Industrial Court to deal with the National Health Service. Mr. Walter Elliot said that a misunderstanding had arisen and that it was a great pity that as late as June 20 this year "the negotiating body should still be in doubt as to what had been decided or proposed to them so long ago as October, 1947." He stressed that in the case of the medical profession the employer could legislate and was also negotiating with a body of employees who had declared that in no circumstances would they go on strike. When he was asked by Mr. Bevan whether on behalf of the Opposition he thought that there should be compulsory arbitration, Mr. Elliot replied, "No. Every hon. Gentleman who has spoken on this side has said no, because it is not possible." Mr. Elliot went on to say that they were trying to secure something in place of the power of compulsory arbitration, and he considered that the Minister's suggestion to create a special section of the Industrial Court concerned with the National Health Service was a step in advance.

The Joint Committee and the Central Consultants and Specialists Committee have asked for compulsory arbitration, and the reasons for it are well known. The medical profession, as Mr. Elliot observed, is in a different position from that of any other section of the community in that by the nature of its work it is unable to use the weapon of the strike. Nevertheless both the present Government and the Opposition, while agreeing on the need for arbitration machinery, refuse to allow it to be compulsory. This question is a matter which the Joint Committee will have to consider seriously when it meets representatives of the Ministry of Health. It is not clear what is meant by the last paragraph of Sir William Douglas's letter, and we should be reluctant to put on it what seems to be an obvious interpretation—namely, that unless matters are speedily settled the terms and conditions of service will not be made retrospective.

THE ONSET OF MENSTRUATION

Although the first menstrual period does not mark the beginning of the changes in physical development associated with the maturation of the genital system, it is an important landmark, since the age at which it occurs is easily ascertained. Elsewhere in this issue Drs. D. C. Wilson and I. Sutherland describe an investigation undertaken by the Institute of Social Medicine into the age of onset of menstruation in a cross-section sample of 1,338 girls in schools of Oxford city and county. As a survey it provides interesting indications about differences between menstruating and non-menstruating girls of the same age, particularly their height-weight ratios. Contrary to popular belief, these workers found that little difference existed between the age of the menarche of girls living in the town and in the country, and that the age incidence had not altered appreciably during the course of the last generation. The significance of the inquiry lies in the findings of the differences between the heights and weights between menstruating and non-menstruating girls in relation to their ages, and it thus confirms the work of Ellis.1 To know that there is a mean difference of 3 in. (7.5 cm.) in height and of 25 lb. (11.34 kg.) in weight at the age of 11–12 and 1½ in. (3.75 cm.) and over 17 lb. (7.7 kg.) at the age of 15–16 is of some importance for purposes of research (particularly from records) on growth curves of large numbers of children. At the individual examination of girls, however, the clinical manifestations of puberty are so obvious that it would be unlikely for anyone to confuse the overweight child with the pre-pubescent one. If average curves for height and weight are used for comparative purposes it would seem that two curves should be substituted for the one commonly in use—one for those who have reached the menarche and one for those who have not. Even then these curves can be misleading, since the individual child's pattern of growth must be taken into account when comparison with the average curve is made.

Drs. Wilson and Sutherland found no evidence that the height and weight of girls aged 17 and 18 are in any way related to the age at which they first menstruated. The mean height and weight of girls (at the age of 17–18) who began to menstruate at 15 years and over were 65.1 in. (163 cm.) and 125.4 lb. (56.9 kg.); the figures for girls of the same age who began to menstruate at ages under 13 were 64.4 in. (161 cm.) and 125.4 lb. (56.9 kg.). This finding contrasts with that of Shuttleworth2 who found in a small group of girls that there was a rapid decrease in the rate of growth after the onset of menstruation. Girls whose menarche was later continued to grow after the height of those who had already begun to menstruate had become nearly stationary; in consequence those in the former group eventually overhauled the girls whose menarche was earlier and who were on the average taller during the period from 8½ to 12 years of age.

The sample studied by Drs. Wilson and Sutherland is not very large, and the figures obtained in a comparatively small city, favourably placed, together with a restricted rural area, may not necessarily correspond with those which would be obtained in densely populated or industrial areas. Further confirmatory evidence is necessary before the findings can be accepted for the country as a whole. The investigation, however, does provide information which medical practitioners, especially school medical officers, should bear in mind. The omission of any mention of the age of onset of the menarche in the school medical record card issued by the Ministry of Education must have been an oversight which no doubt will be remedied in due course. Though this information is unlikely to have much value at the ages of the three statutory examinations, it is of retrospective value and should be included.

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1 Arch. Dis. Childh., 1948, 23, 17.
2 Monograph of the Society for Research in Child Development, 1937, 2 (5), National Research Council, Washington.