

diagnosed among 4,871 men (incidence 6.5 per cent), and 18 among 1,080 women (1.7 per cent). These rates cannot be applied directly to the general population, because of the nature of the sample, but from these figures the incidence of peptic ulcer in London is calculated at 5.8 per cent for men between the ages of 15 and 64, and 1.9 per cent for women of that age range.

The incidence varied with age. In men there was a maximum of 9.6 per cent at ages 45 to 54. In women the maximum of 6.1 per cent was recorded at ages over 55, but owing to the small numbers in this age group, the incidence is not reliable. If gastric and duodenal ulcers are taken separately, the maximum incidence of gastric ulcers was at ages 45 to 54, and that of duodenal ulcers 10 years earlier. At ages under 55 the male to female ratio was 4.5 to 1. The expectation of a gastric ulcer developing is greatest between the ages of 35 and 64, while the expectation of a duodenal ulcer developing is constant between the ages of 20 and 64.

Social class did not affect the incidence of duodenal ulcers. Gastric ulcers were two-thirds less than expected in social classes I and II (the highest classes) and two-thirds more in social class V.

The men were classified in 20 occupational groups and the expected numbers of ulcers calculated from the results of the entire survey. Significantly high rates of incidence were found in physicians and in a residual group of unskilled workers, but in the first of these the excess was probably due to better diagnosis, and in the second, to differential selection of sheltered employment by ulcer subjects. High rates of incidence were also found for foremen and business executives.

A low incidence was found among agricultural workers and perhaps among sedentary workers.

Superficially, irregularity of meals did not appear to influence incidence, but since ulcer patients are advised to take regular meals this may account for failure to detect any association between irregularity of meals and incidence of ulcer.

No evidence was obtained of any harmful effect of shift work.

Anxiety over work was complained of more frequently by men with proved ulcers than by men without symptoms of dyspepsia. It may be that anxiety is the etiological factor, but the results of the survey are also consistent with the hypothesis that men of conscientious personality are particularly prone to have duodenal ulcers. Home worries were not found to be associated with peptic ulcer.

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THE PROBLEM OF ATYPICAL EPILEPSY IN INDUSTRIAL MEDICINE: ITS DETECTION BY THE ELECTROENCEPHALOGRAPH. G. VERDEAUX, *Travail humain* 13:254-269 (July-Dec.) 1950.

The industrial physician must place workers where least risk exists for them or may be created by them for others. Here epilepsy in all its forms calls for detection; few own up to this affliction. Epilepsy or even petit mal must be a potential danger wherever machinery exists. Anything which will help in detecting the epileptic or the epileptiform state must be of value. It is here that the electroencephalographic methods are useful. Epilepsy or a condition activated by hyperpnea in an epileptic modifies tracings, which exhibit characteristic irregularities in the form of the waves or their rhythm. Modifications due to true epilepsy can be readily picked out (typical tracings are illustrated). Atypical fits, even if they are simulated, give their differential characteristic tracings, although there may be a need for prudent activation to bring them out in the case of suspected anomalies. The use of this method of examination, valuable as it undoubtedly is, calls for the expert to take and interpret the tracings. This method of examination is of particular value in the diagnosis of the physical group of epilepsies, which include petit mal; here the need for an electrical examination is evident. There are also other nerve troubles more distantly allied to epilepsy in which this form of examination should be systematically pursued. The reproduced tracings which illustrate this article go far to explain to the uninitiated the intricacies of the electroencephalograph.

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