

testicle and found the cord itself tightly constricted in the ligature.

I cannot help thinking that operative textbooks are largely responsible for these mishaps by recommending procedures possessing needless magnification of perspective which often results in anatomical obfuscation—too much exposure and too much dissection frequently produce too much surgery. The essence of the thing is first to realize that the pampiniform plexus is situated anteriorly to the other structures of the cord, and then, before making the incision, to take care to secure it in that position—always remembering that the object is to remove a superficial bunch of varicose veins endowed with a definite topographical site, which may be easily confused by over-dissection and unnecessary manipulation of the part.

The operation which I have employed for some years past is as follows:

1. This clump of varicose veins is seized horizontally between the left thumb and left index finger. A pause is made, to be certain that the cord lies free and well posterior to the gripping fingers. This is verified by palpation with the right thumb and right index finger, and I generally demonstrate the position of the cord to some onlooker by rolling it close under the skin for inspection.

2. A two-inch incision is then made over the gripped projection; with a few horizontal strokes of the knife the infundibuliform fascia is divided, the offending plexus pops into the wound, and with a few more touches it is completely exposed through the whole length of incision.

3. These veins are then caught in mass by an artery forceps, which is handed to an assistant, who pulls it vertically upwards so as to bring the underlying connective tissue into view.

4. A stab of the scalpel makes an opening through this tissue sufficient for the introduction of the right index finger; this done, the left-hand grip is released, and the left index finger is instantly inserted alongside of the right one beneath the bundle of veins.

5. The pampiniform plexus is now freely separated from its bed by the two fingers (one working up and the other down) and as many inches as may be considered necessary are easily and rapidly isolated.

6. A catgut ligature is applied above and below, the intervening segment (usually 2 to 4 in.) of plexus is excised; the ends of ligatures are then tied so as to approximate stumps and to elevate scrotum, and the skin wound is united by a few catgut stitches, leaving room at the upper and lower angles for the passage of a slender wisp of silkworm gut—a precautionary haemorrhagic drain which I employ in all scrotal wounds.

The facility with which this little operation may be done can be estimated by the time occupied in its performance<sup>2</sup>—one to three minutes. The results warrant its commendation to others.

#### REFERENCES.

<sup>1</sup> *Lancet*, October 24th, 1914. <sup>2</sup> "Operating to the Clock," *BRITISH MEDICAL JOURNAL*, December 21st, 1918.

## Memoranda:

### MEDICAL, SURGICAL, OBSTETRICAL.

#### LIGATIONS OF THE LEFT SUBCLAVIAN ARTERY.

IN the *JOURNAL* of April 16th, under the above heading, the possibility is suggested that some surgeons may have performed this operation without having recorded the fact in print. That this supposition is correct in at least one instance is borne out by the following case on which I operated during the summer of 1918 in France. No doubt other surgeons during the great war had somewhat similar cases.

A soldier was received at a base hospital with the diagnosis of gunshot wound of the shoulder. He complained of pain in the neck. The wound was discovered only after careful search, and consisted of a tiny scab in the neck, above the inner end of the left clavicle, about an eighth of an inch in diameter. There was no other physical sign except some tenderness on deep pressure. Had he not consistently complained of pain, and at times given the impression of undoubted suffering, he would have been sent to rejoin his unit almost immediately. However, a few days after admission there appeared gradually a small red swelling, hard and tender to the touch, in the neck just behind the inner end of the left clavicle. There was no pulsation. The classical error

was committed, and "abscess" diagnosed. An x-ray plate revealed a tiny fragment of shell about the same size as the wound, deeply situated in the region of the swelling.

A small superficial incision was made over the red area, and a pair of artery forceps pushed deeply into the supposed abscess. No pus appeared. The finger was then introduced, and, the deep parts of a small cavity being disturbed, there followed an alarming gush of blood, easily controlled, however, by pressure of the tip of the finger on the pulsating artery, in the anterior wall of which there apparently was a tiny wound.

The remaining part of the operation was performed with the tip of the left index finger on the artery at the bottom of the wound, an assistant retracting and ligating, an orderly pulling the left arm downwards and the anaesthetist forcing the head firmly towards the right shoulder. A long incision was made transversely across the neck, just above the clavicle and including the original opening. The dissection which followed was naturally long and tedious, punctuated by various "alarums and excursions." The clavicular head of the sterno-mastoid was cut across. The suprascapular artery and various veins were ligatured and divided. The inner margin of the scalenus anticus and the thyroïd axis artery were recognized. The latter was followed to its origin from the subclavian, and the finger-tip on the puncture was just internal to the point of origin. With as little disturbance of the subclavian as possible, and after a little blunt dissection, two pairs of artery forceps were applied to the artery close together, and these occluded the puncture and controlled the haemorrhage. An aneurysm needle was passed round the artery, first immediately internal to and then immediately external to the forceps, and the vessel was ligated in two places with thick catgut.

The wound was stitched and a small drainage tube was left in position for twenty-four hours. The arm was wrapped in cotton-wool and placed in a modified Thomas's arm-splint in the horizontal position. No complications arose, the wound healed by first intention, and the patient was evacuated to England within three weeks.

Birmingham.

W. GEMMILL, F.R.C.S.

#### DERMATITIS CAUSED BY BITTER ORANGE.

OCCUPATIONAL dermatitis due to the handling of certain flowers and plants is well known, but cases are not very common, so that they may be rather difficult to recognize. In Sequeira's *Diseases of the Skin* is given a list of over forty plants which are known to have caused dermatitis. Among them is the bitter orange, and several cases of this form of dermatitis recently came under my notice among girls engaged in peeling bitter oranges in a jam factory.

The most marked case was that of a girl, aged 25, who suffered from a very acute dermatitis of the fingers, hands, and forearms, and also of the face. There was intense erythema and much swelling, especially of the hands and forearms, the parts most exposed to the juice. There were numerous small vesicles, a little larger than the size of a pin-head, all over the affected areas. I put the patient to bed for one week and applied a lotion of zinc carbonate, pulv. calaminae and aq. calcis, which proved very effective, the inflammation entirely disappearing after ten days. Idiosyncrasy evidently plays a considerable part in the condition, as in spite of all precautions the girl in question had ultimately to give up the work.

Glasgow.

F. ANDERSON MURRAY, M.D.

A STELE in memory of the internes of the Paris hospitals who died on active service during the war has been erected at the Hôtel-Dieu. On it are inscribed 72 names; it is ornamented by a bas-relief showing a first-aid post.

AT the meeting of the Congrès de Chirurgie at Strasbourg on October 3rd, the President, Professor E. Boeckel, will be presented with a medal in recognition of his patriotism during the German occupation.

THE tuberculosis mortality at Rio de Janeiro, which in 1903 was 4.43 per 1,000, rose to 5.53 in 1918, and is now 10 per 1,000. Amaury de Medeiros, general secretary of the Association for Combating Tuberculosis in Brazil, estimates the annual number of deaths from tuberculosis in Brazil at 60,000, and the number of cases at 600,000.

DR. LAWRENCE RAMSAY THOMSON died at Musselburgh, Midlothian, on April 2nd, aged 39. He was the elder son of Dr. A. D. R. Thomson, of Musselburgh, with whom he was working in partnership. He was educated at Edinburgh, where he graduated as M.B. and Ch.B. in 1911. He joined the R.A.M.C. as a temporary lieutenant on September 27th, 1915, and was promoted to captain after a year's service. He served at Malta during the war.

## Universities and Colleges.

### UNIVERSITY OF CAMBRIDGE.

AT a congregation held on May 7th the following medical degrees were conferred:

M.D.—A. T. Edwards.  
M.B., B.Ch.—J. B. Hunter, W. E. H. Banks, H. Gainsborough.  
M.B.—H. A. Whyte-Venables.  
B.Ch.—W. N. Goldschmidt.

ERRATUM.—In the list of degrees printed in the JOURNAL of May 14th, p. 722, there was an error. The degree conferred on H. B. Dodwell was that of B.Ch., not M.Ch.

### UNIVERSITY OF MANCHESTER.

THE Council has appointed Dr. Albert Ramsbottom, F.R.C.P., physician to the Manchester Royal Infirmary and lecturer on clinical medicine in the Victoria University, to be Professor of Clinical Medicine.

### UNIVERSITY OF LONDON.

#### UNIVERSITY COLLEGE.

THREE public lectures on "The history of chemistry in the nineteenth century," will be delivered in the Chemistry Theatre, by Sir William Tilden, F.R.S., on Fridays, May 27th, June 3rd and 10th, at 5 p.m. The chair at the first lecture will be taken by Professor J. Norman Collie, F.R.S.

### ROYAL COLLEGE OF PHYSICIANS OF LONDON.

AN Extraordinary Comitia of the Royal College of Physicians of London was held on Thursday, May 12th, at 5 p.m., the chair being occupied by Sir Norman Moore, Bt., the President.

The following gentlemen, who were elected to the Fellowship at the last meeting, were admitted as Fellows:

C. O. Hawthorne, M.D., C. H. Melland, M.D., J. G. Emanuel, M.D., A. E. Barnes, M.B., J. P. Hedley, M.B., J. A. Torrens, M.D., A. J. Clark, M.C., M.D., A. Felling, M.D., R. H. Steen, M.D., C. M. Wilson, M.D., G. E. S. Ward, M.D.

Diplomas in public health were granted jointly with the Royal College of Surgeons to twenty-three candidates who had passed the required examinations.

Communications were received from (1) the President and Honorary Secretaries of the Section of Laryngology, Royal Society of Medicine, dated April 8th, 1921, concerning teaching and examination in the subject of oto-rhino-laryngology, and the institution of a special diploma in that subject; (2) the Honorary Secretaries of the Sections of Laryngology and Otology, Royal Society of Medicine, dated April 30th, 1921, reporting a resolution passed by these sections on the subject mentioned above. These were referred to the Committee of Management for report.

A map illustrating the travels of Harvey in 1636 was received from Sir D'Arcy Power, K.B.E. The thanks of the College were accorded to him for this gift.

The following report, dated April 19th, was received from the Committee of Management:

The Committee of Management have received from Sir Charles Ballance, K.C.M.G., C.B., M.V.O., the visitor appointed by the Royal Colleges to inspect the examinations of the Egyptian Medical School and Hospital, Cairo, a full and interesting report on the examinations and on the teaching in the Medical School and Hospital. In accordance with the authority conferred on them by the Royal Colleges, the Committee have communicated with H.E. the Minister of Education and H.E. the Minister of Public Health with regard to various matters arising out of the report. The Committee are of opinion that the examinations and course of education justify the Royal Colleges in continuing their recognition of the School. The Committee suggest that the Royal Colleges should express to Sir Charles Ballance their appreciation of his valuable services as their visitor.

The thanks of the College were accorded to Sir Charles Ballance.

The Registrar proposed an addendum to the regulation attached to By-law CXVII (which prescribes the times of the several parts of the membership examination), as follows:

"Provided that when the number of candidates renders it desirable the President and Censors may fix such additional times for the clinical and oral examinations as may be required for the proper conduct of the examination."

This was resolved accordingly.

The President then dissolved the Comitia.

### ROYAL COLLEGE OF SURGEONS OF ENGLAND.

AN ordinary Council was held on May 12th, when Sir Anthony Bowly, President, was in the chair.

Issue of Diplomas.—Diplomas of Membership were granted to the 103 candidates found qualified at the recent examinations;

the names were published in the report of the proceedings of the comitia of the Royal College of Physicians of London (May 7th, p. 690). Diplomas in public health were granted, jointly with the College of Physicians, to 23 candidates. Diplomas in tropical medicine were granted, jointly with the College of Physicians, to 21 candidates.

Vacancies on the Court of Examiners.—The President reported that the terms of office of Mr. R. Lawford Knaggs and Mr. J. Hutchinson as members of the Court of Examiners would expire on June 8th next, and that the vacancies thus occasioned would be filled up at the ordinary council on June 9th.

### ROYAL COLLEGE OF PHYSICIANS OF IRELAND.

AT a meeting of the President and Fellows of the Royal College of Physicians of Ireland, held in the College Hall, Kildare Street, Dublin, on May 6th, Dr. Harold Pringle, King's Professor of the Institutes of Medicine in the School of Physic, Ireland, was admitted a Fellow of the College, and Dr. Samuel Denis de Vos, of Ceylon, was admitted a Licentiate in Midwifery.

### CONJOINT BOARD IN SCOTLAND.

THE following candidates have been approved at the examinations indicated:

D.P.H.—T. Pullar, Janet B. Higgins. Part I: Ellen D. Anderson, W. Cunningham, R. J. Peters, A. Davidson, Mary C. Walker, Marguerite L. Sclanders, W. H. Wallace, W. D. MacKinnon, E. M. E. Cumming, A. M. Davidson, C. L. Miller, D. Heard, D. Fyfe, W. McKendrick, Helena E. Barrett, S. J. Henderson, J. Frew.

### CONJOINT BOARD IN IRELAND.

THE following candidates have been approved at the examinations indicated:

FINAL PROFESSIONAL.—Mary Boland, Lucretia H. H. Byrne, T. Cooney, B. J. Coyne, J. A. Cusack, Edith M. L. Dodd, A. C. Esmonde, P. Gaffney, S. A. Gailey, J. W. E. Graham, S. J. Halpin, T. J. Kerr, J. J. McHenry, P. Moylan, J. J. O'Sullivan, J. Tehan (honours).

## Medical News.

THE Senate of the University of Glasgow has resolved to confer the honorary degree of Doctor of Laws (LL.D.) upon Dr. Freeland Fergus, President of the Royal Faculty of Physicians and Surgeons of Glasgow.

DR. J. F. GASKELL, physician to Addenbrooke's Hospital, Cambridge, has been appointed honorary pathologist to the hospital in succession to Dr. Aldren Wright.

A MEETING of the School Medical Service Group of the Society of Medical Officers of Health will be held on Saturday, May 28th, at 2.15 p.m., at the School Clinic, Great Charles Street, Birmingham. Members of the School Medical Service who are not members of the society will be welcome as visitors. The honorary secretary of the group is Dr. A. Ashkenny, Soho Hall, Birmingham.

A SPECIAL course of ten lectures on advanced surgery will be given in the Surgical Unit Lecture Theatre of the London Hospital, on Tuesdays and Thursdays, at 4.15 p.m., beginning on June 7th. The course is open to post-graduates and senior students.

PROFESSOR C. S. SHERRINGTON, President of the Royal Society, and Dr. H. K. Anderson, F.R.S., Master of Gonville and Caius College, have been elected members of Athenaeum Club under Rule 2, which empowers the annual election by the committee of a certain number of persons "of distinguished eminence in science, literature, the arts, or for public service."

THE ordinary quarterly meeting of the Medico-Psychological Association of Great Britain and Ireland will be held at the Maudsley Hospital, Denmark Hill, S.E., under the presidency of Dr. W. F. Menzies, on Tuesday, June 7th. Sir Frederick Mott, F.R.S., will deliver the second Maudsley lecture at 4.30 p.m.

ON May 25th Dr. C. M. Wilson will read a paper before the Royal Society of Arts on "Some effects of the war on industrial unrest," and on May 30th Sir Kenneth Goadby will read a paper on "Industrial disease and immunity." Each paper will be given at 8 p.m. at the house of the society, John Street, Adelphi, W.C. 2, and discussions will follow.

TWENTY THOUSAND cases of cholera, 9,000 of which were fatal, have recently been certified in Corea.

THE Japanese Government have arranged that the principal trains leaving Tokio shall carry a medical officer.

THE Soviet Tartar Republic at Kasan has formed a medical institute with a special section for the hygiene of labour.

THE Council of British Ophthalmologists presented its annual report to a meeting held on May 7th at the house of the Royal Society of Medicine. It recorded that at the beginning of the session 1920-21 Mr. J. B. Lawford was elected president in place of Sir Anderson Critchett, who filled that office during the first two years of the Council's work; Sir George Berry and Mr. E. Treacher Collins were elected vice-presidents, Mr. J. Herbert Fisher honorary treasurer, and Mr. Leslie Paton honorary secretary. The report notes with gratification that special examinations in ophthalmology have recently been established in connexion with two surgical degrees—the M.S.Lond. (Ophthalmology) and M.S.Vict. Univ., Manch. (Ophthalmology)—and the diploma in ophthalmic medicine and surgery of the English Conjoint Board; further, a committee of the Royal College of Surgeons of England is considering the question of creating a higher form of diploma in connexion with the Fellowship of the College. During the past session the council issued a report on the need for institutional treatment of children with contagious eye disease. This was forwarded to the Ministry of Health and a deputation was received by Sir George Newman on behalf of the Minister. In consequence of this, beds are now available at the Metropolitan Asylums Board ophthalmia school at Swanley for London County Council school children suffering from ophthalmia or other contagious diseases of the eye. The Council has had under consideration the question of sight-testing by opticians, and has prepared a report on the subject. The Council has also prepared a report on the notation of cylinder axes, and still has under consideration the question of the standardization of test types. A committee appointed to consider the Report of the Consultative Council of the Ministry of Health, in so far as it is likely to affect ophthalmic surgeons, has gathered a considerable amount of information as to the work done by ophthalmic surgeons for various public and state authorities. Another committee is considering the question of examination, treatment, and report of cases referred by public authorities to ophthalmic surgeons in voluntary hospitals.

## Letters, Notes, and Answers.

*As, owing to printing difficulties, the JOURNAL must be sent to press earlier than hitherto, it is essential that communications intended for the current issue should be received by the first post on Tuesday, and lengthy documents on Monday.*

ORIGINAL ARTICLES and LETTERS forwarded for publication are understood to be offered to the BRITISH MEDICAL JOURNAL alone unless the contrary be stated.

CORRESPONDENTS who wish notice to be taken of their communications should authenticate them with their names—of course not necessarily for publication.

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.

In order to avoid delay, it is particularly requested that ALL letters on the editorial business of the JOURNAL be addressed to the Editor at the Office of the JOURNAL.

THE postal address of the BRITISH MEDICAL ASSOCIATION and BRITISH MEDICAL JOURNAL is 429, Strand, London, W.C.2. The telegraphic addresses are:

1. EDITOR of the BRITISH MEDICAL JOURNAL, *Aitology, Westrand, London*; telephone, 2630, Gerrard.
2. FINANCIAL SECRETARY AND BUSINESS MANAGER (Advertisements, etc.), *Articulate, Westrand, London*; telephone, 2630, Gerrard.
3. MEDICAL SECRETARY, *Medisecra, Westrand, London*; telephone, 2630, Gerrard. The address of the Irish Office of the British Medical Association is 16, South Frederick Street, Dublin (telegrams: *Bacillus, Dublin*; telephone, 4737, Dublin), and of the Scottish Office, 8, Rutland Square, Edinburgh (telegrams: *Associate, Edinburgh*; telephone, 4361, Central).

## QUERIES AND ANSWERS.

"PENSIONS" asks if any cases of "double appendix" are recorded. Operating recently on a case after removal of what appeared to be a normal appendix, on turning the caecum round another appendix came into view, with a definite meso-appendix chronically inflamed and with a very diminished lumen. Unfortunately no histological examination was made. The second "appendix" was two inches long, and did not seem like an intestinal diverticulum.

### INCOME TAX.

"N. P." is a whole-time medical officer of the Ministry of Pensions, and has been refused a deduction by the local inspector for the expense of his subscriptions to the Association and of purchases of books to maintain his standard of medical knowledge.

\*\* In our opinion he is entitled to a reasonable deduction for such expenses as being incurred wholly, exclusively, and

necessarily in the performance of his duties; they represent the maintenance cost of his professional equipment. His method of procedure is by way of appeal to the local Commissioners through notice, given to the local inspector, of objection to the assessment made on his salary.

"PUZZLED" is employed in a whole-time capacity under the Ministry of Pensions. He lives some distance from London, and has to travel up daily for his work. He asks if he is entitled to deduct the cost of a season ticket.

\*\* No—unless he also has work for the Ministry of Pensions which must be done at the place of residence. A case in the High Court decided some years ago that the expense of travelling to the place of employment is not incurred in performing the duties of the office.

"H. D." sold his pre-war 8-10 h.p. Darracq car for £30 and his motor cycle for £20, and on resuming civilian work purchased a 11.9 h.p. Phoenix car for £450. He inquires whether he can charge the sum of £400—that is, £450 less the £30 and £20—as motoring expenses.

\*\* In our opinion, yes.

## LETTERS, NOTES, ETC.

THE Royal Insurance Company has issued a waistcoat pocket edition of the *Rules of Golf*, which includes recent important changes in the rules and interesting notes on the question of the size and weight of the ball. There is a comprehensive index, and many medical golfers may like to have the booklet, which is obtainable from any of the company's offices.

### THE PREVENTION OF URETHRAL STRICTURE.

R. M. W. BROWDY (London, W.) writes: I read with interest in your issue of May 14th the article by Mr. Giuseppe on the treatment of urethral stricture. He deplores the "paucity of papers on the subject," and also that "so little has been done to modernize its treatment." I cordially agree, and carefully scanned the paper to find if any mention was made regarding preventive treatment. It is deplorable that so little attention should be paid to this point. The majority of cases are due to gonorrhoea, and badly treated gonorrhoea. If medical men would pay more serious attention to the treatment of acute gonorrhoea and not rely upon cessation of discharge or the examination of a smear as a criterion of cure and freedom from organic change, but would carefully examine the urethra for patches of infiltration in its early stage and thoroughly dilate with sounds and expanding dilators, stricture would be a relic of the past.

### HERPES AND VARICELLA.

DR. O. HILTON (Northwood, Middlesex) writes: A., a carpenter, and B., a painter, were working at the same job. Each developed shingles on his right arm. A. first felt pain on April 22nd; B. first felt itching on April 25th. A. discovered a herpetic rash on April 24th, and came to see me on April 27th; B. came to me with a well-developed eruption on May 2nd. On May 11th, seventeen days after A. noticed his spots, an eruption was seen on his youngest child, and to-day, May 13th, I found the child suffering from a quite typical attack of chicken-pox.

### VACANCIES.

NOTIFICATIONS of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 23, 24, 25, 28, 29, and 30 of our advertisement columns, and advertisements as to partnerships, assistantships, and locum tenencies at pages 26, 27, and 31.

THE appointments of certifying factory surgeon at Athlone (Westmeath) and Brecon (Brecon) are vacant.

## SCALE OF CHARGES FOR ADVERTISEMENTS IN THE BRITISH MEDICAL JOURNAL.

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Advertisements should be delivered, addressed to the Manager, 429, Strand, London, not later than the first post on Tuesday morning preceding publication, and, if not paid for at the time, should be accompanied by a reference.

NOTE.—It is against the rules of the Post Office to receive *poste restante* letters addressed either in initials or numbers.