it were often overlooked, yet it was an important guide both as to regional diagnosis and concerning the patient's disability. Lesions of the spinal nerve roots might be responsible for hypotonia. Opinion now in the main inclined to the belief that hypotonia was one of the leading symptoms in disease of the cerebellum or of its efferent nerve tracts; and Gordon Holmes had shown that it was in acute or recent lesions especially that hypotonia was most characteristically found.

#### Reflexes and Their Limitations.

In the past the study of reflexes and their limitations had tended to dominate the investigation of nervous disease to the neglect of other symptoms, largely because of the greater ease with which disturbances of this kind could be examined as compared with the time and trouble required to investigate alterations in sensation, motion, and changes of tone. Perfunctory testing of reflexes had been too often considered a sufficient examination of a case, and especially in the presence of gross exaggeration was supposed to be diagnostic of organic as against functional disease. This partial truth had led to much confusion and difficulty. The reflexes were of three kinds: (1) Superficial or cutaneous; (2) deep or of three kinds: (1) Superncial or cutaneous; (2) deep or tendon; (3) organic or motor. As to the oculo-cardiac reflex—pressing firmly on the eyeballs and noting the amount of the slowing of the pulse which occurred, or its absence—Dr. Feiling had not found it to possess any clinical value. The Achilles jerk was best tested with the patient kneeling, and he regarded it as of equal value to the knee-jerk, especially in cases in which the lower parts of the spinal cord or the chorda equina might be involved. In eliciting the entergoing reflexes the skin should be warm. Addmined cutaneous reflexes the skin should be warm. Abdominal reflexes were apt to be feeble in people with a pendulous abdomen. With regard to reflexes in general a difference on the two sides was much more important than any quantitative symmetrical alteration.

# Memoranda:

## MEDICAL, SURGICAL, OBSTETRICAL.

## HAEMORRHAGIC COLITIS.

THE interesting communications on haemorrhagic colitis by Mr. Geary Grant (February 25th) and Mr. Lockhart-Mummery (March 11th) encourage me to report the successful treatment of a severe case under my care in 1909. It is the only case of this nature which I have had to treat, and it gave occasion for the one and only operation for appendicostomy that I have performed; for this reason perhaps I have a very vivid recollection of the circumstances. The successful result I attribute to the rationale of one of the methods of lavage adopted after the operation, which I believe had not been entertained previously as a weapon in combating the infection

In December, 1908, I was asked by a fellow practitioner to see a man, aged 25, who had been suffering since the previous September from frequent diarrhoea. Early in November he had to take to bed, and the motions, eight to twelve a day, were accompanied by much blood and mucus: There was no evidence of tubercle; he was "running a temperature," was extremely emaciated and anaemic and feeble; had lost nearly 3st. in weight from his normal 9st.; pulse frequent, great thirst, tongue dry and raw, face drawn and anxious. There were several badly decayed teeth, and the breath was foul. He appeared to be in the later stages of exhaustion; and though recovery seemed doubtful I advised that he should be removed to hospital and have appendicostomy performed, with subsequent lavage of the colon, on the lines suggested by the late Mr. Keetley, who, I believe, was one of the first to advocate this operation in colitis. Early in January, 1909, he was taken to the cottage hospital, and there I fixed the appendix to the abdominal wall, opening it up a few days later. His condition at this time was very bad, accentuated doubtless by the operation and anaesthetic. There was constant passage of blood and mucus, extreme exhaustion, and vomiting had commenced. After opening the appendix a variety of injections was tried. I can remember saline, hazeline, Condy's fluid, protargol; from a pint to a quart of these was given twice or three times daily, and each in turn for five or six days. China clay emulsion had not then come into vogue.

I can recollect some slight improvement with the Condy's fluid, but at the end of January his condition had become desperate; he was quite apathetic, was turning his face to the wall, and the stools, though less offensive, were frequent, and contained much blood and mucus. It was evident that merely washing out the bowel with large quantities of such mild antiseptics as could be borne was not adequate to stop the infection, and it occurred to me that it might be possible to combat it in another way—na

by keeping the bowel charged with a dominant and antagonistic micro-organism such as the lactic acid bacillus, growing in an acid medium, with the hope that it might crowd out or displace the coli group and its auxiliaries, which flourish under the normal (alkaline) conditions of the colon. Sour milk prepared by inoculation with a liquid culture of B. bulgaricus, and incubation for forty-eight or more hours, was employed, and a quart of this was used for irrigation of the bowel through the appendix opening twice or three times daily. Within a few days distinct improvement was noticed: the stools were acid, with less blood, and much less offensive and the tendency to confirm cased. The sour milk ment was noticed: the stools were acid, with less blood, and much less offensive, and the tendency to vomiting ceased. The sour milk irrigations were kept up for about a month, being gradually diminished in frequency and amount; blood gradually disappeared, and the patient's general condition improved in every way. He left hospital in May, 1909, convalescent, weighing 7 st., and resumed his work as a clerk in September, 1909, weighing 9 st. In view of the possibility of recurrence the appendix was kept open until October, 1911, when it was closed by Mr. Bailey, F.R.C.S., in St. Bartholomew's Hospital.

I have recently seen this patient after many years; he is in perfect health, was placed in Class B for war service, is now married and the father of a healthy child. There is a slight bulge at the site of the appendix opening; otherwise the scar is narrow and firm.

There is nothing, of course, new in the idea of using an innocuous organism or its products to antagonize the pathogenic effects of a harmful one, but the striking results in this case were so obvious that it is perhaps worthy of record, and I should be interested to hear if this method, or one based on I should be interested to hear it will be similar reasoning, has been employed by others.

John A. Hayward.

Mr. Lockhart Mummery's remarks (March 11th, p. 412) on the comparative rarity of this disease, and the value of appendicostomy in it, tempt me to write a brief account of two similar cases, the only ones I have seen in twenty years; in neither was a sigmoidescopic examination made, so I am unable to say if the condition of the colon was the same as Mr. Geary Grant described, or was one of ulcerative colitis with an open vessel in the base of an ulcer, but I imagine this is not of great moment from the point of view of treatment.

CASE I.

CASE I.

A young woman, aged 23, was sent into hospital as a case of colitis with severe haemorrhage, which had been going on for a fortnight. She passed daily 3 or 4 oz of blood, which was judged to come from about the sigmoid flexure.

She was treated medically, and was given on alternative days large wash-out saline enemata followed by an enema of a pint of solution of protargol; all this was done in the knee-elbow position. For a time it had no effect in checking the bleeding, and my anxiety was becoming acute because she was getting blanched; but happily she then began to lose less and at the end of six weeks the bleeding ceased.

the bleeding ceased.

She was kept in bed for a further six weeks, with no signs of a recurrence, but on her first day out of bed the bleeding started

again and was nearly as bad as before.

Treatment on the same lines was again begun, and the result

Treatment on the same lines was again begun, and the result was rather more rapid than before, but after four months in bed the bleeding began again as soon as she walked about. The medicinal treatment and the enemata were on both occasions continued for some time after the bleeding ceased.

She had come into hospital on October 8th, 1913, and we were now in the middle of April, 1914, and she was no better. I did appendicostomy, and in a week or two the bleeding ceased and did not return. The rapidity of cure, and the ease and efficiency with which the large bowel was washed out, formed a marked contrast with the methods and results achieved before the operation. She left hospital in due time, and came to me again four years later for the cure of a hernia which had occurred through the abdominal wall by the side of the appendix. She had no return of colitis.

CASE II.

The second case, a girl aged 11, admitted in 1915, was similar in all particulars, save that after a period of observation I straightway did appendicostomy with most satisfactory results.

While on the subject of appendicostomy I may mention that in two cases of perforated gastric ulcer with great soiling of the peritoneum, instead of draining Douglas's pouch by a tube through an incision above the pubes, I have done appendicostomy, drained through this wound, and immediately opened the appendix; through this I was able to run in saline, aperients, and peptonized food (the latter half a pint or more at a time) as the occasion demanded. It appears to me that it is an immense advantage to be able to do this in a patient who is always suffering from shock, general peritonitis, and almost certainly post-anaesthetic vomiting, and, moreover, has a recently stitched up hole in his stormach his stomach.

T. MACCARTHY M.R.C.S., L.R.C.P. Sherborne, Dorset.

Chirurgical Society. Many colleagues on the staff of the Royal Sussex County Hospital were present, including Drs. Hobhouse, Jowers, Broadbent, Bowring, and Fletcher. Dr. Hollis leaves a widow, two daughters, and a son, Dr. Stanley Hollis, in practice in the same town as his father.

### CHARLES PARSONS, M.D.,

Consulting Medical Officer to Dover Hospital, and one time Treasurer of the British Medical Association.

THE death of Dr. Charles Parsons of Dover, briefly noticed in our issue of last week, removes one who in his day id generation unassumingly did good work for the profession. He rendered great services to the British Medical Association throughout almost the whole of his professional career, and the South-Eastern Branch, which included the counties of Kent, Surrey, and Sussex, benefited greatly from his keenness;

business capacities, and foresight.

He was born in 1833, and was educated at King's College, London, and Edinburgh; he took the diplomas of M.R.C.S. and L.S.A. in 1855, and graduated M.D.Edin., with honours and the gold medal, in 1864. After holding the offices of house-physician and assistant house surgeon at King's College Hospital he was for some time house-surgeon at King's College Hospital he was for some time house-surgeon to the North Staffordshire Infirmary. He settled in Dover in 1868 and was appointed medical officer to the Royal Victoria Hospital there. He retained the position for thirty years, and during his long life in Dover occupied a leading position in medical and social life. He took a great interest in education, and was one of the founders of the Dover College, which now ranks high among public schools. He also organized and ranks high among public schools. He also organized and was secretary for many years of the Cambridge Local examinations. He was a keen and expert musician, was for many years president of the Dover Choral Union, and often took part in public concerts. He retired from practice in 1908, and went to live at Tunbridge Wells, where he died in his 90th year. He had seven sons and four daughters; of his sons only two survive him. Several of them gave their lives for their country in the South African war and in the great war, three dying between 1914 and 1918.

Few men did more loyal and single-hearted work for the British Medical Association. He was secretary of the old South-Eastern Branch from 1871 to 1873, secretary and treasurer of that Branch 1888 to 1891, and president of it in 1893. He was a member of the Central Council from 1888 to 1899 and treasurer from 1896 to 1899. Dying at so great an age and being out of public work since 1908, many of the younger men do not know the great work Parsons did, but he ranks high in the estimation of men who knew him.

Most honourable in all his professional work—the kindest and most sympathetic of men—he was respected by his fellow citizens and loved by all: his work will long remain. He was buried at Dover on Tuesday, March 28th.

W. J. Tyson. Sir Jenner Verrall, who succeeded Dr. Parsons as

Honorary Secretary of the South-Eastern Branch, writes: Thinking of Dr. Charles Parsons carries one back to the old days before the present constitution of the Association was devised. Before he became Treasurer of the Association he gave many years of service as Secretary of the South-Eastern Branch (Kent, Sussex, and Surrey). Apart from the Council and the permanent officials the Branch organization was then the sole means by which the influence of the Association could be brought to bear and co-ordinated action be taken. Unless you paid a small extra subscription for the purpose you were not a member of any Branch, and many who were not keen about medico-political work and local meetings remained unattached. For securing as large a proportion of Branch members as possible, for keeping in touch with all parts of a large area, and for fostering corporate feeling in the Branch, Dr. Parsons's energy and patience, his genial presence and kindly nature, were invaluable. We have become accustomed to the very complete machinery now at our service, and only those who remember the less efficient time can realize how much we owe to men like Parsons,

DR. WALTER DYMOCK PERRY, late Captain R.A.M.C. (T.C.), died at Woking on March 25th, aged 50. He took the M.R.C.S. and L.R.C.P.Lond. in 1895, after which he went to New Zealand, where he was in practice at Timaru, but immediately before the war was practising at Earl's Court. He took a temporary commission as lieutenant in the R.A.M.C. on January 21st, 1915, and was promoted to captain after a year's service.

pioneer in co-operative efforts.

## Anibersities and Colleges.

UNIVERSITY OF DURHAM.
THE following candidates have been approved at the examination indicated:

IRD M.B., B.S. (Materia Medica, Pharmacology and Pharmacy: Public Health; Medical Jurisprudence; Pathology and Elementary Bacteriology.)—R. L. Bell, N. Capstaff, Phillis Hall, N. Harkness, R. E. Haswell, J. E. Israel, J. S. Johnson, H. B. L. Levy, G. M. Miller, J. E. D. Miller, Winifred M. Proctor, Margaret Scoresby-Jackson, Kathleen Shelton, D. S. Einclair, W. F. O. Taylor, P. J. G. de Vos.

UNIVERSITY OF MANCHESTER.

PROFESSOR J. W. SMITH, M.B., F.R.C.S., is resigning at the end of the present session the chair of systematic surgery, which he has held since 1911. The council, in accepting the resignation with regret, have expressed their hearty appreciation of the services rendered by Professor Smith to the university since he joined the staff in 1888.

The telepoint and the staff of the principle of the services rendered by the staff in 1888.

The following candidates have been approved at the examination:

indicated:

D.P.H.—Part I: Martha F. Barritt, Winifred I. Doherty, Florence M. L. Graham, W. H. Leigh, J. K. Lund, J. G. McKinlay, Constance Snowdon, Doris A. Taylor, Mary I. Turner, Marie Wardman, Frances G. Wilcocks. Part II. J. Brooks, Constance Snowdon

UNIVERSITY OF ABERDEEN.
At the graduation ceremony held on March 30th the following were among the degrees conferred:

M.D.—\*F. W. C. Brown, \*J. G. Danson, \*M. Y. Garden, R. D. Lawrence. Ch.M.—W. Brander.

M.B.—T. W. C. Brown, J. G. Danson, M. Y. Garden, R. D. Lawrence. CH.M.—W. Brander.
D.P.H.—J. S. Anderson, F. Bitchie.
Blommestein, L. S. Chatterji, Eveliua I. Corbett, H. W. Corner, J. K. Cumming, T. J. Davidson, \*E. G. A. Dou, C. Donald, Dorothy J. Dow, Griselda A. Dow, J. A. S. Emslie, S. Feinstein, \*F. Forman, †J. F. Fraser, Jane H. Galloway, F. W. Gordon, J. Grieve, E. D. Gray, H. R. Lambie, †\*J. B. Ledingham, J. Lumsden, Elizabeth G. McCurrach, W. R. McGlashan, J. Macleod, Margaret M. Mills, J. Milne, A. W. J. Mitchell, Pergy L. Mitchell, Barbara R. Morton, A. J. Murray, C. Penny, †\*S. S. Proctor, P. Ross, Mildred M. G. Bussell, I. Sacks, Beatrice M. Sellar, W. F. Shearer, Katherine C, Spènce, †\*D. MacR. Stewart, Christina Stuart, A. Tait, J. S. Walker, †Annie K. Wattie.

\* Distinction. \*\* Much distinction. † Second class honours.

The following prizes and medals were awarded:

Fife Jamieson Memorial Gold Medal in Anatomy: C. S. D. Don, Jamaica. Keith Gold Medal for Systematic and Clinical Surgery: W. L. Hector, Tarland. Shepherd Memorial Gold Medal for "The Principles and Practice of Surgery": R. N. Ironside, Aberdeen. Dr. James Anderson Gold Medal and Prize of £5 in Clinical Medicine: F. Forman, South Africa, and W. L. Hector, Tarland (equal). The Matthews Duncan Gold Medal in Obstetrics: A. W. Downie, Rosehearty. The Alexander Ogston Prize in Surgery: Edith M. Macrao, Aberdeen.

### UNIVERSITY OF DUBLIN.

SCHOOL OF PHYSIC, TRINITY COLLEGE.
THE following candidates have been approved at the examinations indicated:

THE following candidates have been approved at the examinations indicated:

M.CH.—E. D'A. McCrea.

FINAL M.B., PART I.—Maleria Medica and Therapeutics, Medical Jurisprudence and Hygiene, Bacteriology and Pathology: \*B. Morris, \*Agnes McLaughlin, \*H. W. L. Dale, H. Renton, R. R. J. Brandt, J. A. MacDonald, E. M. Landau, W. E. Hutchinson, J. E. Deale, C. A. V. Ovendale, A. Darlington, F. G. Brown, Martha Reid, S. M. Geffen, J. S. Glasgow, I. Marin, Mangaret L. Cowan, A. V. Foster, A. E. O'Donnell, H. Lewin, C. T. MacCarthy, Marie E. Wagener, R. C. L. Griffiths, Etienne R. Hafner, H. R. Brady, C. Gordon, H. J. Hugo, P. F. H. Wagner, Kathleen E. Hill, H. Kohlberg, H. S. Roseman, R. R. D. Crawford, Isabella H. Speedy, A. V. Wood, G. A. A. Powell, J. A. Levett. Materia Medica and Therapeutics, Medical Jurisprudence and Hygiene, and Hygiene, Bacteriology and Pathology: Isobel G. Smith. Materia Medica and Therapeutics, Bacteriology and Pathology: Elleen Brangan. Bacteriology and Pathology: W. T. Hogan, J. J. FitzGerald, W. L. Duncan, D. J. Malan.

PART II.—Medicine: \*I. G. Sacks, \*C. E. Brunton, M. Bewley, D. Hugo, Olive V. Fair, G. Blackall, W. B. E. McCrea, Ruth Leunon, L. Stazunsky, J. Harte: F'. M. Hilliard, T. Marais, May E. Powell, M. M. Viljoen, T. G. Wartham, R. Lang, Rita Dillon-Leetch, L. O. Vercueil, C. E. Ovendale, W. B. Briggs, J. E. McCormick, E. R. Murray, C. de L. Shortt, W. S. Dickson, L. Wigoder, J. Hofman, A. E. Drotske, J. Kruger, S. G. Rainsford, J. B. Horran, C. W. Patr, D. H. Saayman, I. P. Myers, D. L. H. Moore, I. F. A. de Villiers, V. Robinson, H. N. Krige, H. C. Dundon. Surgery: S. G. Weldon, H. N. Krige, I. Cornick, C. J. U. Murphy, P. H. S. Fouché, Margery Bouchier-Hayes, D. L. H. Moore, C. W. Patr, D. H. Saayman, I. P. Myers, D. L. H. Moore, I. F. A. de Villiers, J. G. Russell, A. E. Phillips, W. R. Burns, A. J. Beckett, G. Kirker, Midwigery: \*G. Bewley, \*M. M. Viljoen, M. P. Louw, R. N. Perrott, J. Devane, F. B. D'Arcy, J. Harte, A. J. Beckett, G. Kirker, Midwigen, F. B. D'Arcy, J. Harte,

\* Passed in high marks.

ROYAL COLLEGE OF SURGEONS IN IRELAND. THE following candidates have been approved at the examinations indicated:

PRIMARY FELLOWSHIP.-Miss Attracta Halpenny, S. O'Neill, C. J. A.

Woodside. FINAL FELLOWSHIP,—E. D'A. McCrea.

CONJOINT BOARD IN IRELAND.

THE following candidates have been approved at the examinations indicated:

FINAL PROFESSIONAL EXAMINATION.—T. A. Bennett, W. A. Benson, P. P. Connolly, Mrs. Michael Brendan Devane, Dorothy H. Douglas, J. Eliassoff, C. J. Ellison, C. V. Falvey, S. Griffin, A. Hayman, H. Levison, B. J. Mulligan, Anna J. O'Reilly, R. B. Shaw, R. Sherowitz, H. E. W. Waters, D.P.H.—Dr. V. R. O'Connor.

UNIVERSITY OF LONDON.

UNIVERSITY OF LUNDON.

Correction.—In announcing last week 'p 549 the conferment upon Miss E. E. Hewer of the degree of D'sc. in Physiology by the University of London, the recipient should have been described as an internal student of the London (Royal Free Hospital) School of Medicine for Women, and not an internal student of Bedford College, as printed.

## The Serbices.

HONORARY PHYSICIANS TO THE KING. THE following appointments of honorary physicians to the King are announced: Major-General A. P. Blenkinsop, C.B., C.M.G., late R.A.M.C., vice Colonel E. Eckersley, retired, and Lieut.-Colonel and Brevet-Colonel Sir E. S. Worthington, K.C.V.O., C.B., C.I.E., R.A.M.C., vice Major-General J. J. Gerrard, C.B., C.M.G., retired.

ARMY MEDICAL LIBRARIES.

THE War Office announces that it has been decided to establish in

THE War Office aunounces that it has been decided to establish in the principal military hospitals at home and abroad small libraries of standard books of reference and of current medical literature, in order that officers of the Royal Army Medical Corps may be able to keep themselves informed of advances in medicine and the allied sciences. Each library will form a medical intelligence bureau for the district which it serves and be available for all officers of the corps serving in that district.

Libraries at home stations will be supplied (at the public expense) with Rose and Carless's Manual of Surgery: Osler and Macrae's Principles and Practice of Medicine; Parkes and Kenwood's Hygiene and Public Health: Mauson's Tropical Diseases; British Journal of Surgery; Journal of Hygiene; Medical Abstracts and Reviews; Tropical Diseases Bulletin, and standard works on medican and allied sciences to the total value of £5 annually. The libraries at stations abroad will be supplied with all the above works and periodicals, and, in addition, Rowland and Turner's Operations of Surgery; Stitt's Practical Buctriology: Alcock's Entomology for Medical Officers; and Hutchison's Diseases of Children. Standard works will be allowed up to the value of £9 annually.

Each library will be placed under the care of an officer to be selected by the Deputy Director of Medical Services of the command from the staff of the hospital in which the library is situated.

situated.

FOREIGN DECORATIONS.

THE following are among the decorations awarded by the Allied Powers for distinguished services rendered during the war.

By the King of the B-lgians.—Ordre de Leopold—Officier: Colonel Charles Alfred Hodgetts, C.M.G., Canadian Army Medical Corps. Ordre de la Couronne—Officier: Brevet Colonel James Paul Bush, C.M.G., C.B.E., T.D., R.A.M.C., T.F.

By the President of the French Republic.—Légion d'Houneur—Chevalier: Temporary Captain Charles Gerald Harmer, R.A.M.C.

By the King of Italy.—Silver Medal, "Al Merito Della Sanita Pubblica": Major-General Sir F. R. Newland, K.C.M.G., C.B.

# Medical Nelvs.

AT the Aberdeen University graduation ceremony on March 30th the honorary degree of LL.D. was conferred upon Professor Thomas Wardrop Griffith, C.M.G., M.D., F.R.C.P., professor of medicine in the University of Leeds.

THE Morison lectures before the Royal College of Physicians of Edinburgh will be delivered by Professor G. Elliot Smith, F.R.S., on May 1st, 3rd, and 5th, at 5 p.m.; the subject is The Evolution of the Human Intellect.

AT a meeting of the Central Midwives Board for England and Wales, held on March 23rd, with Sir Francis Champneys in the chair, four midwives who had been cited were struck off the Roll.

THE inquiry of the Mosquito Investigation Committee of the South-Eastern Union of Scientific Societies into the habits of Anopheles plumbeus was hindered by the drought of last summer. It is proposed to resume the investigation, and information as to the particulars required can be obtained on application to the Rev. T. W. Oswald-Hicks, Lesware, Linden Road, S.E.15.

In Sweden, according to a recent decision of the Lower Court of Appeals at Stockholm, medical practitioners cannot in future be compelled to give evidence in court against their will in cases with which they have been professionally connected.

THE Rockefeller Foundation has given 6,000,000 dollars to the Johns Hopkins University for the school of hygiene and public health; of this sum 1,000,000 dollars is to be available for the erection of new buildings for the school and Work on the main building is expected to start this summer.

ARRANGEMENTS have been made for six lectures to be given, in English, by English lecturers, in the grand amphitheatre of the Faculty of Medicine of Paris: on May 6th Sir Sidney Russell-Wells will lecture on the circulatory effects of mitral stenosis and aortic regurgitation; on May 11th, Sir Wilmot Herringham, on trench fever; on May 13th, Dr. Sampson Handley, on lymphatic pathology, with receiving the majorante to majorante discount of May 18th. with special reference to malignant disease; on May 18th, Professor E. H. Starling, on the mechanism of compensation in the heart; on May 20th, Mr. H. J. Waring, on acute pancreatitis, its diagnosis and surgical treatment; on May 27th, Professor G. Elliot Smith, on stereoscopic vision and the evolution of man.

DR. BEDFORD PIERCE, on the occasion of his resigning the post of medical superintendent of the York Retreat Mental Institution, has been presented with many farewell gifts, including cheques of £105 and £100 from the committee and past and present members of the staff respectively, a portrait in oils of himself as a personal gift from the committee, with a replica to hang in the board room. He has been appointed consulting physician to the Retreat. Mrs. Pierce has also received a number of gifts.

AT the annual meeting of the Society for the Study of Inebriety to be held at 11, Chandos Street, W.1, on Tuesday, April 11th, at 4 p.m., Dr. Edgar L. Collins, Talbot professor of preventive medicine in the University of Wales, will open a discussion on the use of alcohol by the industrial worker.

THE King has approved the appointment of Lieut. Colonel James Young, M.D., T.D., as a deputy lieutenant for the county of Gloucester.

THE first three Friday evening discourses after Easter at the Royal Institution of Great Britain will deal with medical or biological subjects. On April 28th Professor Arthur Harden, F.R.S., head of the Biochemical Department, Lister Institute, will speak on vitamin problems; on May 5th Dr. Michael Grabham will describe some of his biological studies in Madeira; and on May 12th Dr. H. H. Dale, F.R.S., director in Madeira; and on May 12th Dr. H. H. Dale, F. K.S., director of the Department of Biochemistry and Pharmacology at the National Institute for Medical Research, will discuss the search for specific remedies. On June 9th Mr. Joseph Barcroft, F.R.S., reader in Physiology in the University of Cambridge, who has recently paid a visit to the Andes in company with Professor Meakins of Edinburgh, will relate some of the results of their investigations into the physiological effects at high altitudes. The discourses will be given

THE report presented at the annual meeting of the Cremation Society of England on March 29th showed that the number of cremations in Great Britain in 1921 was 1,922 about 100 below the maximum figure which was reached two years ago. Altogether, since the opening of the first crematorium at Woking in 1885, there have been 25,418 cremations. Nearly half the cremations take place at Golders Green, but there are thirteen other crematoriums in England and one in Scotland, and other schemes for erecting crematoriums are well advanced, especially one at Pontypridd. According to one speaker at the annual meeting (Mr. A. E. Bernays), every thousand ordinary burials in single graves occupy an acre, so that the encroachments of the cemetery in urban districts, if the present method of disposing of the dead continues, can be forecasted. The practice of cremation, so far from destroying sentiment, would make it possible to revert to the old practice of intramural interment. Sepulture in churches would no longer be forbidden by sanitary law, and Westminster Abbey, where few or no more bodies can be buried, might continue indefinitely to receive the cremated ashes of famous men and women. The Cremation Society, which has recently changed its address to 52, New Cavendish Street, W., has a life membership scheme which includes the prepayment of cremation fees, and this is an advantage, especially in the provinces, where cremation fees are higher than in London owing to the comparatively small number of cremations which are carried out.

THERE was a slight increase in the number of deaths from influenza in the week ending April 1st; the figures for the 105 great towns were 113, as against 104 in the previous week; and for London 21, as against 17.

AT the meeting of the London County Council on April 4th Dr. Edward Mapother, deputy medical superintendent of the Long Grove Mental Hospital, was appointed medical superintendent of the Maudsley Hospital. Each candidate for the post was informed that the appointment would be held subject to the pleasure of the Council, which would be exercised at the expiration of six years at latest. The salary is to be £900 a year, on a pre-war basis, and the approved temporary additions bring the amount up to £1,200 a year. It is understood that the superintendent is to be permitted to practise as a consultant so far as this is consistent with his duties at the hospital. In the selection of the candidate two eminent psychologists, nominated by the University of London, gave the Asylums Committee the benefit of their views.

THE North-East London Post-Graduate College will hold a special intensive course at the Prince of Wales's General Hospital, Tottenham, N.15, from Monday, May 15th, to Satur-day, May 27th, inclusive. It will include demonstrations, in mornings, of clinical and laboratory methods, groups of illustrative cases, etc., and on Saturday mornings practical demonstrations in associated hospitals. The afternoons will be devoted to general hospital work with clinics in the various departments, which will be followed each afternoon by a clinical lecture dealing more especially with the treatment of discorps. The first of the cavity of clinical lectures will be disease. The first of the series of clinical lectures will be given by Sir Thomas Horder, M.D., on "Some clinical types of arthritis and their treatment." Luncheon will be obtainable in the neighbourhood of the hospital, and tea will be provided each day. It is expected that the syllabus will be available before Easter.

THE membership of the Tuberculosis Society of Scotland is now nearly 70; the President for the current session is Professor Sir Robert Philip, P.R.C.P.Edin., the honorary secretaries are Dr. W. Leslie Lyall and Dr. Ian Struthers Stewart, the honorary treasurer is Dr. Macrae Taylor, and the Editor of the *Transactions* Dr. A. Fergus Hewat. The Society holds regular meetings for discussion; the next will take place on Friday, April 28th, at 4 p.m., in the New University Buildings, Edinburgh.

THE house and library of the Royal Society of Medicine, 1, Wimpole Street, W.1, will be closed from Thursday, April 13th, to Tuesday, April 18th, both days inclusive.

# Ketters, Aotes, 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 understood to be offered to the British Medical Journal alone unless the contrary bestated.

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.

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, Aitiology, Westrand, London; telephone, 2650, Gerrard.

2. FINANCIAL SECRETARY AND BUSINESS MANAGER (Advertisements, etc.), Articulate, Westrand, London; telephone, 2650, Gerrard.

250, 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, 6, Ruttand Square, Edinburgh (telegrams: Associate, Edinburgh; telephone, 4361, Central).

#### QUERIES AND ANSWERS.

#### INCOME TAX.

P. S." has ceased to use his own car and is hiring from a job-master as occasion requires. Has he any claim in respect of the loss incurred in connexion with the former purchase of his now

\*\*\* No. A claim to depreciation cannot be made in connexion with an assessment of professional as distinct from trade profits; he is entitled to the cost of replacement only, and in the circumstances there was no such outlay. The point was raised before the Royal Commission on Income Tax, and that body recommended that this distinction should be abolished, but that has not yet been effected. With regard to the purchased premises, "P. S." can deduct in lieu of the rent the amount on which he is assessed to Property Tax-that is, Income Tax Sch. A.

## LETTERS, NOTES, ETC.

#### SLIPPING RIB.

DR. EDGAR F. CYRIAX (London, W.1) writes with reference to Mr. R. Davies-Colley's communication on slipping rib (March 18th, p. 432), to point out that this condition of the rib has been described by him in the Practitioner for June, 1919, and also that Stiller (Die asthenische Konstitutionskrankheit, 1907) essayed under this title to establish a clinical entity one of whose most constant symptoms was looseness of the tenth rib.

#### Coué and Dubois.

DR. N. W. MARKWELL (London) writes: M. Coué has recently been credited with bringing forward a new principle in connexion with his so-called "Law of Reversal of Effort." The name and explanation of the mechanism involved are new, but the description and the use of the mechanism are not. Professor Paul Dubois (The Psychic Treatment of Nervous Disorders, English translation by Jelliffe and White, 1907) enunciated the mechanism clearly enough for others to grasp it and to use it in practice. It is a main feature in his persuasive method. . . . The whole book expounds this mechanism. For example p. 155 he states: "If we can, by a healthy philosophy of life and by moral hygiene suppress this toxic element of emotion we shall rid the greatest physical and intellectual fatigue of its harmful influence." In this and other passages Dubois points out unequivocally that a fundamental psychological principle which is of the greatest utility in practice does exist. One may not agree with Dubois's psychology and metaphysics, nevertheless we are in his debt, and not in the debt of M. Coué. For some years I have been in the habit of designating the mechanism "The Positive Reaction." DR. N. W. MARKWELL (London) writes: M. Coué has recently

#### AESCULAPIUS AND CONSUMPTION.

AESCULAPIUS AND CONSUMPTION.

MR. MORLEY ROBERTS (London) writes: Doubtless most physicians have read Sir Thomas Browne's Religio Medici; and it is possible that some may even have looked into his essay entitled On Dreams, but I have never seen any comment on the passage in the latter piece which runs: "And a man might be hard put to it to interpret the language of Aesculapius, when, to a consumptive person, he held forth his fingers, implying thereby that his cure lay in dates, from the homonymy of the Greek, which signifies dates and fingers." As our learned author does not quote his authority, it is hard to say where this comes from, but it seems capable of an interesting interpretation. As Hippocrates was of the family of the Asclepiadae, one of whose chief seats was Cos, this saying may possibly be found in his works or the pseudo-Hippocratic writings. Perhaps some student of Hippocrates can tell me if this is so. It seems to me that this cryptic saying may be regarded as sound advice. Suppose that the physician's comment was, "By this I do not mean dried dates but fresh ones. Go where you can get them daily. I suggest Egypt as the handiest place where the date tree flourishes." If my suggestion is correct one may infer that modern doctors, when they recommend the dry, pure desert air, are but following, without knowing it, the advice of some unknown Greek colleague, unless Browne really meant Hippocrates when he wrote of the mythical Browne really meant Hippocrates when he wrote of the mythical Aesculapius.

#### FIRST AID TO THE INJURED.

FIRST AID TO THE INJURED.

SQUADRON LEADER W. ROUS KEMP, R.A.F.M.S., writes to call attention to the fact that the present edition of the St. John Ambulance Association's First Aid to the Injured, which has been rewritten by Dr. R. Bruce, was originally compiled by the late Surgeon-Major Peter Sheppard, R.A.M.C., who was killed at the Battle of Isandula, Zululand, in 1879. Our correspondent considers that this small volume, which has been the origin and foundation of all first aid work, ought still to retain, as a lasting memorial to him, the original author's name, which, he says, used to appear in the earlier editions.

### VACANCIES.

Notifications of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 32, 33, 36, 37, 38, and 39 of our advertisement columns, and advertisements as to partnerships, assistant-ships, and locumtenencies at pages 34 and 35.

THE following appointments of certifying factory surgeons are vacant: Brynmawr (Brecon), Carlisle (Cumberland).

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

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#### An average line contains six words.

All remittances by Post Office Orders must be made payable to the British Medical Association at the General Post Office, London. No responsibility will be accepted for any such remittance not so safeguarded.

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.

accompanied by a reference.

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