B. M. Willmott Dobbie

half of the deaths without issue in the first two years of marriage were the consequence of pregnancy, probably not an over-estimate, forty-one are added to the known toll: 14.7 for every thousand baptisms, making a total of 24.4 per thousand baptisms. If two-thirds of the deaths were so caused, the figure becomes 29.4.

This evidence is a necessary corrective of more optimistic estimations. It follows that many an obstetric tragedy of motherhood is remembered only by an entry such as "M- wife of J- S-" in the burial register. Eccles¹⁴ mentions the figure 10–15 deaths per thousand births "based on typical parish registers" supplied to her by E. A. Wrigley of the Cambridge Group for the History of Population and Social Structure; this figure approximates that derived from known deaths in the present series, and is certainly much too low, as an estimate of total maternal mortality (see p. 85).

SUMMARY

The study is based on the registers of three Somerset parishes between the sixteenth and eighteenth centuries.

Two lines of approach were employed. The first was a comparison of the death rates of husbands and wives during the first fifteen years of marriage. The estimate so obtained is 26.8 maternal deaths per thousand baptisms. The second was based on limited family reconstruction, and it is suggested that the figure probably lies between 24.4 and 29.4 per thousand baptisms.

Admitting the unavoidable uncertainties in both branches of the study, the fact that both, based on independent *a priori* argument, arrive at substantially the same answer suggests that it is not far from the truth.

14 Audrey Eccles, Bull. Soc. social Hist. Med., 1977, 20: 10.

News, Notes and Queries

ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH

On 6-11 September 1981, the College celebrated the tercentenary of its foundation in 1681. More than three hundred delegates from over thirty countries gathered in Edinburgh for a commemorative congress. Congress themes included the history of the College and of medicine in Scotland, the role of the College in medical education and organization at present and in the future, recent advances in medicine, and reports on research undertaken by Fellows and Members throughout the world. Participants in the programme included in addition to Fellows and Members, representatives from many other colleges and academies of medicine. The University of Leiden, the Pharmaceutical Society of Great Britain, the Royal Botanic Garden, and the Scottish Society of the History of Medicine also collaborated, and exhibitions concerning the history of medicine were arranged by the Scottish Record Office and by medical and publishing companies.

DEVELOPMENTS AT THE WELLCOME INSTITUTE FOR THE HISTORY OF MEDICINE

The year 1981 was one of rapid and significant change for the Wellcome Institute, directed largely towards the consolidation and expansion of its objectives and activities. Professor A. R. Hall, who as part-time Chairman of a management committee, had encouraged an outward-looking approach and had inaugurated a series of Wellcome public lectures, transferred to the Trust's office in September 1981. He was succeeded by Dr. P. O. Williams, F.R.C.P., Director of the Wellcome Trust, who was appointed as Director for a limited tenure by the Wellcome Trustees in order to provide experienced guidance for the Institute at a time of major developments.

It has been decided to expand the Institute's own academic programme by an increased number of symposia, seminars, and open lectures, covering a variety of topics and aimed at different audiences. A calendar of events for 1982 will be available from the Secretary, The Wellcome Institute, in January, and will be regularly updated.

One-day symposia arranged for 1982 are as follows:

2 April Medicine and the Scientific Revolution

28 May Medicine and Romanticism
25 June Darwin and the Doctors

17 September Medical Sciences in Twentieth-century Britain
 1 October Medicine, Printing, and Literacy in the Renaissance

In addition, the Institute is beginning a regular series of Wellcome Research Seminars. The theme for the first of these will be the history of psychiatry. The first of the seminars, which will be held fortnightly at the Institute, is in the early evening of Wednesday, 27 January 1982. There will also be a course of study classes, based on primary texts. The first of these, concentrating on early Renaissance medicine, will examine works by Leoniceno and Fracastoro dealing with syphilis. These classes will be held fortnightly, beginning on Monday, 1 February 1982.

The Institute has also begun a series of public lectures on medico-historical themes. The first lecture was given in the Institute on 29 October 1981, by Professor Thomas McKeown on the "History of Health and Population". Dates and topics for public lectures in 1982 will be available shortly.

By these various activities, the Institute aims to extend still further the knowledge and influence of medical history among the medical and academic professions, and to provide advice and instruction for all those interested in the subject. The new Wellcome Gallery at the Science Museum, which was formally opened in December 1981, will also help to popularize the history of medicine.

We foresee that 1982 will be a year of crucial opportunities. Under its new Director, the Institute intends to grasp them fully.

MEDICAL SOCIOLOGY IN BRITAIN

The fourth edition (forthcoming) of *Medical Sociology in Britain* is due to appear in 1982. This is the register of persons, projects, publications, and research centres engaged in social science research in health and illness. It has become both the standard reference work in the area and a useful source of bibliographical information and contact between medical sociologists and other health scientists.

Contributions in the past have mainly been from medical sociologists, but there have also been contributions from other social scientists and from people working in such disciplines as community medicine, dentistry, nursing, oncology, psychiatry, etc. A number of medical sociologists work in areas which are closely allied to Medical History and there appears to be a growing commonality of interest between sociologists and medical historians in areas of health and illness. This is a welcome development which it is hoped this publication will foster.

Contributions are now being sought for the forthcoming edition. These typically take the form of brief details of completed research, ongoing research (with details of research design), proposed research, academic or other affiliation, and relevant publications. This information is being collected via a standard pro-forma which will be sent on request. It is planned that the Register will be made available worldwide, by September/October 1982. Thus all completed pro-formae should be in the editors' hands by 31 December 1981. However, the editors can incorporate information sent by readers of *Medical History* by 28 February 1982.

If you wish to have your research and/or your research centre considered as a potential contribution please send your request for a pro-forma, with a stamped addressed envelope large enough to hold four sheets of A4 to either: Brian Clarke, S.I.B.S., University of Warwick, Coventry CV4 7AL; or David Field, Dept of Sociology, University of Leicester, Leicester LE1 7RH. Please mark your envelope *Med Soc Register*.

HISTORICAL PERSPECTIVES ON CANADIAN MEDICINE

The 1st Hannah Conference on the History of Medicine on the above theme will be held at McMaster University on Thursday, Friday, and Saturday, 3, 4, and 5 June 1982. Sponsors include the Hannah Institute for the History of Medicine, McMaster University, and Connaught Laboratories Limited.

The papers will examine a wide spectrum of topics including the international impact of the discovery of insulin, efforts at smallpox control in the nineteenth century, shell shock in Canadian troops in World War I, and professionalism in the Maritime Provinces. A conference proceedings will be published with all possible speed. The timing of the conference has been planned so as to precede the meetings of the Canadian Historical Association, the Canadian Society for the History of Medicine, and other related groups at the Learned Societies meetings in Ottawa.

Further details from: Professor Charles Roland, History of Medicine, 3H56 HSC McMaster University, Hamilton, Ontario, Canada L8N 3Z5.