

Dartmouth Naval Colleges. One has been fitted up at St. Bartholomew's Hospital under Professor Andrewes's supervision, and has already proved useful in the prevention of the spread of epidemic disease amongst the resident staff and nurses.

With the approval of the Medical Research Committee and with the kind assistance of Major Hine, I have been able to fit up at one of the public schools an experimental boiler for steam spraying; with this a 1½ per cent. zinc sulphate solution is employed. At the same time a simple routine of nasal douching and gargling is being carried out with 1 in 4,000 potassium permanganate. A nasal glass tube or irrigator is used instead of the snuffing method mentioned above. With the co-operation of the head master and the assistance of the school doctor and of the matron we are making observations which are already highly gratifying. Although it is too early to draw definite conclusions as to the value of these measures, I may say that already cases of measles, chicken-pox, and rubella have occurred during this term, and in no instance has any secondary case developed. I hope to be able to publish the results of our work at an early date.

My object in drawing attention to these methods of preventive treatment is that a great amount of public and private money is wasted by the frequent outbreaks of epidemic disease in schools, in addition to the loss of time to the boys through the dislocation of their work. In institutions where it is found to be impracticable at present to install a steam spraying apparatus I would urge the trial of nasal douching and gargling, which there is reason to believe will prove of great utility.

I wish to acknowledge my indebtedness for help given by the Medical Research Committee, and Lieut.-Colonel Gordon and Major Hine.

REFERENCE.

¹ Medical Research Committee Report, 1916-17.

Memoranda:

MEDICAL, SURGICAL, OBSTETRICAL.

QUININE IN THE TREATMENT OF ANAL FISSURE.

In the present circumstances it seems more than ever desirable to record, for the use of other practitioners, any slight advance in treatment which will save time and trouble to patient and doctor.

A typical case of anal fissure came under my care and refused operative treatment. There were tuberculous glands in the neck, a pile, and a fissure a quarter of an inch deep extending upwards from the base of the pile for more than an inch and a half. After trying the usual palliative remedies without result, and remembering the granulating power of quinine, I packed the fissure with quinine hydrochloride (about five grains) after swabbing with cocaine solution. This treatment was repeated on each of three days. In twenty-four hours the surface showed well-marked granulations, and the patient's symptoms were much relieved. She slept all night after having had pain, severe enough to prevent continuous sleep, for ten days.

After the third day that part of the fissure within reach was looking healthy, but the patient complained of pain higher up. I therefore prescribed enule cocaine gr. ½, to be followed in a quarter of an hour by enule quinine sulphate gr. 5. These were used on four days, and by that time the fissure was quite healed and all pain and symptoms had disappeared; there has been no recurrence.

The extension of this method of treatment to bullet wound and other sinuses suggests itself.

Oxford.

HELEN G. LEYTON, M.D.

A CASE OF MAGGOTS IN THE NOSE.

In October, 1916, while acting as nose, throat, and ear specialist to a general hospital in India, the following case came under my care:

A B., aged 55, complained of a headache, ascribed to a debauch on the previous evening. The next day the headache continued; he complained of pain in the nose and left ear and had an attack of epistaxis, more copious from the left than the right nostril. During the day he had several other attacks and

the headache became much more severe. When admitted to hospital both sides of the nose were full of resuscitated diet, which, it was apparent, did not originate from any bleeding vessel in Kiesselbach's area on either side. There was no history of previous nasal trouble. The left lobe of the liver was somewhat enlarged. The patient was kept quiet in bed and given calcium lactate, and the next morning found about thirty maggots on his pillow which had evidently fallen or been sneezed out of his nose during the night. The nostrils were thoroughly painted inside with liquid vaseline several times a day, which has the effect of occluding the respiratory organs of the insects. During that day and the next more larvae came away, and the bleeding entirely stopped. In all, some fifty to sixty larvae were counted, and the pathologist to the hospital was able to hatch flies from them in artificial media. The patient slowly recovered his strength, and three weeks later the headache had disappeared, and he was walking about.

The nose presented an extraordinary appearance. The greater part of the bony septum was destroyed, as also the turbinate bones on either side. It was extremely difficult, even with the most scrupulous care, to keep the nostrils free from foul-smelling crusts; well-marked atrophic rhinitis was present and persisted. There were, however, neither signs nor symptoms of sinus complications, and the patient was discharged from hospital for light duty at the end of six weeks.

The difficulty of diagnosis and the success of thorough early treatment appear to me to be the outstanding features of this case. It is probable that the insect obtained access to the nostrils and deposited its ova during a period when the man was lying outside in the open air intoxicated. Though most cases of this nature seem to occur in patients who suffer from some pre-existing pathological condition of the nose such as syphilis or some form of atrophic rhinitis, there was no previous history of either condition in this instance. Judging from a certain number of recorded fatal cases in which there appears to have been an invasion of the cranial cavity through the cribriform plate of the ethmoid, followed by intracranial sequelae, or from those which have ended fatally in septicaemia, this patient seems to have had rather a fortunate escape than otherwise, in spite of the havoc wrought in his nose by the maggots.

DAVID RANKEN, M.S.Lond., B.S.Durh.,
F.R.C.S.Eng., Captain R.A.M.C.

Reports of Societies.

SELECTION OF CANDIDATES FOR THE AIR SERVICE.

At a meeting of the Medical Society of London on March 11th, the President, Sir STCLAIR THOMSON, being in the chair, Surgeon H. GRAEME ANDERSON, R.N., attached R.N.A.S., read a paper on the selection of candidates for the air service. He suggested that for eliminating the unfit a special flying school should be instituted where border-line pupils could be instructed in flying under patient and sympathetic instructors, and with a medical officer specially interested in aviation carefully recording the results. In selecting candidates for the air service a sound constitution free from organic disease was looked for, and a fairly strong physique, in order to withstand altitude effects, such as cold, fatigue, and diminished oxygen. Normal hearing and good muscle and equilibrium sense were essential, and good eyesight was of the greatest importance. Next to vision the question of temperament was most important. The ideal aviator must have good judgement, be courageous, and not upset by fear, although conscious of the perils of his work. He must be cool in emergencies, able to make careful and quick decisions, and act accordingly. He must be ever alert, as mental sluggishness in flying spelt disaster. An aptitude for flying was found most commonly amongst those used to playing games and leading an outdoor life. Racing motorists had not made the best pilots. Candidates should be made to undergo a surgical examination, a medical examination, and a special sense examination, preferably carried out by experts in each line, and the final selection made on the total results by a medical selection committee.

Surgical Examination.

The age should be between 18 and 30 years, 24 years being about the best, though much depended upon the physiological age. Height did not matter much, but the candidate should not be under 5 ft. 2 in. As to weight, the lighter the candidate the better, but this did not

R.A.M.C., and be eligible for promotion to substantive rank. It is to be noted that the pay of a captain R.A.M.C. (Regular) is 15s. 6d. a day, but after seven years' full pay service in that rank it rises to 17s. Our correspondent's suggestions are as follows:

1. Those of the Special Reserve who were already captains on the outbreak of war (about thirty in all) should be promoted to temporary major forthwith (with pay and allowances).
2. Captains should, after five years' service, draw the 1s. 6d. extra per day allowed to Regular R.A.M.C. captains.
3. The increase of pay recently granted to combatant officers and the same scale of allowances for children should be made applicable to S.R. and Territorial officers.
4. All promotions suggested above should date back to April, 1917, as was promised at the time.

R.A.M.C. PROMOTION.

A CORRESPONDENT with the British Expeditionary Force informs us that a recent general routine order lays down that an officer of the R.A.M.C. (Regular, Special Reserve, Territorial Force, or temporary) below the rank of major who holds an appointment expressly assigned to a major in war establishments may be granted the acting rank of major when there is an actual vacancy or when a vacancy occurs owing to the absence of a major by reason of wounds or sickness. Temporarily commissioned officers also granted such acting rank will receive the pay and allowances of a major, and special provision is made for the adjustment of their gratuity.

With reference to the second report of the Departmental Committee on the promotion of R.A.M.C. officers (BRITISH MEDICAL JOURNAL, February 2nd, p. 164), another correspondent inquires whether the second part of the recommendation that a general list for promotion should be introduced "for the Territorial Force field ambulance and regimental medical officers" may be taken as applying to all regimental officers. The report makes it clear that Territorial officers only are referred to. Our correspondent maintains that a general list should be introduced for all regimental medical officers irrespective of the branch of the corps to which they belong.

Obituary.

PROFESSOR JOSEPH PRICE REMINGTON, Chairman of the Committee of Revision of the United States Pharmacopoeia, died at Philadelphia on January 1st, aged 70. He had been professor of pharmacy in the Philadelphia College of Pharmacy since 1874, a member of the Committee of Revision since 1880, and its chairman since 1901. He was the president of the first International Pharmaceutical Congress held at Brussels in 1893, and represented the United States at all the congresses held since. He was the author of *Remington's Practice of Pharmacy*, the first edition of which appeared in 1886, and he was editor of the *United States Dispensatory* since 1883.

LIEUT.-COLONEL ALEXANDER LEONARD DUKE, Bengal Medical Service, died of pneumonia at Quetta on February 27th, aged 51. He was born on October 12th, 1866, and educated at Aberdeen University, where he graduated M.B. and C.M. in 1888. Twenty years later, in 1908, he took the degree of B.Sc. in Public Health at Edinburgh. He entered the I.M.S. on September 30th, 1899, became major on September 30th, 1901, and lieutenant-colonel on September 30th, 1909. After six years spent in military employ he joined the Indian Political Department as surgeon to the British Agency at Meshed, in Persia, where he served for eight years. In April, 1904, he was appointed civil surgeon of Quetta, was transferred to the same post at Bikanir in March, 1906, and at Peshawar in May, 1909; and in December, 1910, was appointed Agency surgeon and administrative medical officer in Baluchistan. He received the Afghan Order of the Izzat-i-Afghanistan in 1907. He was a younger brother of Sir William Duke, K.C.S.I., late acting Governor of Bengal, and now a member of the Secretary of State's Council for India.

COLONEL JAMES CAMPBELL MORGAN, Army Medical Service, died suddenly of heart disease in London during the air raid on the night of March 7th, aged 53. He was born on July 18th, 1864, educated at the London Hospital, and took the M.R.C.S. and L.R.C.P.Lond. in 1886, also the D.P.H.Lond. in 1901. After serving as house-surgeon of the London Hospital, he entered the R.A.M.C. as surgeon on February 8th, 1887, became major on February 8th, 1899, lieutenant-colonel on August 30th, 1901, and colonel on March 1st, 1915, and was placed on half-pay on account of ill health on September 20th, 1916. He served on the North-West Frontier of India in the Zhob Valley expedition of 1890, also in the Tirah campaign of 1897-98, when he was mentioned in dispatches (*London Gazette*, April 5th, 1898), and received the Frontier medal with two clasps. For some years he held the post of medical officer of the Duke of York's Royal Military School at Chelsea.

Universities and Colleges

UNIVERSITY OF OXFORD.

At a convocation held on March 12th the degree of D.Sc. *honoris causa* was conferred upon William Carmichael McIntosh, M.D.Edin., F.R.S., late professor of natural history in the University of St. Andrews.

UNIVERSITY OF CAMBRIDGE.

At a congregation held on March 9th the following medical degrees were conferred, admission being by proxy:

M.D.—A. V. Poyser, V. F. Soothill.

THE COUNCIL OF THE ROYAL COLLEGE OF SURGEONS.

The following list shows the present composition of the Council; the dates after the names are those of election:

President.—Sir George H. Makins, G.C.M.G., C.B., (1) 1903, (2) 1911 P. 1917.

Vice-Presidents.—Mr. Charters J. Symonds, C.B., (1) 1907, (2) 1915; Mr. W. F. Haslam, (1) 1908, (2) 1916.

Other Members of Council.—Sir W. Watson Cheyne, Bt. K.C.M.G., C.B., M.P., F.R.S., (1) 1897 (substitute), (2) 1901, (3) 1903; Sir Anthony A. Rowley, K.C.M.G., K.C.V.O., (1) 1904, (2) 1912; Mr. W. Harrison Cripps, (1) 1905 (substitute), (2) 1909, (3) 1917 (substitute until 1920); Mr. Hilton Pollard, 1910; Sir C. A. Ballance, K.C.M.G., C.B., M.V.O., (1) 1910 (substitute), (2) 1914; Sir John Bland-Sutton, 1910; Mr. D'Arcy Power, 1912; Sir B. G. A. Moynihan, 1912 (substitute till 1919); Mr. J. E. Lane, 1913; Mr. J. A. Dunn, 1913 (substitute till 1919); Mr. H. J. Waring, 1913; Mr. W. Thorburn, C.B., 1914; Mr. W. McAdam Eccles, 1914; Mr. C. Ryall, (1) 1914 (substitute), (2) 1915; Mr. Walter G. Spencer, 1915 (substitute till 1918); Mr. F. F. Burghard, C.B., 1915 (substitute till 1921); Sir H. F. Wat-rouse, 1915; Mr. T. H. Openshaw, C.B., 1916; Mr. Raymond Johnson, 1916; Mr. Vincent W. Low, C.B., (1) 1916 (substitute), (2) 1917; Mr. James Sherren, 1917.

* Sir Watson Cheyne, being President at the time of the Council elections in 1917, did not retire, although re-elected in 1909.

With the exception of three (one each from Birmingham, Leeds, and Manchester), all the members of the Council enumerated above are London surgeons.

There are four vacancies. It is understood that Mr. Pollard, Sir J. Bland-Sutton, and Mr. W. G. Spencer are seeking re-election.

Medical News.

THE Walsingham (Norfolk) Guardians, on March 6th, agreed to an increase of 10 per cent. in the salaries of the five district medical officers.

DR. GEORGE SIGERSON, professor of biology, University College, Dublin, has been elected an honorary Fellow of the Royal College of Physicians of Ireland.

UNIVERSITY COLLEGE HOSPITAL has received a donation of £2,000 from Mr. Middleton Jameson, in memory of his brother, Sir Starr Jameson, who received his medical education at the hospital.

At a meeting of the London Association of Medical Women on March 5th Lady Barrett opened a discussion on a scheme for improving the midwifery service throughout the country, with special reference to rural areas and illegitimate cases.

THE Henry Saxon Snell prize of the Royal Sanitary Institute is offered this year for an essay on improvements in apparatus and appliances for dealing with house refuse. Essays must be delivered on or before October 1st, 1918. Full particulars can be obtained from the Secretary, 90, Buckingham Palace Road, S.W. 1.

THE King of Spain has founded a school in Madrid for the gratuitous maintenance and education of orphans of medical men, or orphans who are direct descendants of doctors. Provision is made for the reception of fifty boys and as many girls, and the number will be increased as further resources become available.

At a special general meeting of the Liverpool Medical Institution on March 7th the following addition to laws of the institution was passed by a large majority: No person who has at any time been a German or Austrian subject shall in future be eligible for election as an Honorary Member, Member, or Associate Member of the institution.

THE annual general meeting of the Royal Dental Hospital (Leicester Square) on Tuesday next at 3 p.m., at which the sixtieth year of its existence is to be celebrated, will be attended by the Bishop of London and Sir Francis Lloyd, the general officer commanding the London District. Many thousands of men from that district have been treated in the hospital in a special department, so that there has been no detriment to civilian patients.

A MEETING of the Tuberculosis Society will be held at the Royal Society of Medicine on Monday, March 25th, at 8 p.m., when a discussion on the need of hospitals for advanced cases of tuberculosis will be opened by Dr. Halliday Sutherland and Mr. Herbert Woolcombe (London Charity Organization Society). The meeting is open to visitors.

THE war record of St. Thomas's Hospital shows that to March 6th 1,032 past and present students were serving, and that 48 had been killed in action or had died on service. The honours gained were one V.C., one G.C.M.G., one K.C.B., three K.C.M.G.'s, four C.B.'s, fifteen C.M.G.'s, two M.V.O.'s, twenty-three D.S.O.'s, thirty-nine M.C.'s and three bars to M.C., two C.I.E.'s, one G.B.E., four O.B.E.'s, one M.B.E., one C.B.E. For valuable service 132 men were mentioned in dispatches (188 times). The foreign honours include eight French, three Belgian, six Egyptian, seven Serbian.

THE Metropolitan Asylums Board has drawn the attention of the Ministry of National Service to the difficulty it has experienced in obtaining sufficient women for the nursing and domestic service of the many hospitals under the control of the Board. The shortage has been felt most severely in the infectious hospitals and sanatoriums, and the children's institutions have also suffered. The dearth is attributed to the greater attractions of other services at the present time, but we are under the impression that the terms offered by the Metropolitan Asylums Board have not at any time been very attractive.

A SPECIAL Canadian exhibition, arranged in a separate room, has been added to the war collection of pathological specimens at the Royal College of Surgeons, and will be opened shortly. The Canadian Government some time ago placed a special fund at the disposal of the D.M.S., and a staff of experts, with Major F. Lessore, a distinguished sculptor, at their head, have been engaged at No. 16 Canadian General Hospital, Orpington, better known as the Ontario Military Hospital, making wax and plaster models, coloured drawings, and coloured photographs of wounds and war deformities.

THE Minister of Munitions has issued an order that the war material to which Regulation 30A of the Defence of the Realm Regulations applies shall include all bismuth-bearing ores, bismuth metal, and alloys and salts of bismuth. No return, however, is required from any person whose total stock in hand, and not intended to be used for the manufacture or alloy of steel or other metal, does not exceed in the case of bismuth salts 56 lb., and in the case of bismuth metal or alloy thereof 14 lb. Any person is permitted to purchase bismuth metal and bismuth salts not exceeding in one calendar month a total of 10 lb. of metal or 56 lb. of salts, provided these are purchased and in fact used for pharmaceutical or medical purposes only.

THE annual report for 1917 of the Nurses' Co-operation shows that there were 463 fully trained nurses on the general staff, and 32 asylum trained nurses. The total number of cases nursed in 1917 was 5,720. Since the outbreak of war many of the members have been engaged in nursing soldiers, and during last year one of the military hospitals in England was entirely staffed by them. The Royal Red Cross decoration has been conferred on eleven nurses. The Co-operation (22, Langham Street, Portland Place, W.1) was established twenty-seven years ago to secure to nurses full remuneration from their work, subject to a deduction of 7½ per cent. for office expenses and for the maintenance of a policy by which they are insured under the Workmen's Compensation Act.

THE annual meeting of the Mental After-Care Association, which assists in the rehabilitation into ordinary life and employment of poor persons discharged from institutions for the insane, convalescent or recovered, was held on March 6th at the Mansion House, under the presidency of the Lord Mayor. There was a large and influential assembly. The adoption of the report was moved by Sir Francis Lloyd in an eloquent speech, in which he specially referred to the services rendered by the association to shell-shocked soldiers as well as to mental convalescents generally. Sir Frederick Taylor, Bt., M.D., Sir Charles Wakefield, Bt., Sir G. Wyatt Truscott, Sir George Savage, M.D., Lieut.-Colonel Ernest White, M.D., and Drs. Henry Rayner and G. E. Shuttleworth also spoke. The report states that no fewer than 614 applications had been dealt with during the year 1917, and it is satisfactory to note that the balance sheet shows receipts £70 in excess of those for 1916 and all liabilities met. Still, with a dozen homes to maintain and new opportunities of usefulness springing up, especially in connexion with soldiers' and sailors' wives and relations, more funds are still needed and will be gratefully received by the secretary, Miss E. D. Vickers, Church House, Westminster.

Letters, Notes, and Answers.

AUTHORS desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL are requested to communicate with the Office, 429, Strand, W.C.2, on receipt of proof.

The telegraphic addresses of the BRITISH MEDICAL ASSOCIATION and JOURNAL are:

1. EDITOR of the BRITISH MEDICAL JOURNAL, *Aitology, Westrand, London*; telephone, 2631, Gerrard.
 2. FINANCIAL SECRETARY AND BUSINESS MANAGER (Advertisements, etc.), *Articulate, Westrand, London*; telephone, 2630, Gerrard.
 3. MEDICAL SECRETARY, *Medisecra, Westrand, London*; telephone, 2634, Gerrard. The address of the Irish Office of the British Medical Association is 16, South Frederick Street, Dublin.
- The address of the Central Medical War Committee for England and Wales is 429, Strand, London, W.C.2; that of the Reference Committee of the Royal Colleges in London is the Examination Hall, 8, Queen Square, Bloomsbury, W.C.1; and that of the Scottish Medical Service Emergency Committee is Royal College of Physicians, Edinburgh.

Queries, answers, and communications relating to subjects to which special departments of the BRITISH MEDICAL JOURNAL are devoted will be found under their respective headings.

QUERIES AND ANSWERS.

A QUESTION AS TO MARGARINE.

DR. G. N. MEACHEN (Braintree) asks whether paraffin oil is employed in any way in the manufacture of margarine. On two occasions recently he has observed the odour of acetylene in the breath of two members of his family, once after partaking of some margarine purchased at a local store, which left a strong after-taste of paraffin in the mouth, and again after eating some ginger cakes bought at a town some twenty miles distant, which had a very disagreeable greasy taste.

A CASE FOR DIAGNOSIS.

SALOP asks for advice with respect to the following case: Lady, married, 35, two children (youngest 2 years). Last eight months constant pain in left chest, arm, left side of head and neck, with pain on swallowing. Frequently pain is paroxysmal over precordia. Pulse 80, regular, but of low tension. Respirations shallow and hurried when in pain. Physical examination reveals slight softening of apical second sound, but no dilatation. Hyperaesthesia over whole of affected area. Radiograph of chest does not show any abnormality. Lento-phoresis, radiant heat, massage, liniments, and blistering have no effect. Only morphine hypodermically does any good, and this often fails, except in large doses, which are undesirable.

VIRILITY OF LOUIS XVI.

INQUIRER.—The "mechanical impediment" referred to by Mr. Hilaire Belloc as having "gravely distorted the first years of his (Louis XVI's) marriage" was phimosis. For this he was operated on in June, 1777, by Lassone, first physician to Marie Antoinette, with complete success. For some unknown reason the operator's report on the case has never been allowed to see the light. Sainte-Beuve said: "Louis XVI was not impotent any more than a man is dumb because he stutters; husband or King, he was the same, ashamed and embarrassed." The King was of cold temperament, unlike his father and some other Bourbons. The Queen and her mother, the Empress Maria Theresa, were for dynastic reasons anxious for offspring, and the royal couple had been married for seven years without this result. The matter is dealt with in detail by Dr. Cabanes in *The Secret Cabinet of History*, translated by W. C. Costello (Paris: Charles Carrington, MDCCCXCVII, p. 65, et seq.).

INCOME TAX.

M. S. F. asks whether he is bound to furnish the assessor of taxes with his book containing the particulars of his treatment, etc., but no specification of fees.

* * * The assessor as such has no authority to require production of any books, but the Commissioners when hearing appeals have the right of calling for such evidence as they may think fit, the penalty for non-production being apparently confirmation of the assessment. The book in question might have some evidential value as a record of work done for which charges could be made; but, as no record of charges appears therein, we should doubt whether the Commissioners would call for it.

LETTERS, NOTES, ETC.

A REQUEST TO RURAL PANEL PRACTITIONERS.

DR. J. P. WILLIAMS-FREEMAN (Weyhill, Andover, Hants) asks any country practitioners who have kept records of the distance travelled and of the number of visits of all description paid during one or more years to furnish him with the average number of miles travelled per visit, and also the name of the sanitary area in which they reside, so that the density of the population from the *Medical Directory* may be ascertained. Dr. Baigent and others have suggested that