

## Memoranda:

### MEDICAL, SURGICAL, OBSTETRICAL.

#### ACUTE OEDEMA OF THE CERVIX.

THE following case may be of interest in connexion with the report of the Edinburgh Obstetrical Society (BRITISH MEDICAL JOURNAL, January 6th, p. 18).

On December 4th, 1922, I was called to a young married woman aged 28 (her first child); she had been in labour for six hours. Examination showed a single pregnancy at full time in the left occipito-anterior position. On vaginal examination the os was dilated to the size of a five-shilling piece, and the membranes were bulging; the anterior lip of the cervix was swollen but was not lower than the posterior lip. One and a half hours afterwards the head was on the perineum, and the child (weighing 6½ lb.) was born without any difficulty twenty minutes later. As haemorrhage was profuse and continuous I endeavoured to express the placenta, when the large oedematous anterior lip of the cervix protruded. It was the size of a large orange, and instead of the placenta a large clot, as big as a foetal head, was expressed. As the haemorrhage still continued I removed the placenta manually without difficulty, when the haemorrhage ceased and the uterus contracted down. From the size of the anterior lip of the cervix I was surprised that there had been no arrest of the head.

The puerperium was slightly protracted but was uneventful; two weeks afterwards the anterior lip was still to be seen within the vulva, but four weeks from the date of birth it had receded, was patulous, and was about half an inch lower than the posterior lip. I notice that the reported cases are all multiparae. This patient aborted two years previously at the tenth week; she was then in a weak and anaemic condition, but responded well to treatment. I had never previously seen the condition, and although recognizing it to be rare I was unaware that it was so rare as stated.

Ipswich.

J. A. MCKINNON.

#### ERYSIPELAS OF THE MOUTH.

THE case of erysipelas of the fauces published in the JOURNAL of January 20th (p. 105) reminds me of a case I saw some years ago. The interesting point in it, apart from the comparative rarity of the condition, was the spread of the infection to the face by way of the Eustachian tubes.

The patient, Mrs. H., seven months pregnant, when seen was complaining of sore throat and swelling of the neck. On examining her throat I thought she was suffering from diphtheria; I also noticed that the fauces were more of a dusky red colour than usual. The report on the swab was, however, negative. In about three days' time both ears became affected with erysipelas, the infection evidently having spread from the throat by way of the Eustachian tubes. From the ears the infection gradually spread over the whole face, and was of so severe a nature that for eight days she was quite unable to open her eyes.

The patient made a good recovery and had a perfectly normal confinement at full term.

Kempston, Bedford.

GEORGE BUTTERS, M.B.

#### FRACTURE OF THE NECK OF THE RADIUS.

FRACTURE of the neck of the radius is sufficiently uncommon to warrant the following record of a case.

On August 14th, 1922, a girl, aged 12 years, fell off a pony. The right upper extremity was pinned between her back and the ground. When seen on August 16th there was much pain and swelling. The elbow had been vigorously rubbed with some liniment. Crepitus was felt, but the site of fracture was uncertain. A skiagram showed a fracture of the neck of the radius, with slight ulnar displacement of the lower end of the upper fragment.

The limb was put on an internal angular splint in semi-pronation. On August 23rd passive movements of flexion and extension were commenced. On September 7th general passive movements and massage were instituted. On September 18th the patient was allowed to ride. Examination on September 29th revealed complete and perfect recovery.

Burton-on-Trent.

H. D. O'SULLIVAN.

## Reports of Societies.

### BONE-GRAFT SURGERY.

AT a meeting of the Edinburgh Medico-Chirurgical Society on January 17th, with the Vice-President, Sir DAVID WALLACE, in the chair, Mr. A. E. MORISON read a communication on the principles of bone-graft surgery. In a large proportion of cases, he said, the two points requiring special consideration were the presence of latent sepsis and of scar tissue. He emphasized the importance of elimination of latent sepsis. As regards the detection of this, his experience was that the employment of radiant heat was the most reliable and constant guide; he used a 2,000-candle power lamp applied to the seat of injury for increasing periods of five to fifteen minutes each day, the course of exposure lasting ten days. His custom was to carry out the operation in two stages. At the first the scar tissue was widely excised, the ends of the bone examined, the wound treated with alcohol, bipped, and then closed with silkworm sutures; when the radiant heat test was negative the second part of the operation was performed. While the test was still positive autogenous vaccines were employed. Further, before operation was undertaken free movement in the joints and tendons of the affected limb must be secured and the patient accustomed to the retentive apparatus and the attitude of the limb to be adopted later. The fibula, the antero-internal surface of the tibia, and the crest of the ilium were useful sites from which to transplant bone. Where a bridging graft was employed the length of the graft should be three times that of the gap. In removing the graft the periosteum was cut with a knife and the bone with an Albee saw kept cool with saline; the periosteum was retained in all but intramedullary grafts. Mr. Morison then proceeded to describe the various types of graft suitable for different cases. The indications of the inlay—intramedullary "cricket-bat," "cricket-bail," and "wedge-shaped" varieties—were fully discussed. Methods were described of fixing the graft by absorbable sutures, such as catgut and kangaroo tendon, and by non-absorbable sutures, such as wire. The use of split pins, bolts, and metal bone plates was fully dealt with, and other details of technique were given.

The paper was discussed by Professor CAIRD, Mr. MILES, Mr. SCOT SKIRVING, Mr. MERCER, and Mr. SHAW.

#### "Occupation Cure" in Neurasthenia.

Dr. A. J. BROCK then read a communication on the "occupation cure" in neurasthenia. Experience proved that in most of the psychoneuroses the mental factor should be considered first, although all psychical phenomena were doubtless accompanied by physical and chemical changes in the nervous tissue. The mind foolishnesses of everyday life were dealt with by moral means; why not then also severer phenomena of the same kind? The renewed interest in psychology which centred round Freud might be compared with that which a century ago found its chief spokesman in Gall, at a time of social and mental stress resembling the present. Gall, like Freud, emphasized subconscious trends, but through undue importance being attached to cerebral localization of the "propensities" and through general over-systematization at the hands of Gall's followers his teaching lost repute and degenerated into phrenology. In Edinburgh George Combe, in particular, developed the educational side of Gall's psychology. Freud had recently re-emphasized the subconscious; his stressing of sexuality and psychological determinism applied mainly to pathological cases. For a complete hygiene of mind the psychology of Freud must be supplemented by that of a vitalist such as Bergson. Coué had lately demonstrated another prevalent pathological condition—the extreme suggestibility, hypnotizability, even gullibility, of the popular mind. As regards treatment, apart from cases with definite complexes, needing psycho-analysis, there were many patients with merely a diffused fearfulness or tendency to worry; these dreaded exerting themselves (ergophobia) and should by ergotherapy be stimulated to strengthen their wills. Their work should be congenial, and, man being a sociable animal, their work must be related to that of their social milieu. Education, by divorcing the child from its environment and presenting knowledge as unconnected school "subjects," predisposed to mental dissociation. The programme of the Regional Survey Association found a basis for correlation of all subjects of study in the individual's immediate environment, and hence should appeal to the medical

PSYCHOLOGICAL MEDICINE.—Mary R. Barkas, S. Blanton, N. H. Clubwala, J. Gifford, G. W. Greene, F. H. Guppy, E. L. Hopkins, P. D. Hunter, P. McLuskie, N. W. Markwell, N. Roberts, W. D. Sammon, C. E. A. Shepherd.

*Council and Committees.*

Dr. W. S. Lazarus-Barlow, Sir John Broadbent, Dr. T. W. Eden, and Sir George Newman were elected Councillors, on the nomination of the Council, to take the places of Drs. Lauriston Shaw, Copeman, Chaplin, and Blacker, who retired by rotation.

Dr. Herbert Spencer and Dr. Raymond Crawford were elected members of the Library Committee, on the nomination of the Council, to take the places of the late Sir Norman Moore and the late Sir James Galloway.

*Appointment of Delegates.*

Sir William Hale-White and Dr. R. A. Young were appointed as representatives to a conference summoned by the University of London concerning the courses of instruction provided by medical schools.

Permission was granted to the editor of the *Lancet* to reproduce the portraits of certain physicians in a publication intended to celebrate the centenary of that journal.

The President was appointed a delegate to attend the celebration, on June 5th to 7th next, of the 803th anniversary of the foundation of St. Bartholomew's Hospital.

Dr. R. O. Moon was appointed to represent the College at the celebration of the centenary of Jenner by the Académie de Médecine.

Sir Francis Champneys was appointed, on the nomination of the Council, a representative of the College on the Central Midwives Board.

*Lecturers.*

The President announced that the Council has appointed Lieut.-Colonel William Glen Liston, C.I.E., M.D., to deliver the Milroy lectures in 1924.

On the recommendation of the President it was resolved that the appointment of the Lloyd-Roberts lecturer be made by the Censors Board.

The Committee of Management reported that Mr. H. J. Waring had acted as Visitor of the Board at the Examination of the Egyptian School of Medicine, Cairo, in January.

*Regulations for the D.P.H.*

The Committee of Management presented new regulations for the D.P.H. England, in conformity with the resolutions and rules framed by the General Medical Council, to come into force on January 1st, 1924. The Committee presented a report criticizing the action of the General Medical Council.

The report pointed out that in the new resolutions and rules of the General Medical Council no provision is made for candidates in the army to receive instruction in the duties of a medical officer of health under a sanitary staff officer in the Royal Army Medical Corps having charge of an Army Corps, District, Command, or Division, such as was formerly provided for in the regulations. The report continued:

"The committee have already called the attention of the General Medical Council to the hardship to officers of the R.A.M.C. in being deprived of this opportunity of studying for the diploma, when, at the request of that Council, the Committee expressed their views on the advisability of revising the regulations. Further, it appears that under the new regulations, the instruction under a sanitary officer in India, in the British Dominions and the Colonies will be no longer acceptable, because, according to the interpretation of the new rules by the General Medical Council, the whole course of training under a medical officer of health must be given under one and the same officer in one and the same area, and must cover all the subjects mentioned in Section II, paragraph II 4 (a) to (f), and it is improbable that these conditions can be fulfilled elsewhere than in this country. The Committee are of opinion that the new regulations cause a distinct hardship to officers in the R.A.M.C. and to Indian and Colonial doctors, and they recommend that the Royal Colleges should again draw the attention of the General Medical Council to this undesirable aspect of the new regulations."

The report was approved.

## UNIVERSITY OF OXFORD.

THE remaining degree days in the present term are Saturday, February 17th, Thursday, March 8th, and Saturday, March 24th.

Examinations for Scholarships in Natural Science are announced for the following dates: March 13th, at Keble College; March 20th, at Queen's College; March 20th, at Merton, Exeter, New, Brasenose, Corpus Christi, and Wadham Colleges.

Robert D'E court Atkinson, B.A., has been elected to a Research Fellowship at Hertford College.

At a congregation held on January 25th, the degree of bachelor of medicine (B.M.) was conferred on D. S. Davies.

A pamphlet of 16 pages entitled "Information concerning the school of medicine, medical degrees and diplomas, and post-graduate medical study and research," is issued by the Clarendon Press and sold by the Clarendon Press Depository, 116, High Street, Oxford, price 1s. net. Leaflets containing full details of the examinations and regulations for the Diploma in Public Health and the Diploma in Ophthalmology can be obtained by applying to the Dean of the Faculty, University Museum, Oxford.

## UNIVERSITY OF CAMBRIDGE.

UNDER the recent arrangement for the interchange of teachers Dr. Friedrich Zschokke, professor of zoology and comparative anatomy in the University of Basle, has commenced a course of

sixteen lectures on the European fauna. The corresponding exchange lectures at Basle will be given next term by Mr. J. T. Saunders, demonstrator of animal morphology.

At a congregation held on January 26th the degrees of Bachelor of Medicine and Surgery (M.B., B.Ch.) were conferred on N. G. Thomson.

## UNIVERSITY OF LONDON.

A MEETING of the Senate was held on January 24th, when the Vice-Chancellor (Mr. H. J. Waring) was in the chair.

Sir Sydney Russell-Wells, M.P., was reappointed representative of the University on the General Medical Council for 1923-24.

The following doctorates were conferred:

D.Sc. in EMBRYOLOGY.—G. S. Sansom, University College, for a thesis entitled: Early Development and Placentation in *Arvicola (microtus) amphibius*, with special reference to the Origin of Placental Giant Cells.

D.Sc. in PHYSIOLOGY.—G. V. Anrep, M.D., University College, for a thesis entitled: The Metabolism of the Submaxillary Gland.

In some copies of the BRITISH MEDICAL JOURNAL of December 30th, 1922, p. 1282, the asterisk did not show against the name of Miss Edith M. Hall, indicating that she had been awarded the University medal in Branch IV (Midwifery and Diseases of Women) of the M.D. examination of the University of London.

## CONJOINT BOARD IN SCOTLAND.

THE following candidates have been approved at the examination indicated:

FINAL EXAMINATION.—*Medicine*: J. S. Bizzett, E. T. Hall, J. J. Mann, J. H. Murrell, R. M'D. McKinnon, C. C. L. Spurring. *Midwifery*: J. S. Bizzett, D. G. Coutts, J. J. Mann, J. H. Murrell, C. C. L. Spurring. *Medical Jurisprudence and Public Health*: J. C. Colvin, D. G. Coutts, J. G. Currie, J. Dey, D. K. Fisher, M. Goldberg, C. M. Hinds, O. ap Vychan Jones, R. F. Kerr, L. A. Moody, W. Melrose, A. Menzies, J. P. T. Mills, J. G. O'Kieffe, G. M. Rose, J. J. du Pré le Roux, R. D. Scott, H. Sen.

The following candidates, having passed the Final Examination, were admitted to the R.C.P.E., L.R.C.S.E., and L.R.F.P. and S.G.: D. Gold, T. C. H. Neil, C. J. B. Fox, J. M. Crombie, E. Brazao, Annie F. Perry, Hilda Page, Johannes J. Malan, Katherine M. Cel an-Jones, B. McLaughlin, J. B. Rodrigo, I. S. R. Bain, el Saied et Goharg Sheir.

## SOCIETY OF APOTHECARIES OF LONDON.

THE following candidates have passed in the subjects indicated:

SURGERY.—G. G. Brown, M. P. Parker, R. F. A. Philpott, H. M. White. MEDICINE.—\*B. Basuny, †L. A. Daly. FORENSIC MEDICINE.—H. J. Adams, B. Basuny, C. S. Laurence. MIDWIFERY.—B. Hart, W. M. Jones, C. S. Laurence.

\* Section I. † Section II.

The diploma of the Society has been granted to Messrs. G. G. Brown, M. P. Parker, and R. F. A. Philpott.

## Medico-Legal.

## AN ACTION FOR NEGLIGENCE.

A CASE of importance to the medical profession came before Mr. Justice Rowlatt and a special jury last week at Somerset Assizes.

The plaintiff, Miss Coleberd, a cheesemaker, of South Barrow, claimed damages against Dr. P. A. Colmer of Yeovil, alleging negligence in setting a fractured forearm. It was alleged that defendant failed to set the bones in apposition, that he set them out of alignment, and did not take reasonable care to see that they were set so as to unite. In consequence there was marked displacement of the lower fragments, and the bones failed to join properly. An operation subsequently became necessary, at which the bones had to be sawn through and reset with plates and screws. It was complained that Dr. Colmer neglected to make an x-ray examination of the arm, and that plaintiff's recovery had been unduly and unnecessarily prolonged. Compensation for loss of employment, and special damages of £21 18s., were claimed. The defence was that there had been no negligence.

Mr. Rayner Goddard conducted plaintiff's case, and defendant was represented by Mr. J. A. Hawke, K.C., with whom was Mr. G. D. Roberts (instructed by Messrs. Hempson, solicitors to the Medical Defence Union).

Mr. Goddard, in opening, said it was alleged that by reason of the defendant's neglect of what were in some respects elementary precautions, plaintiff, a young woman of 26 with her living to get, suffered from a broken arm for some three or four months—a much longer period than would have been the case had proper treatment been applied at an earlier date. The accident occurred on June 9th, 1921, and both bones of the left forearm were fractured. Dr. Colmer was sent for, and, after applying a temporary splint, removed Miss Coleberd to his surgery, where he set the arm. There were no complications, and it appeared to be a simple fracture. Altogether she paid sixteen visits to Dr. Colmer, and at the end of the sixth week, when the splint was taken off, it was obvious that the broken bones had not united. The complaint was that he neglected to have an x-ray photograph taken in order that he might see the condition of the bones after the setting. The bones did not unite, so after a consultation with a surgeon in Yeovil she was sent to Bournemouth. There she consulted a surgeon, who had the arm x-ray photographed, the girl having then to undergo two operations. She had now a fair arm, although she was unable to do anything like hard work.

Plaintiff gave evidence, and in cross-examination denied that she had jolted the injured arm after it had been set.

Mr. A. H. Vernon, senior surgeon to the Bournemouth hospital, stated that plaintiff consulted him and brought x-ray photographs, which disclosed the bones overlapping at the fracture. From his observation they must have been in that position for some three months. Judging from what he found, proper treatment had not been afforded the arm. It was a difficult fracture to set, and in his opinion nothing could have been more helpful than the taking of an x-ray photograph to see that the setting was satisfactory; he regarded that as a routine practice nowadays. When the arm did not mend he thought it amounted to a lack of reasonable care not to have taken an x-ray photograph. He did not agree that Miss Coleberd was a bad bone-forming subject.

Mr. Maitland Scott, assistant surgeon to the Bournemouth hospital, gave evidence supporting that of Mr. Vernon, and added that he did not think it likely the bones could have been put straight by manipulation. In his opinion the deformity had only been of one month's duration.

Mr. Hawke, addressing the jury, said it had been suggested that Dr. Colmer did not know his job to the extent expected of the ordinary medical practitioner. He had a large practice in Yeovil, which he had carried on for a great many years, after succeeding his father, and there had never been a breath of suggestion against his professional character or competence. Expert evidence would be called on the question of x-ray examination, also to show that the girl was unusual in her absence of bone-making capacity.

Dr. Colmer gave evidence describing his treatment of the case, and stating that he did not consider an x-ray examination necessary after he had set the arm. The girl's home was ten miles from Yeovil, and he suggested she should be attended by the doctor in her own locality, but she expressed preference to remain under his treatment. On July 22nd he found there had been no union of the bones—the first case of non-union in that position he had had in the whole of his professional experience. The girl was in a bad condition of health, and he prescribed a tonic to improve her general health and bone-making capacity. On August 19th when he again removed the splints the bones seemed to be united, and he told plaintiff what a straight arm she had. He instructed her to keep the arm in a sling, and get some massage treatment. On August 27th the arm was in good condition, but on September 9th, when next he saw Miss Coleberd, he found there was a good deal of swelling in the tissue around the seat of the fracture. It suggested to him that there had been some violence. Feeling the bones with his fingers he found they were not in alignment, and he reapplied the splints after putting them in alignment. In cross-examination he denied that plaintiff had ever raised the question of an x-ray examination. There was an x-ray apparatus at Yeovil hospital, but he did not think it necessary to put plaintiff to the expense of undergoing that examination, which would have cost two guineas.

Mr. H. R. Unwin, assistant surgeon to the Yeovil hospital, stated that he examined plaintiff's arm on September 19th in consultation with Dr. Colmer and found it perfectly straight, but there was no union of the bones. He considered the treatment had been correct, but suggested that the ends of the bones should be rubbed together, thus encouraging union. He also agreed with Dr. Colmer that the girl should endeavour to regain better general health before any operation was carried out.

A nurse gave evidence that she was engaged to give massage and did so for eleven days between August 28th and September 8th. During this time she noticed nothing abnormal. On September 9th she got the patient to see her doctor because deformity and swelling had suddenly appeared.

Mr. T. H. Openshaw, C.B., consulting surgeon to the London Hospital, stated that he was the first surgeon to use the x-rays when introduced into this country. It was not usual to take an x-ray photograph of a limb in the case of an ordinary simple fracture of this nature. One could get the bones in perfect alignment without using the x-rays for examination. It was perfectly correct treatment to advise massage, as Dr. Colmer had done in this case. He saw no reason why Drs. Colmer and Unwin, in consultation, could not find by manipulation whether the bones were straight. If plaintiff had been operated upon immediately she might not have got such a good arm as she had at present. His theory was that she was a bad bone-maker.

Mr. Goddard: Do you say an x-ray examination was not necessary in this case?

Mr. Openshaw: Yes. It would have prevented this case being brought. You would not have a leg to stand on if there had been an x-ray examination by the defendant.

Mr. Richard Warren of Weston-super-Mare, formerly surgeon to the London Hospital and examiner in surgery at the Universities of Oxford and Cambridge, stated that after hearing the evidence he could not criticize Dr. Colmer's treatment in any way up to the time the girl went to the seaside.

His Lordship, summing up after counsel had addressed the jury, said the patient of an ordinary general practitioner was entitled to expect fair skill from her doctor, but not such great skill as one might expect from a specialist in Wimpole Street. The jury must not suppose because this had been an unfortunate case, and there had not been such a cure as in most fractures of the kind, that the doctor ought to be mulcted in damages. If a doctor made a mistake, and it was not due to want of reasonable skill and care, that was a misfortune. One could not expect infallibility in doctors more than in any other professional men. It was for the jury to say whether they thought Dr. Colmer had been guilty of negligence. If they found for the plaintiff it was a case for moderate damages.

After an hour's retirement the jury returned a verdict for the defendant, and judgement was entered accordingly.

## Medical News.

At a joint meeting of the Darlington Division of the British Medical Association and the North of England Branch of the Veterinary Association to be held at the Greenbank Hospital, Darlington, on Friday, February 9th, at 4 p.m., there will be a discussion on tuberculosis in milk. It will not be confined to disease, but will also cover the conditions to which milk is subject before it reaches the consumer. Professor Gifford, the chief veterinary officer for Edinburgh, will put forward the veterinary view, and the medical aspects will be presented by one of the local tuberculosis officers.

THE announcement that Sir Richard Douglas Powell, consulting physician to the Middlesex Hospital, will give an Emeritus lecture on Friday, February 2nd, reaches us late. The lecture, which will deal with aortic regurgitant disease regarded specially from a prognostic and life assurance point of view, will be given at 3 p.m.

THE Fellowship of Medicine and Post-Graduate Medical Association has arranged a course of seven practical lecture-demonstrations on certain diseases of children, to be held during February at the Children's Clinic, Western General Dispensary, Cosway Street, N.W., on Tuesdays and Fridays, at 5 p.m. The first on February 13th and the last one on March 6th will be given by Sir William Bayliss and the other five by Dr. Bernard Myers, whose concluding lecture will be devoted to "The nervous child as seen in general practice." The fee for the course is one guinea; copies of the syllabus can be obtained from the Secretary to the Fellowship of Medicine, 1, Wimpole Street, W.1.

THE meetings of the Zoological Society of London for scientific business will be resumed on Tuesday, February 6th, at 5.30 p.m. Attention is called to the great increase in the cost of paper and printing, which renders it necessary that papers should be condensed and limited as far as possible to the description of new results. Dr. R. W. A. Salmond has been appointed honorary radiologist to the Society.

THE Dental Board of the United Kingdom announces that the third series of the prescribed examination under the Dentists Act, 1921, will be held during April next. The closing dates for entries are as follows: for examination at London, March 6th; at Manchester, March 21st; at Edinburgh, March 30th. Notices will be sent to those whose names have been entered on the list of candidates. It is important for those whose names are entered on the list of practitioners of less than five years' standing to bear in mind that there will only be two more opportunities for them to present themselves—namely, April and July of this year. Letters relating to this subject should be addressed to the Secretary for Examinations, 44, Hallam Street, W.1.

REPORTS received from the Red Cross in Russia indicate that there are now some 3,000,000 cases of malaria in the republic west of the Ural mountains. In Georgia one-half of the population are affected, and at the village of Sambourdale, near Tiflis, two-thirds of the total population have died of malaria. Many of the malaria cases are malignant, and the disease is particularly prevalent in the Volga region, where the famine has been so severe, and in the Caucasus. The Russian Medical Aid Committee has received an urgent request for quinine in large quantities, and would be glad to receive contributions addressed to Mr. A. Baker, Treasurer, Medical Aid Committee, 68, Lincoln's Inn Fields, London, W.C.2.

COLONEL R. H. ELLIOT's book on *Tropical Ophthalmology* has been translated into French by Dr. Coutela of Paris and Dr. Morras of Rabat. The volume is published by Masson et Cie. Dr. Francisco Maria Fernandez has also prepared a Spanish translation, which is published by the Twentieth Century Press, Havana.

THE Royal Society of Medicine announces in our advertisement columns that the William Gibson Research Scholarship for medical women will be awarded in June next to a qualified medical woman selected by the Scholarship Committee. The scholarship is for £250 for two years. Further particulars can be obtained on application to the Secretary of the Society, 1, Wimpole Street, W.1.

Dr. John Craig Crawford and Dr. Josephine Letitia Deuny Fairfield, both of the Middle Temple, were called to the Bar on January 26th.

A WINDOW in memory of the late Dr. Hayes Newington has been erected by the members of his family in the Ticehurst Parish Church, Sussex.

SIR ROBERT ARMSTRONG-JONES, C.B.E., M.D., has been appointed a Deputy Lieutenant of the county of London.

A BANQUET was held recently in Paris to celebrate the jubilee of the well known Paris medical journal *Progrès Médical*; Professor Richet presided, and the history of the journal was reviewed by the present editors, Dr. Loeper and Dr. Genty.

THE death is announced of C. P. Goerz, the founder of the firm of optical instrument makers known especially for its field glasses and cameras.

THE firm of William Heinemann announces in our advertisement columns to-day a plan, new to this country, of introducing its medical and surgical publications to country practitioners who, because they reside far from booksellers' shops and medical libraries, have no opportunity of seeing the latest medical books. It will meet also the difficulty encountered by practitioners in towns, owing to the fact that ordinary booksellers are indisposed to stock medical books. The plan is to offer general practitioners the opportunity of seeing the medical books of the firm on approval for a week without any expense to them.

A GIFT of over 100,000 dollars from an American lady, Mrs. Guggenheim, has enabled the Vienna faculty of medicine to open new and well furnished quarters for students of medicine who are unable to work at home owing to lack of fuel and books. A condition of the gift is that absolute freedom from racial and religious prejudice should prevail.

A CONGRESS of Social Hygiene will be held in Paris from December 18th to 23rd, 1923.

## 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, *Aitiology*, Westrand, London; telephone, 2630, Gerrard.
2. FINANCIAL SECRETARY AND BUSINESS MANAGER (Advertisements, etc.), *Articulate*, Westrand, London; telephone, 2630, Gerrard.
3. MEDICAL SECRETARY, *Mediscera*, 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, Rutland Square, Edinburgh (telegrams: *Associate, Edinburgh*; telephone, 4361, Central).

## QUERIES AND ANSWERS.

### INCOME TAX.

"E. C." holds a salaried appointment and has claimed to deduct £25 expended on coaching and university fees for the Diploma in Psychological Medicine.

\* \* The claim is not good in law; the expense cannot rightly be said to be incurred wholly, exclusively and necessarily in the performance of the duties of the appointment, although they were incurred in connexion with the professional work. There is some parallel between such expenditure and the capital outlay incurred in getting together or improving the equipment of a general practitioner.

"C. S." inquires (1) what is the legal authority dealing with the right of deducting expenses from public salaries, and (2) whether pay earned as a locumtenent is "casual" and therefore not assessable?

\* \* (1) Schedule E, Rule 9 of the Income Tax Act, 1918, provides that expenses incurred wholly, exclusively, and necessarily in the performance of the duties of the office or employment can be deducted. There has, so far as we are aware, been no case before the courts dealing in this connexion with subscriptions to professional associations or payments for professional periodicals. (2) Tax is chargeable in respect of "every employment by retainer in any character whatever, whether such retainer shall be annual or for a longer or shorter period," etc., etc. Case II, Schedule D, now transferred to Schedule E under the Finance Act, 1922. We are of opinion that "casual" earnings as a locumtenent are chargeable to tax.

## LETTERS, NOTES, ETC.

DR. C. E. BEGG (Bath) writes to state that the respiratory sounds can be well heard through a jacket of antiphlogistine spread a quarter of an inch thick on gamgee tissue and applied direct to the skin. The fact is, he thinks, not well known.

### "WHAT ABOUT RIBS?"

IN one of his essays Mr. E. V. Lucas says that when he goes on a railway journey he makes a point of selecting from the bookstall periodicals which have nothing in common with the ordinary routine of his life, and in which he finds much amusement and refreshment. Among his favourites are the domestic journals published in the interests of music-hall artists. So, too, when the eye is perhaps a little fatigued by the serious medical journals of many nations, comic relief is found sometimes in such periodicals as *The Abolitionist* (an antivivisection organ) or *The Vaccination Inquirer*. To them must now be added another periodical, *The Journal of Osteopathy*, which though apparently not new, is new to us. Passing over the "professional cards" (among which one notes a specialist in "orificial surgery") and an advertisement of *Right Living*, "the aristocrat of osteopathic literature"—which has a cover that "looks like leather," and "will not be dated"—we are arrested by nine and a half pages of a "symposium" entitled "What about Ribs?" Osteopaths from far and wide have sent in their comments on some remarks made in a previous issue of their journal. C. A. Porter writes: "I wish I could be sure in the diagnosis and treatment of ribs. They surely exist, but I have seen very few where I felt reasonably sure of my diagnosis and less in which I was sure of correction." O. B. Gates writes: "I say ribs are very important and should be adjusted whenever out of line, which is very frequent indeed." Fred Taylor writes: "I am strong on ribs, and believe we overlook many rib lesions. I agree they are hard to reduce." S. B. Kiblinger writes: "Ribs cause lots of trouble, as do the vertebrae. I find many cases where the ribs are wholly at fault." G. C. Wilke writes: "Ribs are hard to adjust, and most of us don't adjust them either. All severe heart conditions, that I have found due to lesions, were due to rib lesions. A very important subject." E. C. Murphy writes: "I fix ribs." Ernest Fessenden writes: "Ribs are hard, especially when the one affected is over the heart, and patient thinks he is dying of heart trouble. Ribs, I find, must be fixed independently of the vertebrae. When you do fix this 'heart disease' your reputation is made." Harry Sinden writes: "Ribs are a cinch. But be sure the pelvis is straight before you attempt to correct any rib lesion." Edith W. Pollock writes: "Why can't any osteopath adjust rib lesions? I didn't know they couldn't. The ones who can't, would better go back for a P.G. course in technic or brush up on anatomy, and think." That, however, is the point. Are people who can write such arrant nonsense capable of thinking?

### HICCUP.

DR. H. J. FARDON (Reigate) writes: In the JOURNAL of January 13th I was interested in finding a reference to Mr. Money's remedy for hiccup—namely, drinking out of the opposite side of the glass. It so happened that a few months ago I had an attack of hiccup which lasted three days continuously. In desperation I tried this humorous remedy. Lying across the bed on my abdomen I bent my head downwards over the edge of the bed almost to floor and in this attitude I managed to perform the feat of drinking water from the far side of the tumbler. I have not hiccuped since. I consider that it is the attitude of head downwards rather than the cessation of breathing which is the effectual item of this cure.

LIEUT.-COLONEL G. T. LANGRIDGE, R.A.M.C., ret. (Bournemouth), writes: Over forty years ago my wife saw the method used by a young artillery officer, a guest at her father's house. He was attacked by hiccups at dinner, and drank out of his finger bowl in the manner described, and they ceased at once. It made an impression on her, and I have seen it often used by friends and have never known it to fail.

### VACANCIES.

NOTIFICATIONS of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 37, 38, 39, 42, and 43 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 40 and 41.

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 31.

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