



# THE AURICLE

THE OFFICIAL ORGAN OF  
THE MEDICAL STUDENTS OF THE  
UNIVERSITY OF THE WITWATERSRAND

V.4. no 8. 1953.

# WHY WELCH ALLYN ?

(Series No. 4 )

## 1. CONJUNCTIVA AND CORNEA

- a. Use of the beam from the ophthalmoscope as oblique illumination aids in locating foreign bodies or other conditions requiring simple inspection of the eye. It is well to illuminate not only directly but by reflecting the light from the surface of the iris when locating foreign particles in the cornea.
- b. One may get considerable information about the external structures by looking through the ophthalmoscope as for fundus examination and placing the plus 10 or plus 15 lens in the aperture.
- c. The streak beam may be used for detecting irregularities in the cornea, by placing the plus 10 or plus 15 lens in the aperture and examining through the ophthalmoscope.

## 2. THE IRIS

- a. Again the ophthalmoscope is a very handy instrument to use for studying the iris. It is perhaps most useful for the case in which there is a question as to whether or not the pupil reacts to light. One can make certain of the reaction in the following manner. Place the plus 15 lens in the aperture. Have the patient look straight ahead, then while looking through the ophthalmoscope, as for fundus examination, direct the light, first away from the iris then rather quickly on the iris. The slightest motion of the iris is detectable with this magnification. Repeat the procedure several times to be sure of the result.
- b. The structure of the iris can be studied with the same lens in the aperture. Small tumors or peculiarities of pigment arrangement are easily detected in this manner.

## 3. THE CRYSTALLINE LENS

Examination of the lens should be done in two separate and distinct ways in order to obtain all the information available with the ophthalmoscope.

- a. For best results the pupil should be dilated, then examine the lens by light reflected out of the eye. This is done with the 'O' aperture. Direct the light into the patient's eye from 16 inches distance and look through the ophthalmoscope. Any obstructions to light will be seen as black spots. These are likely to be either lenticular or corneal. Even a small bubble on the surface of the cornea will produce an opacity, so if any appear, have the patient blink his eye so that any moveable material on the surface of the cornea will be cleaned off any permanent opacities will remain.
- b. To determine the position of opacities found by the previous examination, it is necessary to place the plus 15 lens in the ophthalmoscope and move toward the patient, coming as close as for fundus work. Now examine the cornea again, then the lens. At this point opacities in the lens will be grey or brown instead of black as previously. By adjusting the distance from the lens to the ophthalmoscope, the exact location of the opacities in the lens may be determined, that is, whether they are in the capsule cortex or nucleus of the lens.

To be continued .....



## Guest Editorial.

By Professor J.M. Watt

### THE ADVANCE IN THERAPEUTICS

It seems scarcely credible that a mere 40 years ago we were with great faith injecting subcutaneously four-hourly doses of gr. 1/60 of strychnine hydrochloride in the belief that this really had some effect in staving off death. I remember also the assiduity with which I as a medical clerk in the wards pursued minute veins in order to give intravenous injections of sodium arsenite for the treatment of pernicious anaemia. At that time the first impetus of that master mind, Ehrlich, was beginning to be felt in the domains of venereal and tropical diseases. I well remember the difficulties which beset us in the administration of the first organic arsenical arsphenamine (called at that time salvarsan or 606). (There is a bust of Ehrlich on the main staircase of the Medical School).

Since those days things therapeutic have moved with an ever-quickenning pace, much accelerated, as is often the case in the field of man's endeavour, by the intervention of World War II. The early search for a safe antisept-

ic for internal as well as external use led Lorrain Smith to give us eusol and the less known eupad. In 1915 a young soldier, fresh from the battle fields of Flanders with a relatively trivial 303 bullet wound in the leg, developed septicaemia as well. I remember clearly the trepidation with which we undertook the intravenous infusion (no pyrogen-free water in those days) of eusol and the delight with which we saw almost certain death turned to recovery.

Since those pioneering days what a wealth of advance has been witnessed as a result of the rise of chemotherapy. It is safe to say that from the point of view of drug therapy this has proved of prime importance. The active search for new remedies, based on a relatively accurate knowledge of the etiology and causative factors of disease and on the rapidly expanding knowledge of the relationship of chemical structure to pharmacological action, has produced remarkable results.

The early work of Domagk has resulted in the "sulpha" drugs. Fleming's pioneer work in the field of antibiotics has gone further than our wildest dreams. The antihistaminics, the newer antipyretics and mild analgesics, the important advances in the field of the powerful narcotics of the morphine type, the flood of light which is being shed on the autonomic and the enzyme systems are all potent advances of the greatest significance.

With all this, whither pharmacology and therapeutics? It seems to me that pharmacological investigation must delve even deeper into the enzyme systems and intracellular phenomena. *Pari passu*, with this there will continue to be an active search for new remedies based on an ever expanding knowledge of the relationship between chemical structure and pharmacological

# ENDOCRINOLOGY



# CONFERENCE

Score of Clinical Endocrinology	M
Puberty and Menstruation	A
The Sterile Marriage	Y
Endocrine Control of Metabolism	18th
Diabetes	
Collagen Diseases	M
Value of Surgery in the Endocrine System	A
Radioisotopes	Y
	29th

## *The Librarian Says:*

There is a tendency nowadays for doctors to regard their patients as cases rather than as people, as statistics rather than as human beings. This habit of detachment is probably almost inevitable in an age when medical practice depends so much on mechanical and laboratory aids to diagnosis and treatment, but the loss of human interest and sympathy which goes with it is regrettable. Several writers have attempted to restore the balance by showing that patients are people, and one of the most convincing and effective books on the subject is a new publication called Disabilities, published by the Lancet. This is a collection of articles by patients, describing their experiences as sufferers from various disabilities. It is very interesting for several reasons. Doctors should read it to obtain some insight into the problems faced by patients; patients should read it to gain comfort from the sharing of experiences with fellow-sufferers and to learn some of the ways in which difficulties may be met and overcome. Everyone should read it to learn what reserves of courage and endurance are hidden in the most ordinary-seeming person. There is much practical advice, and there is an amazing absence

of complaint and self-pity, yet it is a very human book.

A.C. Dick

## DR. J. EDWIN ORR

Dr. Orr is conducting a series of meetings at the University next week under the auspices of the Students' Christian Association. He will commence the series with a meeting on Monday April 27th at 1 p.m. in the Harveian Lecture Theatre.

Dr. Orr is well qualified for the task, as he has spent many years both studying and conducting missions at universities in several countries. He holds the degrees of Ph.D., D.Theol., and B.D. as well as being life fellow of the American Geographical Society, Royal Historical Society etc. He has travelled through 120 of the world's countries. Further he is the author of many books.

We feel sure that with this background we can look forward to a series of stimulating lectures by Dr. Orr.

S.L.A. Meeting Thursday  
 Vesalian 1 P.M.

# EDITORIAL.

## HOW NOT TO BE A DOCTOR

On Monday afternoon a well known psychiatrist delivered a lecture to the 3rd years. He introduced the lecture with the following sentence. EVERY PATIENT IS A PERSON. It is a great pity that some of our resident housemen were not present to receive these pearls. It is our experience that there are two sorts of junior doctors at our non-European hospitals, those who are conscientious individuals well aware that they are dealing with vulnerable persons and humbly grateful to their non-European patients for the wealth of experience that they provide. The second type comprises those who regard their housemanship as an unnecessary evil and who deal with "wogs" and "nigs" and display an astonishing indifference to their patients. Take the following as an illustration. A doctor at a certain non-European O.P.D., once complained of the lack of co-operation he received from his non-European nurses. Tactful enquiry revealed that this lack of co-operation had a triple origin. Firstly the doctor did not speak any Bantu language. Secondly and paradoxically being a conscientious man he insisted that before the staff nurse ushered in his patients she should see that they stripped completely. The reason for this insistence being that he was determined to EXAMINE his patients and had found that in three cases out of ten the patient came in complaining of some trivial pain and a hurried "examination" of the area failed to reveal the source of the trouble. He found that his equally quick but nevertheless far more searching examination enabled him to diagnose syphilitics who were often dismissed as sprained shoulders or such like, dangerously ill T.B.s etc. etc. Why the lack of co-operation from the staff-nurse? Well she said quite frankly that

she had never come across a Doctor like this (she'd been at the hospital some years). Consequently she did not understand his thoroughness and resented what seemed to her to be unnecessary work. She told some amazing stories (in the strictest confidence of course) which revealed the reason for the resentment. The best was the one about the houseman who let his patients pile up while he worked out his evening crossword puzzle. Why didn't she complain? This question nearly caused her to collapse with mirth. To whom should she complain?

The other afternoon a non-European was taken in to a casualty department. He had severe face burns and he sat down at four o'clock taking his place patiently among the other "wogs". At 4.30 he was still waiting. Why? Was there only one doctor on duty? Was he busy? No not at all. Three doctors were on duty. They were all having tea.

Are these isolated incidents? One has only to take the trouble to visit a non-European hospital and speak to some of the hard-working, cigarette smoking junior doctors to assure oneself that far from being isolated incidents this sort of behaviour appears to be the rule.

While we as medical students should hesitate to criticize our superiors, the object of this editorial is to point out to those who are leaving us in the not too distant future and those who are yet on the threshold that it is only too easy to spend six years learning to be a professional and finally emerge as an inefficient technician.

# LOOKING BACK OVER THE FIRST 33 YEARS.

BY Professor R.A. DART. (The 4th in this series)



OUR GRADUATES THUS CAME TO BE CHARACTERISED BY THE WIDE VARIETY OF THEIR DESTINATION:

they now occupy every conceivable field within the profession of Medicine.

Most of them are in private practice, but with the expanding care by the State since the war for all who are sick many score - I do not know how many, but their incidence should be investigated - are in full-time or part-time therapeutic and administrative posts, while others are investigators or teachers or both.

Our graduates from the outset have been varied by belonging to both sexes; and as the women have not been segregated from the men in their studies, and the men and women have had such diversified ambitions, it is not surprising that our bi-sexual or co-educational institution has produced many magnificent and permanent genetic unions. I think the first was that of James Peter Coetzee and Marguerite Appleyard. There are probably many of which I have lost track, but there are numerous significant combinations that come to my mind:-

Basil James Pavey Becker and  
Crystalene Chatgidakis.

Maurice Pringle and Janet  
Mackintosh.

Sydney Kark and Emily Jaspan.  
Sam Wayburne and Hilda Ginsberg.  
Bernard Gampel and Juliet Cheslen  
Norman Fulton Walker and Sonia  
Highman.

Gerrit Willem Hendrik Schepers  
and Phyllis Marie Du Toit.  
Guy Fleetwood Berry and Ann  
Venn Walker.

Sydney Kuper and Yetta Hoffman.  
Keith Lewer Allen and Margaret  
Blakeway.

Ian Howard Paterson Coster  
and Marioth Ella Kelly.  
Roy Morris and Sarah Klemp-  
man.

Frederick Davidson and  
Mary Schonland.

This incomplete list takes no count of those 'irregular' unions we encounter such as our medical and dental graduates have cemented with nurses, physiotherapists, or occupational therapists; or with men or women of other faculties; or with members of the administrative staff. Events of this sort robbed me firstly of Miss Jean Holgate, then of Miss E. Marais and finally of Miss J. Ludorf. Looking back one appears to have spent a lifetime training skilful teachers and laboratory and administrative assistants for other departments and schools and providing perfect wives for professional colleagues. This hymeneal contagion seized the school in the era of the Four Musketeers and never seems to have lost its grip; and my advancing years are betrayed to me by the presence in my classes of the progeny of past graduates like Gruebel Lee and Javett, or by discovering that a member of my staff 'Larky' Cohen has married Laurie Adler's daughter. I have failed to follow adequately the exacerbations and recessions of this marital phenomenon in the school, but I am satisfied that its influence upon the medical and allied professions in this country has been both benign and fruitful: fruitful of staggering social benefits to South Africa as well as children. By what tests can we assess how the effectiveness of the life-work of graduates such as I have been mentioning has been increased by the sympathetic understanding and in more than one instance, the collaborative teamwork of their medical wives!

# CYBERNETICS

## A MOST INTERESTING ARTICLE ON A NEW SCIENCE

By Doctor S. Pappert.

The last war created the atom bomb, and filled the world with terror of the possibility of vast devastation. Yet few people realise that other weapons were made with even more far-reaching consequences. Most spectacular is the development of self-guided missiles. These are weapons which will follow an objective on which they have been sent. An observer could easily describe their behaviour as purposive or even intelligent. They will certainly pursue their victims as efficiently as one of the lower living creatures would hunt its prey. On the same lines is the development of anti-aircraft guns which spot a plane by radar; compute its direction and velocity; and finally shoot the shell in such a way, that plane, shell and explosion are in the same place at the same time. All this without human intervention.

In other directions, too, the war prompted the powers that be to finance robot construction. Outstanding problems in physics had not been solved because they would have needed a small army of mathematicians to devote half a life-time to them. The solution of these problems was needed for military purposes and so a machine was made to do the work of highly trained mathematical technicians - but to do in a minute what would take an advanced mathematician years. This machine, named ENIAC, was the predecessor of many others, e.g. the Manchester calculator which plays a fair game of chess in between more serious work. Today the "electronic brains" have reached the stage where thousands of mathematicians can be released from routine work to devote themselves to more fundamental problems. Thus machines

are contributing in a fundamental way to the advance of human thought by freeing our minds from the mental drudgery which clogged them up in the past.

The emergence of the new science of robot building has had its impact on neurological, psychological and philosophical thought. Machines have been made to perform tasks which were previously regarded as needing intelligence! Does this mean that we are on our way to making robot brains? Have we hit on the modus operandi of intelligence, the key to the higher functions of the nervous system? Exciting questions these! And it is indeed tempting to think that their answer is YES.

"Cybernetics" is the name of a book by mathematician N. Wiener which deals with the mathematical theory of robot building and comes close to giving a straight affirmative answer to the question posed in the previous paragraph. In conjunction with neurologist McCulloch and others Wiener proposed the foundation of a new science of Cybernetics. The project was taken up by the John Macy foundation which has sponsored six "Symposia on Cybernetics". The published verbatim reports of these conferences show that outstanding neurophysiologists, electrical engineers, mathematicians and other scientists have taken up the idea that the human nervous system can be understood via the principles which emerge from the experience of robot-building. They have put forward interesting hypotheses on the nature of shock therapy and leucotomy. They have made valuable analyses on the possibility of "prosthetic vision" (e.g. can

(ctd. on page 10)

# FOREIGN AFFAIRS.

## THIRD WORLD STUDENT CONGRESS WARSAW, AUGUST.

The Third World Student Congress is the student news item of the year, for at this congress students of the United States and the Soviet Union, Britain and China, France and Cuba and Egypt and Australia and everywhere else will have the opportunity of meeting together.

Christian, Confucian, Mohammedan, and Buddhist, all will come together so that they can act together on the things in which they are all interested. Conservative and Labour, Republican and Democrat, Liberal and Communist will be able to exchange ideas.

All this, you will agree, is news that will echo through the universities of the world. So you would be well advised to take out your pocket diary and turn to August 27th - September 3rd, 1953. Write in there in big clear letters - Third World Student Congress in Warsaw. Mark it in your diary because that week is of immense importance to you personally.

First of all - there is no reason why you yourself should not be one of the student delegates or observers who will come from all corners of the globe to the Congress. For the Congress is open to all students and student organisations, both members and non-members of the IUS, that desire to contribute towards increased international co-operation and the defence of student needs and interests.

What will be discussed at the Congress? This the students of the world will decide themselves during the coming months of preparations and pre-Congress discussions. But one can be sure, knowing the problems which are to-day predominant in student discussion, that among the problems which will be dealt with are

the contribution of students to peace and national independence, the reform of education academic rights, scholarships and fees, hostels and canteen facilities, graduate employment, world student sports, and international exchanges. And around the Congress there will be a vast sporting and cultural programme in which students from all countries will participate.

The results of the Congress will also make news. Cultural, scientific, and sporting exchanges between countries, decisions on the satisfaction of student needs and interests, measures for greater unity, a handbook on scholarships, the expedition of international newspaper exchanges - these are but a few of the steps forward which will result from the Congress.

In a world troubled by disension the IIIrd World Student Congress offers students an outstanding opportunity to contribute to an international forum for student friendship and co-operation - to demonstrate that it is possible and vital for people from different social systems to live together in a world at peace.

The above article has been written in a spirit of confident optimism. But we have not noticed much interest in international student affairs on the Wits. campus. Are we blind and deaf or is the optimism of the writer really unjustified, at least as regards this university? What about writing and telling us.

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## CHESS MEETINGS.

EVERY TUESDAY AND  
THURSDAY - LUNCH HOURS .  
PHYSIOTHERAPY ROOM.

# LETTER FROM: BLOOD TRANSFUSION

## THE STUDENT AND BLOOD TRANSFUSION

The first blood donors in Johannesburg were paid at the rate of £1. 1. 0. for 100<sup>cc</sup> of blood or £5. 5. 0. per pint (500<sup>cc</sup>). That was prior to 1937.

As has been the case throughout the world, the first Voluntary Blood Donors' Association came into being for the purpose of making blood available to suffering humanity at the cheapest possible rate. This is impossible under the paid donor system.

When one investigates the development of the Voluntary Donor System on the Rand, one finds a strange thing; for whereas the first Voluntary Donors' Association was formed under the aegis of the Students' Medical Council of the University of the Witwatersrand, its subsequent development has been entirely divorced from the active support of the student body.

It is perfectly obvious that blood is becoming more important in medicine every day and that the demand is greatly outstripping the supply. Taking these facts into consideration it is a great pity that student bodies such as the S.M.C., and S.R.C., have been utterly disinterested in blood donation since the end of 1936, when the S.M.C. found that the work of organising blood donors had got too big and out of hand for them.

Perhaps then it is conscience that has inspired Miss Schiller, Secretary of the S.M.C. to approach me the other day to ask us whether the S.M.C. could attempt to kindle student interest in Blood Transfusion. My previous efforts to enrol student donors by a direct approach through lecturers and professors have not met with much success. Now, perhaps the publicity given the Service by the disasters at Lesley,

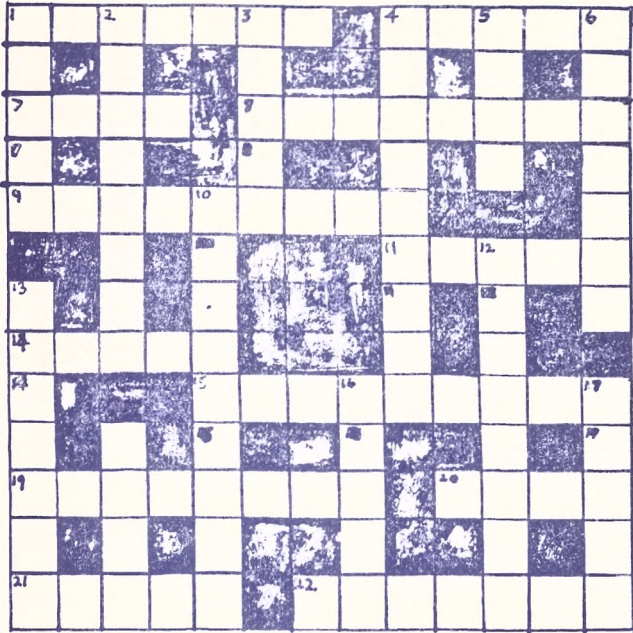
Albertynsville and Payneville and the difficulty experienced in obtaining the required blood for the Eley case; and the other day by the explosion at the Crosby High School have caused the conscience of the Student to prick harder than the needle.

It is astounding to think that a well-known surgeon sometimes requires 20 pints of blood for a single operation, more than the entire blood content of the body and that Anaesthetists will not give an anaesthetic for brain, thoracic or abdominal operations unless 4 or 5 pints of blood are available and several pints of plasma.

Besides satisfying his conscience, a student may enjoy other advantages in becoming a blood donor. This membership entitles him to a say in the affairs of the S.A. Blood Transfusion which is directly under the management of the donors through its various committees. A donor also enjoys the privilege of obtaining free supplies of blood should a dependent require transfusions.

The price of blood today is £3. 5. 0. per pint. This fee is charged for the equipment used in obtaining the blood, the laboratory tests performed and the giving set and also includes the token fee to the doctor administering the transfusion in private cases. Financing of the free ante-natal service, which screens every expectant mother free of charge, traces the development of antibodies throughout pregnancy and provides a replacement transfusion at anytime by a team of experts. Your blood may save the life of an Rh baby or prevent the community from having another spastic idiot on its hands and another couple from having a permanent "baby".

# EASY AS A B C BY D & E



## ACROSS

1. Wonders about Mr. Slave (7)
4. Listened hard with the most common letter (5)
7. Cede (4)
8. Burns friends in the end (8)
9. Does she star in the oxidation that stains? (9)
11. Insects which make clicking noises? (5)
14. Uses I to confuse this topic (5)
15. There are many of these in the desert (4) (5)
19. The maker of a will is not (8)
20. Not at all odd (4)
21. Attend to the verse (5)
22. The scientist rolls parchment (7)

## Down

1. May be strength (5)
2. Goes backwards (3)
3. Scale the cords (5)
5. Anagram of 18
4. Must one heed atoms here? (9)
6. Abhor it (7)
10. Not having ever been 9 (9)
12. The rival can come to the festival (8)
13. Exceedingly small periods of time? Not very small! (7)
16. Characteristic of the district of Doris in Ancient Greece (5)
17. Found in and about 15 (5)

Across: 2. defer 7. Anti 8. ends  
 9. chat 10. measured 12. conrad  
 13. enlist 15. vessel 17. cameos  
 18. rebounds 21. nave 23. what  
 24. dust 25. nerve.

## Down:

1. inch 2. disturbs 3. formed  
 4. rebate 5. zebu 6. edge  
 11. dates 12. cover 14. lemonade  
 17. castor 19. echo 20. otto  
 22. vest.

(ctd. from page 10) Cybernetics. notions. Anybody who thinks that this danger is purely imaginary, should refer to an article by the eminent neuro-physiologist, Eccles, in Nature, July, 1951, in which it is suggested that we should return to Descartes's theory of the soul.

PLEASE SEND IN YOUR  
 CONTRIBUTIONS  
 FOR THE AURICLE TO  
 SMC.OFFICE.

EAT AT THE REPECTORY  
 AND ENSURE YOUR  
 METABOLISM REMAINS GEARED

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S.B.C

Remember to Vote

MONDAY 27th

### Guest Editorial (ctd.)

More important than all this, however, will be the steady advance in our knowledge of the mechanisms of disease based on an improved physiological outlook. Recognition of the significance of the freshness and quality of food and of the baleful effects of industry and the living conditions which follow in its wake are surely of the utmost significance. The perpetuation of air pollution, the lack of control of dust, the anachronism of indiscriminate burning of coal with consequent soot and fog are surely among the factors which require to be considered in the future therapeutic programme.

Two further phases seem to me to be worthy of attention. The first is the extent to which modern remedies bring illeffects and even accidental death in their wake. Worse still is the equanimity with which we accept these hazards as part of the normal risks to which the patient, often unbeknown to himself, must be subjected. I, for one, do not accept this position and feel that we must direct our minds urgently towards its eradication. Especially must this be the case in the use of drugs with dangerous potential for disease conditions which present no inherent risk to life.

The second is the extent to which the doctor requires the assistance of many others in the treatment of his patients. In the days when this amounted at the most to massage and a little perfunctory electrical treatment, to spa treatment and to astonishingly effective occupational therapy, the prescribing of such ancillary treatment was a simple matter. Nowadays it requires a profound knowledge of many other sciences and arts to be able effectively to prescribe such ancillary treatment. It is of

prime importance to be able to prescribe it and must remain a function of the medical practitioner to so prescribe.

The immediate therapeutic future is pregnant with potential out of chemical industry but we must see that we control the ultimate impingement of the products on our patients. The prospect is a great one.

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### Cybernetics. (ctd.)

an instrument be made to enable a blind man to "see" through his auditory nerve somewhat as an artificial hand grasps under control of the muscles of the upper arm).

Having given an idea of the direction of work of the cyberneticists, I must now list briefly some objections to, some limitations of, and some dangers in their approach:

FIRST: the human brain is not an electronic machine and one feels that thinking of it in such terms is rapidly leading to a narrowness in neurology and taking attention away from the problem of how the brain actually works.

SECOND: one feels that the machine builders have more to learn from the neurologist than vice versa. The electronic brains are attempts to imitate some aspect of the functioning of the human brain; too often the cyberneticists seems to put it the other way.

THIRD: the philosophical implications of cybernetics are of fundamental importance. Cybernetics looks like a philosophically materialist approach. But, as always, a too mechanical materialism leads to a re-introduction of idealism or dualism. If one says the brain is a machine, one is tempted to look for the OPERATOR of the machine and this inevitably leads to the postulation of spirits, "mind-stuff", souls and other mystic and dualistic



# SPORT.



Jack's Corner.



Looking back over the first quarter, the Witsies certainly have been conspicuous on the sports fields, gaining substantial wins in the athletics, swimming and water-polo intervarsities and last but not least excellent wins on the rugby field.

## RUGBY:

In an earlier issue of the Auricle, we said that prospects for the Wits. club looked rosy this year; but what an understatement - they look excellent - judging the way the team have started off this year - not losing a single game in all friendlies and league matches.

With an eye to intervarsity - all I can say is Tukkies beware! The old Witsie rugby machine, playing the beautiful open rugby, it is so well known for - is back. One just had to be in the stands at Ellis Park to see it, when the back line in a beautiful move snatched a last minute win against Wanderers. Showing grand form this year is especially the much discussed Wulf Rosenberg, Ulgate, the captain Neil Freeman, and Freddie Herbst - with his accurate place kicking. Keep it up boys.

In conclusion I do hope that the pifflings of those, who always think they know better and who want new S.R.C.'s will stop, so that a timely election of cheerleader can be held to give our team the necessary support on I.V. Day.

## SWIMMING:

For the th time in succession Wits have again won the Intervarsities swimming title with some excellent displays.

Wits too, captured the water-polo title back from Cape Town, 3 in the team being selected for combined universities - namely Shapiro, Doppelt and Lenny Seiman. The last named to be congratulated on selection for Messiah's Corner

## THE CONGRESS.

They were discussing whether Sexual Intercourse was a pleasurable undertaking or whether it was just routine hard work.

After hours of deliberation the vote was taken. 50% of the delegates said it was hard work. 50% said it was pleasure.

It was unanimously agreed that the casting vote would be given to the first passing man-in-the-street. They happened to pick on Oom Piet who was visiting New York. They explained their problem to him and in a breathless hush awaited his answer.

"Well," he said, "personally I think it's hard work. On the other hand if it really was hard work then in my country the natives would have to do it.

## DAFFYNITIONS.

Fame: The knack of dying at the right moment.

Good Sport: A person who always lets you have your own way.

Conversation: A game played by four people and better known as bridge.

Sandwich: A desperate attempt to make both ends meet.

Swelled-Head: Nature's frantic effort to fill a vacuum.

Liberty: The right to mind everyone else's business.

Average Man: Anyone who thinks he isn't.

Scandal: When nobody does anything and everybody talks about it.

Apartment: A place where you start to turn off the radio and find you've been listening to the neighbours.

REMEMBER

S.R.C. ELECTIONS

MONDAY 27th APRIL.

YOUR VOTE IS IMPORTANT!!!