exhibited. There was a noticeable freedom

from post-operative hæmorrhage.

Moore, writing in the Journal of Laryngology, Rhinology and Otology, for April, 1919, states that the injection of 'Pituitrin' prior to tonsillectomy lessens hæmorrhage, increases the strength of the heart-beat and

reduces its frequency.

O'Malley states that 'Pituitrin' reduces the coagulation time of the blood by one-half, this effect beginning in 15 minutes and lasting for 24 hours. Prior to tonsillar operations 12 minims (0.7 c.c.) for a child and 15 minims (0.9 c.c.) for an adult may be injected hypodermically (Brit. Med. Jour., 1921, II, 435).

'Pituitrin' in Cardio-vascular Disorders

'Pituitrin' has proved of great value in various disorders in which it is desirable to raise arterial tension.

Two historical papers discussing the pressor effect of 'Pituitrin' are those by Houghton and Merrill and by Beck and O'Malley. Houghton and Merrill showed that the elevation of blood-pressure produced by an injection of 'Pituitrin' may last for 30 minutes or more (Jour. Amer. Med. Assoc., November 28th, 1908). Beck and O'Malley found that such an injection exerted an inhibitory influence upon the pulse-rate which

was even more lasting than the bloodpressure-raising effect (American Medicine, October, 1909). Geikie Cobb points out that the tonic effect of pituitary extract upon the heart and blood-vessels differs from that of Adrenalin in that it causes slowing of the pulse, whereas the latter drug increases the rapidity of the heart-beat (Medical Press, August 16th, 1916).

The tonic circulatory action of 'Pituitrin' has led to its use in combating collapse. Howell, writing in the American Journal of the Medical Sciences for October, 1914, states that pituitary extract produces and maintains a rise in blood-pressure more effectively than Adrenalin does, and is therefore to be preferred in conditions of circulatory collapse.

For maintaining blood-pressure in pneumonia, Solis-Cohen advises the injection of 1 c.c. of pituitary extract every third hour (or more frequently if there is need) whilst fever persists (Jour. Amer. Med. Assoc ..

December 6th, 1919).
Wynn states: "The best immediate remedy (for hæmoptysis) is an intramuscular injection of 0.5 c.c. to 1 c.c. of 'Pituitrin.' This is the only drug known which lowers pulmonary pressure whilst increasing systemic pressure. I now use this as a routine in all severe hæmoptyses, and have had better results than from any other drug" (Medical World, September 29th, 1922).

Effect on Gastric, Intestinal and Vesical Musculature

'Pituitrin' is of great service in various atonic conditions of the gastro-intestinal tract. In cases of intestinal stasis it promotes peristalsis, restoring normal bowel movements and preventing or dispelling the accumulation of gas in the colon. In postoperative anuria it stimulates the muscular coat of the bladder and re-establishes its normal function.

Sophian (Missouri State Med. Assn. Jour., St. Louis, 27, 367-424, August, 1930) asserts that a nasal spray of o.5 c.c. of posterior pituitary extract once, twice, or three times daily is effective in producing one or more bowel movements, usually in from one to seven hours after the use of the spray. Large doses produce cramps. The spray has been used to produce bowel movement in post-operative, general abdominal and intestinal cases, in atonic bowel, in ordinary constipation and in spastic constipation; also in bowel adhesions with local retention. The results are surprisingly uniform and the physiological effect is excellent. Experience shows that after a few days the dosage must be reduced, which is particularly encouraging, especially in cases of simple constipation in which the normal physiological bowel movement with suitable dietetic measures can be established. Black, writing in the Lancet of February 12th, 1916, states that the intestinal paresis which often follows an abdominal operation may generally be overcome by giving 1 c.c. of 'Pituitrin' hypodermically, and, half an hour later, an enema consisting of 1 fluid drachm (3.5 c.c.) of strong solution of

ammonia in 1 pint (568 c.c.) of water. Vogel, of Dortmund, in his article "Die

Vogel, of Dortmund, in his article "Die Massnahmen zur Anregung der Peristaltik," mentions the use of pituitary extracts in the treatment of intestinal stasis. These hormones, he writes, act as regulators of the circulation as well as of the vegetative and cerebro-spinal nervous system, in this way influencing metabolism (Klin. Woch., No. 36,

September 2nd, 1928).

Elmer, Ptaszek and Scheps (Klin. Woch., September 20th, 1930) describe the results of a study of the action of 'Pitocin' and 'Pitressin' upon intestinal peristalsis and their application to the treatment of post-operative intestinal paresis. 'Pitressin' and 'Pitocin' were found to exhibit a mutual antagonistic action upon intestinal peristalsis since 'Pitressin' stimulates intestinal movements and 'Pitocin' in larger doses has an opposite effect. 'Pitressin' consequently is superior to 'Pituitrin' in the treatment of intestinal paralysis, since in the former the inhibiting factor of 'Pitocin' is absent.

'Pitressin' is advocated as having a very strong and successful effect in intestinal paresis, and the authors say that all cases where no mechanical obstruction exists constitute an indication for 'Pitressin' treatment and that of primary importance are

conditions of post-operative paralysis.

Solis-Cohen states in the New York Medical Journal of June 8th, 1918, that having employed pituitary extract in cases of pneumonia to counteract falling blood-pressure, he has found that it has the further advantage of preventing tympanites, or of helping to overcome it, if it is present.

'Pituitrin' is of great service both for the prevention and relief of post-operative urine

retention.

Hofstätter states that, except in cases of severe injury to the bladder, 'Pituitrin' permanently relieves most cases of anuria or dysuria following labour or gynæcological operations (Brit. Med. Jour. Epit., 1912, I, 51). Ebeler recommends that the injection should not be given as soon as the patient feels a desire to urinate, but reserved until the bladder is fairly full (Brit. Med. Jour. Epit., 1914, I, 68). It has been found that a weekly dose of 'Pituitrin' sufficed to maintain normal function in the case of a patient who had previously been entirely dependent upon catheterisation.

'Pituitrin' has proved very effective in overcoming urinary incontinence. Mikhailow considers that in many cases the disorder is due to atony of the sphincter of the bladder, which is corrected by the stimulating effect that 'Pituitrin' has on involuntary muscle. He reports excellent results both in children and adults from a series of three or four subcutaneous injections of 'Pituitrin,' in doses of 0.2 to 1 c.c., according to the patient's age (Urological and Cutaneous Review, October, 1917).

' Pituitrin' is also said to be effective in the case of children when administered

sublingually.

'Pituitrin' in Asthma

The fact that 'Pituitrin' exerts a more prolonged constringent influence upon the arterioles than that exercised by Adrenalin led to its use in the treatment of asthma.

In the *Medical Times* of May, 1917, Satterthwaite reported that pituitary extract, by reason of its relaxing effect on smooth muscle fibres, proved useful in the bronchial spasm of asthma.

It is now generally considered that better results in the treatment of these cases are obtained by a combination of 'Pituitrin' and Adrenalin (e.g., Pitrenalin, P., D. & Co.) than from either agent alone. Krause is of opinion that the pituitary principle sensitises the respiratory centre of the bronchial muscles to the action of the Adrenalin, and thereby intensifies and prolongs the effect (Therapie der Gegenwart, No. 7, 1913).

Bensaude and Hallion report that the combined drugs have proved very effective in asthmatic subjects ranging from 8 to 60 years of age: prompt relief was conferred and the interval between attacks prolonged

(Medical Press, December 4th, 1918).

Good results with pituitary extract in cases of bronchial asthma induced Veits to apply it in allied disorders, *i.e.*, the various forms of vasomotor rhinitis. The author believes to have found in pituitary extract a suitable medium, either alone or in combination with other forms of treatment, to alleviate the disorder for a shorter or longer period. As a rule, he injects 1 c.c. 'Pituitrin' at intervals of 2 to 3 days, and finds that three injections usually suffice. (Zeitschr. f. Hals-, Nasen- u. Ohrenheilk., Bd. 19, Vol. 2, 1927).

Singer recommends the use of 'Pituitrin' in the treatment of cardiac asthma. He found that one ampoule injected intramuscularly is able to cut short a severe attack within a few minutes. (Die ärztliche Praxis,

No. 7, 1927, 180.)

'Pituitrin' in Diabetes Insipidus

Posterior lobe disease is commonly attended with marked polyuria, and striking results have attended the use of 'Pituitrin' in this condition. This agent, indeed, is also a diagnostic of diabetes insipidus, for

if polyuria persists after a course of 'Pituitrin' injections it is due to some

cause other than diabetes insipidus.

Langdon Brown reports in *The Lancet* of June 7th, 1919, a case of diabetes insipidus following paratyphoid fever, in which the injection of pituitary extract reduced the daily urinary output from about 590 ounces (16.75 litres) to 200 ounces (5.68 litres), the skin became moist, and thirst was less troublesome.

In The Lancet of August 21st, 1920, Davidson reports a case of diabetes insipidus, in which about 15 pints (8.5 litres) of pale urine of low sp. gr., free from sugar or albumin, were passed daily. No other symptoms of pituitary insufficiency were discoverable. Hypodermic injections of 'Pituitrin' caused a considerable diminution in the urinary output, though oral doses appeared to have no effect.

In *The Practitioner* for October, 1920, Cammidge reports a case of diabetes insipidus in which the injection of pituitary extract greatly reduced the daily output of urine, but the volume increased again when the drug was discontinued. In *The Lancet* of December 23rd, 1922, this author (with others) states that its use should be avoided in cases of glycosuria as it tends to increase

the sugar content of the blood.

Zadek claims that 'Pituitrin' has an action in controlling the polyuria of diabetes

insipidus far superior to that of other pituitary extracts examined. In one case in particular, the amount of urine excreted was reduced from 3,000 c.c. to 750—1,100 c.c. daily by the administration of 'Pituitrin' in doses of 1 c.c., four times daily. (Zeitschr.

f. klin. Medizin, 1927, 602.)

After examining the effect of nine different commercial preparations of the pituitary gland on two cases of diabetes insipidus in children, Emilie Weiss came to the conclusion that 'Pituitrin' (P., D. & Co.) was the only one that caused a definite decrease in the quantity of urine excreted and of water consumed, and an appreciable increase in the concentration of salts in the urine. The effect of 'Pituitrin' was thoroughly reliable and rapidly exerted. Moreover, it was remarkable for its prolonged after-effects, which in one case persisted for four months. The author suggests that in explanation of these results it may possibly be found that children react to pituitary extract differently from adults. (Monatsschr. für Kinderheilkunde, November, 1928, Vol. 40, No. 5.)

Intranasal Administration

It has been claimed that 'Pituitrin' sprayed into the nose exerts its systemic effect. Allen and Sherrill (Journal of Metabolic Research, 1923, III, 479-510) report beneficial results in diabetes insipidus by

spraying 0.2 to 0.3 c.c. into the nasal chambers. 'Pituitrin' given either subcutaneously or by nasal spray, they state, shows its usual effect in reducing the thirst

and the polyuria (see also page 27).

It was shown by Gargle, Gilligan and Blumgart (New England Journal of Medicine, March 15th, 1928) that, in four normal men, single doses of 0.25 c.c. of 'Pitressin' checked the excretion of urine for five or six hours after drinking a litre of water. In two patients with diabetes insipidus, 'Pitressin' effectively controlled the thirst and polyuria. In these two cases intranasal administration of 'Pitressin' proved more effective than subcutaneous administration.

J. R. Campbell, Junr., and H. L. Blumgart (Amer. Jour. Med. Sci., December, 1928) have demonstrated that intranasal applications of 'Pituitrin' are as effective as injections. Eight cases of different etiology are reported in which the polyuria and polydipsia were effectively checked by this measure. One method is that of spraying o.5 c.c. to 1 c.c. of 'Pituitrin' at three, four, or six hour intervals into the nose so as to be deposited mostly on the roof of the nasopharynx. The second method is by means of a cotton swab soaked in o.5 to 1 c.c. of the extract and inserted high up into the nostril. The efficacy of the applications is supposedly due to the continuous intranasal absorption of the drug

over a long period of time and that the absorption takes place through the lymphatics and not through the vascular routes.

'Pitressin' Nasal Jelly

For the treatment of diabetes insipidus Parke, Davis & Co. supply the anti-diuretic and pressor principle of posterior pituitary gland in the form of 'Pitressin' Nasal Jelly. This is twice as active as 'Pituitrin,' being assayed to twice the pressor activity of the latter.

Cholelithiasis and Nephrolithiasis

Schöndube (Klin. Woch., No. 16, 1928) reports good results in the expulsion of gall-stones with intra-duodenal infusions of magnesium sulphate (20 c.c. of 33 per cent. solution), combined with a subcutaneous injection of an active posterior pituitary preparation. He particularly recommends this treatment (1) in early and complete occlusion of the bile duct, for in such cases it may be assumed that the bile ducts have been sufficiently distended through the migrating calculi as to make their expulsion possible, (2) if the calculi are sufficiently small, i.e., not larger than a cherry-stone, and their position such that they can be grasped by the muscular movements of the organ, (3) if an operation is contra-indicated or refused by the patient.

Kalk and Schöndube were the originators of the 'Pituitrin' test which can be used in the diagnosis of diseases of the gall-bladder. The technique of this test is as follows:-A duodenal sound is applied and six testtubes of clear bile of alkaline reaction are drawn off. Then 2 c.c. 'Pituitrin' are injected. In some cases an inhibition of biliary secretion occurs after 5 minutes. Then 5-20 c.c. of duodenal fluid are drawn off at intervals of 5 minutes. It will be found that after 20 or 25 minutes a dark coloured secretion of thick viscous bile suddenly appears and continues for from 10 to 60 minutes, gradually assuming a lighter hue, until finally pale yellow normal bile is again removed. The test is said to be positive when a marked darkening of the bile occurs and negative if no such pigmentation takes place. The time taken from the moment the injection is made to the appearance of the darkened colour is known as the latent period of the test. A correctly functioning gall-bladder gives a positive 'Pituitrin' test, but when anything is preventing the discharge of the gall-bladder content into the duodenum (e.g., occlusion of bile-duct, contracted gall-bladder, cholelithiasis, etc.) a negative test results. However, in certain cases, e.g., cholelithiasis in which an obstruction of the bile-duct or cystic duct has not occurred, the 'Pituitrin' test may give positive results, but even then

sufficiently wide deviations from normal conditions will be evident to enable a

correct diagnosis to be formed.

Therapeutically these workers found that 'Pituitrin' injections produced good results in diseases of the gall-bladder in which biliary congestion is a prominent feature, in fact, they are of the opinion that congestion of the gall-bladder is one of the chief indications for the use of 'Pituitrin.' The authors refer to 'Pituitrin' as "the best preparation, which never failed us." (Zeitschrift für die gesamte exp. Medizin, No. LIII, Vol. 3/4, 1926; Medizinische Klinik, No. 52, 1925.)

Kalk and Schöndube found that postpituitary extracts could produce strong contractions of the urinary passages especially of the ureter and that this action could be utilised for the purpose of expelling small renal calculi (*Deutsche med. Woch.*,

No. 2, 1926).

'Pituitrin' in Malignant Disease

The use of 'Pituitrin' in malignant disease is suggested by Susman (British Medical Journal, October 31st, 1931), on the hypothesis that in cancer cases there probably exists, in several of the ductless glands, an unbalanced state which permits the development of the new growth. The following points appear to play an important

part:—(1) over-activity of the anteriorpituitary; (2) under-activity of the posterior pituitary; (3) an increased demand for carbohydrate.

It is suggested that, whereas one of the known functions of the anterior pituitary is to promote growth, the posterior pituitary, on the other hand, exerts a restraining influence and a check on the activity of the anterior lobe. Furthermore, it is suggested that the genital glands also have a restraining influence on the anterior pituitary.

On this hypothesis the following therapeutic measures were adopted:—(a) A diet low in carbohydrate to starve the growth; (b) Injection of 'Pituitrin' to reinforce the secretion of the posterior pituitary, and (c) Injection of Theelin (ovarian follicular hormone) to restrain the over-activity of the

anterior pituitary.

The doses of 'Pituitrin' ranged from 0.5 to 2 c.c. twice daily and of Theelin from 0.25 to 0.5 c.c. daily. Although the cases treated to date by this method are comparatively few, in all the tumours appear to show some regression, life has been prolonged, and all the patients look and feel better than before. Commenting on one case in particular, the author says: "The growing edge of the tumour disappeared in five days and the tumour began to separate at fourteen days, at six weeks a probe could be inserted some distance under the growth

at most points along the circumference of the tumour, and at seven weeks the tumour was successfully enucleated without obvious cutting. This case alone shows that the treatment based on a definite hypothesis was successful. There is nothing, however, to indicate that recurrences may not happen at some time or other. It is hoped that the patient will continue receiving periodical injections of 'Pituitrin' and Theelin for at present there is no means of establishing the fact that the normal endocrine balance has been restored."

Norgate considers 'Pituitrin' of service in cases of inoperable cancer, as it appears to diminish hæmorrhage, to retard growth, and to have a beneficial influence upon the cachexia, improving the appetite and strength (British Journal of Surgery, April, 1922).

Unclassified

K. Zeiner-Henriksen reports good results in Tidsskrift for den Norske Lægeforening, Nos. 6 and 7, 1928, in forty-two cases of migraine treated with 'Pituitrin.' An intramuscular injection of 0.5 c.c. was given once a week, and in twenty cases there has been prolonged improvement. In the case of a woman who had been the subject of regular attacks of migraine since she was seven years of age, the treatment was commenced at the age of twenty-three, and after a total of

twelve injections she was free from attacks during an observed period of more than a year. He also discusses the underlying reason for this success, and suggests that it may break a vicious circle which depends on faulty functioning of the pituitary body. He holds that this treatment is more effective

than other symptomatic remedies. Mayers (September-October, 1931, issue of Endocrinology) says that pituitary extract by injection is the only effectual remedy for pituitary headache. Pituitary gland by mouth alone has failed to give satisfactory results. The author estimates from his own experience that about sixteen out of every thousand cases of headache that constitute so great a problem in the clinical handling of gynæcological patients are proper subjects for pituitary therapy. The characteristic menstrual dyscrasias associated with pituitary headache are, he finds, subject to incidental correction by means of pituitary therapy administered for relief of the headache.

Crofton points out in *The Lancet* of January 20th, 1917, that a subcutaneous injection of 1 c.c. of 'Pituitrin' quickly controls symptoms of anaphylaxis arising immediately after a serum injection, and also the skin rash to which the serum may give rise.

It has been reported that the administration of 1 c.c. of 'Pituitrin' led to a prompt subsidence of the symptoms in a case of herpes zoster which the usual measures had failed to relieve.

In twelve cases of pyelitis occurring during pregnancy, Miller, of New York. states that the use of pituitary extract during or after parturition was followed by a clearing up of the symptoms with no recurrence in six months. In twelve cases in which ergot was used post-partum there were seven recurrences in six months. Miller also reports (New York State Journal of Medicine, June 15th, 1928) nine cases of pyelitis, more or less chronic, in nonpregnant patients, in which the use of pituitary extract cleared up the symptoms; no recurrence had been observed several months after treatment. Some of these cases were of nine or ten years' standing.

Administration and Dosage

To obtain full physiological action 'Pituitrin' should be administered by deep intramuscular injection in doses of 5 to 10 units, i.e., 0.5 to 1 c.c. (8 to 17 minims) repeated as necessary. If given orally the dose should be 5 to 20 units, i.e., 0.5 to 2 c.c. (8 to 34 minims), and should be retained beneath the tongue until absorbed. The intranasal method of administration is referred to on pages 27 and 28.

In obstetrics, where the os is well dilated

or readily dilatable, and where there is no anatomical impediment to normal delivery, 2 to 2½ units, i.e., 0.2 to 0.25 c.c. (3 to 4 minims) may be injected and repeated as required (see page 20).

In post-partum hæmorrhage an injection of 2 to 10 units, i.e., 0.2 to 1.0 c.c. (3 to 17 minims), particularly if made in the uterine wall, will cause a rapid contraction

of the uterus.

Contra-indications: nephritis, myocarditis, eclampsia, arteriosclerosis, risk of uterine rupture (also see page 21). (With the exception of the last-named condition, 'Pitocin' could probably be substituted for 'Pituitrin.')

In severe cases of shock it should be given intravenously in doses of $1\frac{1}{2}$ to 10 units, *i.e.*, 0·15 to 1 c.c. (2 to 17 minims) well diluted with physiological sodium chloride solution. In less severe cases 5 to 10 units, *i.e.*, 0·5 c.c. to 1 c.c., may be injected intramuscularly.

The Relative Spheres of 'Pitocin,' 'Pitressin' and 'Pituitrin'

The separation of the two active principles from pituitary extract has made it possible to utilise the oxytocic effect of 'Pitocin' to the exclusion of the pressor effect of 'Pitressin.' Alternatively, it is possible to utilise the blood-pressure raising principle

(with which is associated the diureticanti-diuretic action) to the exclusion of the

oxytocic effect.

Whilst there are many conditions for which it may still be regarded as quite satisfactory to use 'Pituitrin,' there are instances in which the use of one of the two separated principles is desirable. The relative spheres of usefulness of 'Pituitrin,' 'Pitocin,' and 'Pitressin' may be broadly summarised as follows:—

'Pituitrin' may be used in uterine inertia (the exception being complete inertia) with normal or sub-normal blood-pressure; in post-operative intestinal distension and in

dysuria.

'Pitocin' may be used in cases of uterine inertia associated with high blood-pressure, e.g., eclampsia, or when there is reason to believe that the patient is in a dehydrated condition.

'Pitressin' may be used for the treatment of post-operative shock; in diabetes insipidus; and whenever it is desired to raise the blood-pressure.

Packages

'Pitocin' is issued in 0.5 and 1 c.c. 'Glaseptic' ampoules, in boxes of 6 and 12.

'Pitressin' is issued in 0.5 and 1 c.c. 'Glaseptic' ampoules, in boxes of 6 and 12.

'Pituitrin' is issued in 0.5 and 1 c.c. 'Glaseptic' ampoules, in boxes of 6 and 12.

'Pitressin' Nasal Jelly is supplied in 3-gramme collapsible tubes, six in a package, and each gramme represents 20 pressor units; 1 gramme of the jelly is equivalent to 2 c.c. of 'Pituitrin' in pressor activity.

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SHOW of SHOWS

at the

on EASTER MONDAY

BANTU MEN SOCIAL CENTRE (in aid of Bantu Men's Social Centre Sports Fund)

APRIL 14, 1941 Beginning at 8.30 p.m.

COME EARLY AND AVOID DISAPPOINTMENT

*

AFRICAN RHYTHMERS & JAZZ MANIACS

in attendance

*

Admission 1/6

Sport + Recreation: 16/11/45

The Executive Committee of the Bantu Men's Social Centre Request the pleasure of your company at the

Annual Founders Day Celebration
On Friday 16th November 1945 at 8 p.m.

Guest of Honour:- The Hon. Major Piet van der Byl (Minister of Native Affairs)

R.S.V.P.

THE ACTING SECRETARY
P.O. BOX 4767
JOHANNESBURG

THE COMMITTEE: Messrs W.G. Ballinger, Senator the Hon. H. M. Basner, A. Bovet, O. B. Bull D. M. Denalane, Councillor James Gray (M.P.C.), L. C. Koza, J. G. Malie, S. Mampuru, (Acting Chairman), J. C. Mavimbela, G. Motsieloa, S. P. Mqubuli, Dr. Ray E. Phillips (on Furlough) J. M. Pim J. D. Rheinallt Jones, C. N. Setlogelo, W. R. Slater, Dr. James Dexter Taylor (Vice Chairman) and G. G. Xorile

Wilhertorce Institute

Craining:

Head

Heart

Hand

Cordially invites you to the

Founders Bay Celebration,

On Saturday, 30th March 1940.

from: 10,30 a,m, to 12,0 p,m.

SPORTS

in the

Afternoon.

Cerpanes and occasions

Daughters Of Africa

The Managing Committee of the Baughters of Africa (Crown Mines Section) request the company of M Tymps Lymps

at a Reception in honour of the Pelegates of the Paughters of Africa attending the Second Annual Conference to be held at Wilfrid Hall, Crown Mines on Thursday, the 18th Pecember, 1941 at 8 p.m.

Speeches Solos Bancing

R.S.V.P.

MRS. E. M. PILISO,
P.O. BOX 23,
CROWN MINES.

Admission: 1/-

Military Matters Sholes NON-EUROPEAN ARMY SERVICES.

PRESENTATION OF MEDALS 1939 - 1945.

Col. Senator the Hon. E. J. Stubbs, O.B.E., Director Mon-European army Services,

requests the pleasure of the company of

DRE MRS. A.B. XUMA and guest,

at the Presentation of Nedals by Kis Excellency, the Officer Administering the Government; The Rt. Hon. Dl. J. de Wet,

at the Wanderers Grounds, Johannesburg,

on Friday, 5th October, 1945, at 11 a.m.

OFFICIAL GUEST ENCLOSURE

Girlşi Induştrial & Literary School,

THE PRINCIPAL, STAFF AND GIRLS

request the pleasure of the Company of

AT THEIR ANNUAL PRIZE DISTRIBUTION AND SCHOOL-CLOSING EXERCISES.

Wilberforce Memorial Hall, Wednesday, December 17, 1930,

Chairman:- His Honour The Governor's Deputy
T. N. GODDARD, ESQ., M. B. E.

MRS. GODDARD AND MISS K. B. COOPE,

(Supervisor of Infant & Female Education)

have very kindly consented to Distribute the Gifts from the Christmas Tree and Annual Prizes, respectively.

Industrial Exhibition-3.45 to 4.15 p.m.

Programme

4.20 p.m.



PHI OMEGA CHAPTER OF ALPHA KAPPA ALPHA SORORITY INVITES YOU TO BE PRESENT AT THE SILVER ANNIVERSARY TEA IN HONOR OF ITS FOUNDERS ON THE AFTERNOON OF SUNDAY, JANUARY THIRTIETH FROM FOUR TO SIX O'CLOCK YOUNG WOMEN'S CHRISTIAN ASSOCIATION BUILDING

SIX HUNDRED NINETEEN NORTH CHESTNUT STREET

2781 MEMBERSHIP RECEIPT.

TELEPHONE 33-8110 P.O. Box 4767

BANTU MEN'S SOCIAL CENTRE,

ELOFF ST. SOUTH, JOHANNESBURG. Received from pounds Ly the sum of shillings

pence, being Membership Fee

from 8: 3: 37 to 8 - 3 = 42 PRO. BANTU MEN'S SOCIAL CENTRE.

B.M.S.C.

unsorte6

BANTU MEN'S SOCIAL CENTRE,

JOHANNESBURG

CHXX00

This is to Certify that

Mr. A. B. Xuma.

having duly been approved by the Executive Committee on

8th March 1928. 194 ... is entitled to the privileges of Membership of the Social Centre.

Membership expires on 8th March 1942.

THE B.M.S.C.

is a Club where Bantu men can improve themselves when they are not at work. It aims to make them stronger and more efficient in Body, Mind and Soul.

The B.M.S.C. has Night School Classes, Club Meetings, Gymnasium with Dressing Room and Lockers, Shower Baths, Social and Game Room, Library and Ten and Coffee Counter.

The confec counter.

It Offers Bantu Men

many activities, among them the following: Night School, Debating, Singing Club, Athletics, Book-keeping, Weekly Bioscope, Social Evenings, Bible Class, Paring Tennis etc. etc.

Any Bantu Man who is approved by the Executive Committee may join. The B.M.S.C. is in every way inter-denominational. It offers opportunity for men to express their religion in everyday life.

B.M.S.C.

Sport + Recreation

BANTU MEN'S SOCIAL CENTRE, 8/3/36 JOHANNESBURG.

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Happy Christmas

Best Wishes

- for a -

Merry Christmas

- and a -

Happy Nem Year

Dr. & Mrs. A. C. Xuma and Family

"EMPILWENI" 85 TOBY STREET SOPHIATOWN

JOHANNESBURG

Springbok Series 3021





The Chief of the General Staff requests the pleasure of the company of

at a Presentation of Medals to members of the Cape Corps and Native Military Corps by His Excellency

The Officer Administering the Government at the Wanderers Ground, Johannesburg at 10.45 a.m. on Friday, 5th October, 1945

A reply is requested to:

The Adjutant-General,

Room 31,

G.H.O. Pretoria.

Militarthers matters



Die Hoof van die Generale Staf nooi U vriendelik uit na die Toekenningsplegtigheid vir die oorhandiging van Medaljes aan lede van die Cape Corps en Naturelle-militêre Korps deur Sy Eksellensie Die Amptenaar belas met die Uitoefening van die Uitvoerende Gesag op die Wanderersterrein, Johannesburg om 10.45 vm. op Vrydag, 5 Oktober 1945

personal 4/6/46



May DESS be yours

40

Many More happy Berthdays

Cpeetings,

4th June 1946 from Betty



budated prison 1



HAPPY CHRISTMAS

Best Wishes

for a -

Merry Christmas

- and a -

Happy Nem Year

Dr. & Mrs. A. C. Xuma and Family

"EMPIL WENI"

85 TOBY STREET

SOPHIATOWN

Springbok Series 3021 Rose Relations

CHRISTMAS 1935.

"Still simple folk are led

To seek the House of Bread,

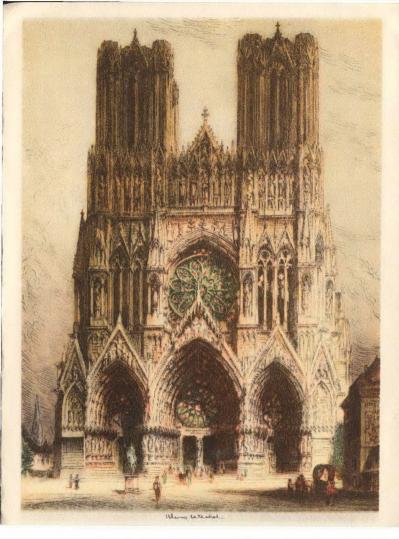
And Christ, new-born for them,

This night in Bethlehem."

---;0;----

With Christmas and New Year greetings from Edgar and Heidi Brookes.

Adams College, P.O. Adams Mission Station, Natal.

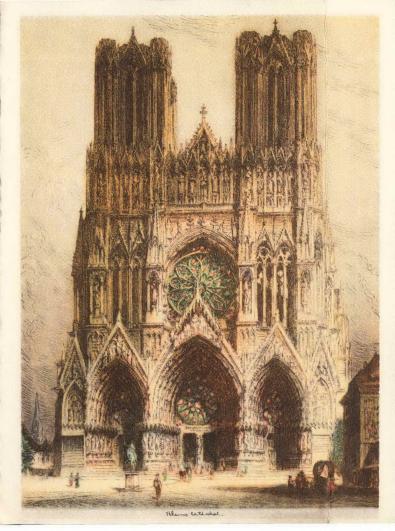


WE express no formal wish when we say to you "Merry Christmas and Happy New Year." Christ came to bring life abundant. He desires our joy to be full.

Advent this year finds our world perplexed and troubled over its temporal inadequacies. It has sore need of the Counsellor, mighty God, everlasting Father, Prince of Peace. May its hearts' inns open to receive Him.

May confidence, joy and the peace that passeth understanding be yours in full measure.

Bishop and Mrs. Thomas Nicholson



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Bishop and Mrs. Thomas Nicholson



At Christmas



The same glad WISH for HRISTMAS CHEER and HAPPINESS. for many a JEAR

Martha, Francis and Elinor Atkins





(HRISTMAS GREETINGS

and

best wishes

for the New Year

Mr. and Mrs. William Leo Hansberry

(De insede)

Collection Number: AD843

XUMA, A.B., Papers

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