or Indo-Malaysian, will require a book that provides the local socio-cultural background. The chapters on "Beliefs" and "Traditional Medicine" are very interesting but somewhat brief. Notwithstanding that each chapter is designed to be a brief statement, it would have been more valuable had the authors chosen to highlight some aspects, possibly even at the expense of excluding other aspects.

As pointed out by the authors, many principles outlined by them apply with equal force to other people faced with transition from agricultural communities to industralisation and urbanisation, and from this point of view "Health in a Developing Country" will prove useful to those who will be practising in developing countries.

PAUL C. Y. CHEN

THE WORK OF WHO, 1971 Official Records of WHO No. 197. pp.402.

THIS IS THE ANNUAL REPORT of the Director-General of WHO, Dr. M. G. Candiau for 1971.

Part I gives a general review of the work by subject, opening with communicable and noncommunicable diseases. These follows chapters on immunology, environmental health, the organisation of health services, health statistics, family health, education and training, pharmacology and toxicology, and research. Part II deals with the particular problems and developments in each of the six WHO regions, and Part III contains a list of the 1900 WHO-assisted projects throughout the world. Maps and graphs and photographs illustrate various aspects of WHO's activities.