

Memoranda :

MEDICAL, SURGICAL, OBSTETRICAL.

LINIMENTUM CALCIS CHLORINATAE IN THE TREATMENT OF BURNS.

NOTWITHSTANDING the great advances made during the war in the treatment of infected wounds, the present-day treatment of burns leaves much to be desired. This arises chiefly from the fact that where any considerable area of skin has been removed by burning the antiseptics commonly employed in treatment are quickly rendered inert by the discharge from the wound, or if used in sufficient strength to prevent suppuration are liable to cause symptoms of poisoning from absorption.

In pre-antiseptic days the most popular and satisfactory treatment for burns was the linimentum calcis (*B.P.*). It was soothing and emollient, and prevented the bandages from sticking to the wound, thus diminishing the pain of dressing and facilitating the ingrowth of epidermis over the denuded area. But the preparation had the serious defect that it was not antiseptic, and burns treated with it, especially if large, suppurated freely. To obviate this various expedients were from time to time adopted, such as adding eucalyptus oil or carbolic acid to the liniment, but without any marked success.

Having a few months ago to treat a case of scalding, it occurred to me that a liniment could as easily be made with a solution of chlorinated lime (liquor calcis chlorinatae *B.P.*) as with a solution of ordinary lime (liquor calcis *B.P.*), and that the liniment thus made must possess, in addition to its other qualities, the great antiseptic virtues of the hypochlorites. Such a liniment gave results so satisfactory in the case mentioned that I approached the medical officers of two large iron manufacturing concerns, where numerous cases of burns of varying degree are constantly under treatment. They now report that burns of all kinds, when freely treated with this liniment, heal rapidly without pain, suppuration, or rise of temperature, that sloughing, dead, or decomposing material quickly disappears, and that, in short, the liniment possesses all the antiseptic qualities of the hypochlorites together with the original virtues of linimentum calcis (*B.P.*).

Should the liniment in any instance prove too strong, the liquor calcis chlorinatae can be diluted before mixing with the oil with the necessary quantity of ordinary liquor calcis, but this has not been found necessary in India, where, owing to climatic conditions, chloride of lime decomposes rapidly, seldom containing more than a maximum of 20 per cent. of available chlorine.

Since all preparations of the hypochlorites deteriorate on keeping, it is suggested that the stock solution of liquor calcis chlorinatae for making the liniment be made up freshly at least once a week unless the chlorine content be proved satisfactory by titration; that, like eusol, it be kept in stoppered glass bottles away from light; and that equal parts of this stock solution and the oil be mixed together on the day of use.

Asansol, Bengal.

J. W. TOMB, O.B.E., M.D., D.P.H.

SECONDARY HAEMORRHAGE FOLLOWING ACUTE MASTOIDITIS.

THE following case is one of the few unfortunate results following the operation for enlarged tonsils and adenoids in a well nourished and robust child.

The patient, a boy aged 5, underwent the usual routine operation for the removal of tonsils and adenoids at the school clinic. The child was allowed to proceed home afterwards in a closed car and was put to bed; apparently every care was taken.

Ten days after operation he was admitted to the Manchester Ear Hospital with a swelling below the left ear and temperature of 102° F. The tympanic membrane was bulging in its posterior and superior quadrant and there was slight oedema over the mastoid process. The throat was quite clean and the tonsils and adenoids completely removed. The membrane was incised and a bead of thin muco-pus flowed from the middle ear. On opening the mastoid, thin yellow pus was found generalized through the cells and in the antrum. The lateral sinus was exposed, but did not appear to be thrombosed. Thin pus had tracked to the neck by way of the sinus groove to a large deep Bezold abscess. The sinus groove was followed down and a counter-drainage made in the neck.

The temperature did not settle after the operation, and the child looked extremely ill, but the post-aural wound and incision in the neck were discharging freely. The second evening after operation there was profuse haemorrhage from the post-aural wound, and the child died almost immediately. A *post-mortem* examination was refused, but an examination of the wound showed that haemorrhage had come from the jugular bulb.

It is interesting to note the rapidity of infection to the mastoid cells and the course of infection to the neck by way of the sinus groove. The almost complete lack of resistance is shown by the absence of any granulation tissue on the sinus wall or dura mater, and the fact that there was no previous ear trouble.

I am indebted to Dr. F. G. Wrigley, who performed the operation, for permission to record these notes.

Manchester Ear Hospital.

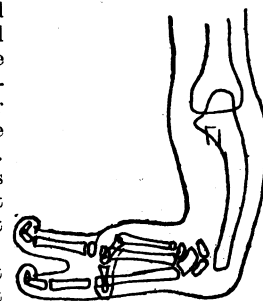
L. D. MERCER, F.R.C.S.Ed.

CONGENITAL DEFORMITIES OF FOREARM, HAND, AND LEG.

THE rarity of the congenital deformity shown in the diagram justifies this communication.

The patient is a girl, aged 11 years, in whom the right radius is almost completely absent, and there is no ulnar half of the right hand. The radial half of the right hand, which is the part usually affected when a deformity of the hand coexists with congenital absence of the radius, is normal. A skiagram shows a shadow at the upper end of the forearm, which is the only evidence of the right radius. Some of the right carpal bones are missing, but those present cannot be identified. The left radius is completely absent.

Both hands are "clubbed," but their function is good, the patient being able to write well (left-handed) and to brush her own hair.



Right forearm and hand
(from a skiagram).

There was also complete absence of the right tibia, the fibula articulating with the popliteal surface of the femur, the two bones forming an acute angle. This leg was worse than useless, and amputation was performed through the above-mentioned articulation. An excellent stump has been obtained. The left leg and both feet are normal.

I am indebted to Mr. Acton Davis for permission to publish this case.

H. ELWIN HARRIS, Jun., M.R.C.S.,
House-surgeon, East London Hospital
for Children.

PAROXYSMAL TACHYCARDIA.

THE following case, met with in general practice a short time ago, seems worth recording by reason of the comparatively insignificant subjective symptoms.

A man, aged 38, employed in a flour mill, on entering my consulting room complained in the first instance of a septic abrasion of the hand; when this had been attended to he mentioned—almost, it appeared, as an afterthought—that for the past six weeks he had experienced at intervals an aching pain over the upper half of the chest accompanied by a "stinging" sensation radiating down both arms as far as the hands; these sensations, together with a feeling of weight in the upper half of the chest, had just come on again after his walk up to my house. His appearance in no way differed from normal and there was no respiratory distress. The pulse rate, however, was 180, but the patient was quite unaware of any such disturbance. Auscultation of the heart revealed the same rate of systolic contractions. The sounds approximated very closely to those of the foetal heart. There was no irregularity of rhythm.

I decided to try to reduce the rate by one of the various devices described in textbooks as sometimes producing the desired result. The first and simplest was unexpectedly successful. I asked him to take a series of very deep inspirations, and the heart rate at once dropped to 90—that is, half its former rate.

Three days later I was present again during another paroxysm. This time, however, a series of deep inspirations failed to produce the desired effect; the pulse rate actually increased from 180 to 196. The patient continued to have one or two paroxysms a week for about six weeks, but at no time was there respiratory distress or any acute subjective symptoms. There was no detectable valvular lesion. Rest and treatment with digitalis gradually brought about a complete cessation of the attacks.

The patient returned to work and has not since complained of anything which would suggest that he is the subject of myocardial degeneration.

H. E. K. REYNOLDS,
B.A., M.B.Cantab.

York.

by concentrating into a few days a dosage which would formerly have been spread over many weeks. The single massive dose I do not believe in, but we should be grateful to the Erlangen school for teaching us to concentrate dosage. The value of this concentration is in no way bound up with the theory of the "cancer dose." To anyone who had given close attention to the cancer problem the theory seemed absurd, and the elaborate tables prepared for the securing of this infallible dose appeared akin to the cabalistic formulae of the medieval astrologers.

Many a valuable therapeutic measure has been damned by a futile theory. A course of x rays packed into four or five days often gives excellent results, and therefore has a definite place in radiotherapeutics.—I am, etc.,

London, W.1, April 13th.

F. HERNAMAN-JOHNSON.

SIR,—In your issue of April 12th (p. 689) Dr. Forsdike writes that "there is not a vestige of truth" in my statement that "in the Wertheim Klinik in Vienna operations on malignant disease of the cervix and uterus have been largely given up in favour of deep therapy."

I prefaced the above quotation from my paper with the words, "As I mentioned two years ago." It was in January, 1922, that I published the communication referred to, and I then said, "The chief assistant at Wertheim's Klinik, who was at Erlangen at the same time as I, told me that the results of this (deep therapy) treatment in cancer of the uterus or cervix are so good that Wertheim's operation is gradually being abandoned in that Klinik," and that the deep therapy was being used in its place; and it was to perfect herself in the Erlangen technique that this lady, who was chief assistant in the radiological department of that Klinik, had been sent to Erlangen for a long visit. I have since been informed that deep therapy is still very largely used in the Wertheim Klinik as a curative, as opposed to merely prophylactic, treatment in cancer of the uterus and cervix, so I considered I was justified in my statement. Dr. Forsdike's very emphatic correction is interesting.—I am, etc.,

Cheltenham, April 14th.

J. CURTIS WEBB.

CONTRACTED PELVIC OUTLET.

SIR,—The measurements that Dr. Blair Bell has given in his letter in the JOURNAL of April 12th (p. 690) confirm me in my opinion that his case was one of generally contracted pelvis of the round type. The measurements are almost exactly: intercrural 26 cm., external conjugate 19 cm., almost the minimum of what I class as minor degree of contraction. The infant he delivered by section weighed 7½ lb., sufficiently over the normal to bring the proportions into the medium degree of contraction, in which there would be definite indications of disproportion at the brim even before the onset of labour, and the real difficulty would be all through at the brim. The posterior sagittal diameter of 3¼ inches renders the outlet with a transverse of 2½ inches quite compatible with the delivery of a head that can pass the brim and the reduction of the outlet is with the rest of the pelvis. If such cases are observed and the labour managed on the lines laid down in my third lecture there is no reason why the case should end in disaster as the result of the infant being somewhat oversized and the pelvis slightly undersized.

I have published my lectures as a monograph (London: H. K. Lewis and Co.) in the hope that the principles laid down may enable practitioners to observe and conduct such cases with success and benefit to the mothers and infants by resorting to proper treatment at the proper time and not merely trusting to luck, and then, when that fails, resorting to force. I retain my opinion as stated on contraction of the outlet.—I am, etc.,

Rotunda Hospital, Dublin.
April 14th.

GIBBON FITZGIBBON.

LUNACY CERTIFICATION.

SIR,—We wish to point out that the question of liability for the medical certification of an alleged lunatic did not arise out of the Harnett trial. The certificate of a doctor is regarded in the Lunacy Act, Section 28, as the sworn

testimony of a witness, and upon it is founded the reception order signed by the magistrate.

For the purpose of arriving at a true judgement, the magistrate ought to hear both sides of the case. The alleged lunatic, who may possibly be sane, should be apprised of the allegations made, otherwise it is impossible for him to explain or refute them. He should have the opportunity, if he desires it, of testing the adverse evidence through cross-examination by his legal adviser, and of producing, if necessary, rebutting evidence.—We are, etc.,

PERCY DUNN.	J. S. RISIEN RUSSELL.
WILLMOTT EVANS.	HARRINGTON SAINSBURY.
E. KNIGHT.	AGNES SAVILL.
OCTAVIA LEWIN.	JANE WALKER.
HECTOR MUNRO.	S. E. WHITE.
W. S. PATCH.	

April 15th.

Universities and Colleges.

UNIVERSITY OF LONDON.

At a meeting of the Senate, held on March 26th, Mr. O. L. V. de Wesselow was recognized as a teacher of the University in chemical pathology at St. Thomas's Hospital Medical School.

It was resolved to substitute the following for the second footnote on page 1 of the Regulations for Matriculation, and that it be inserted in the Regulations in Medicine (Red Book, 1923-24, p. 219):

The medical and surgical degrees of this University are registrable qualifications to practise, and, though desirable, it is not necessary that students should register as medical students in order to qualify themselves to enter for the examination for these degrees. For the diploma of certain other licensing bodies, however, registration as a medical student by the General Medical Council is a necessary preliminary, and students should obtain particulars from the Registrar to the General Medical Council, 44, Hallam Street, Portland Place, W.1.

Applications for tickets for the annual service for members of the University, to be held at Westminster Abbey on presentation day, May 14th, at 5.45 p.m., should be sent to the Honorary Secretaries, Westminster Abbey Service Committee, 88, Gower Street, W.C.1.

A course of four lectures on the development of the human embryo up to the appearance of the primitive segments will be given by Professor T. H. Bryce, F.R.S., at King's College, on May 15th, 16th, 19th, and 20th, at 5 p.m.

A lecture on some questions concerning the influence of the tropical climate on man will be given in English at University College by Dr. C. Eijkman, professor of hygiene and microbiology in the University of Utrecht, on Friday, May 2nd, at 5 p.m.

Dr. J. van der Hoeve, professor of ophthalmology in the University of Leyden, will give a lecture in English at Charing Cross Hospital Medical School on accommodation, on Friday, May 9th, at 5 p.m.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

A QUARTERLY Council was held on April 10th, when the President, Sir John Bland-Sutton, was in the chair.

Jacksonian Prize.

The Jacksonian Prize for 1923 was awarded to Harold Robert Dew, F.R.C.S., of Melbourne, Australia, the subject of the essay being "The pathology and treatment of malignant diseases of the testicle." A certificate of honourable mention was awarded to J. Howell Evans, F.R.C.S., for his dissertation. The subject for the Jacksonian Prize for 1925 is "The pathology and treatment of lymphadenoma (Hodgkin's disease)."

Tomes Prize.

The John Tomes Prize for 1921-23 was awarded to William Warwick James, F.R.C.S., L.D.S., for his "Scientific work on the eruption of teeth, orthodontics, and the pathology of dental caries."

Election of Fellows.

The following members of twenty years' standing were elected to the Fellowship: Arthur Longley Whitehead, senior ophthalmic surgeon, General Infirmary, Leeds; and Arthur Robinson, professor of anatomy, University of Edinburgh.

Begley Studentship.

Miss Pera Rosaline Cecilia Crawford, of the London School of Medicine for Women, was appointed Begley Student for the ensuing three years.

University of London.

Mr. James Sherren was appointed to represent the College on the Senate of the University of London, in the vacancy occasioned by the retirement in May next of Mr. Raymond Johnson.

Lectures.

The following lectures will begin at 5 p.m. on each day on the revised dates:—April 28th: Mr. V. E. Negus, on the mechanism of the larynx; April 30th: Professor W. E. Gallie, on the transplantation of the fibrous tissues in the repair of anatomical defects; May 2nd: Mr. H. E. Griffiths, on the relation of diseases of the gall bladder to the secretory functions of the stomach and pancreas.

In 1896 Mr. Morison married Miss Harriet Appleby, eldest daughter of the late Mr. Thomas Appleby, J.P. He leaves a widow, a son, and two daughters.

A funeral service was held in Christ Church, Sunderland, on Saturday, April 12th, when there was a large attendance, many of the doctors of Sunderland being present, and also representatives of many local organizations. After the service the body was conveyed by motor to Hartlepool, where another service was held at St. Hilda's Church. The scene in Hartlepool was most remarkable and impressive; practically the whole town attended the funeral to pay a last tribute to one who had been the devoted friend of the boyhood and youth of Hartlepool for thirty-seven years.

It is a great comfort to all his friends to think that he died, as he would have wished, in harness and with his enthusiasm and powers unimpaired.

"This high man with a great thing to pursue
Dies ere he knows it."

ALEXANDER HAIG, M.D.Oxon., F.R.C.P.,

Consulting Physician to the Metropolitan Hospital.

DR. ALEXANDER HAIG died at his residence in London on April 6th, at the age of 71. He was a member of the family of Haig of Bemersyde, and the son of Mr. G. A. Haig of Maulesden, Brechin, Forfar. He was educated at Harrow, and afterwards went up to Exeter College, Oxford. He took second-class honours in the School of Natural Science in 1876 and would probably have taken a first class had his health allowed. From Oxford he went to St. Bartholomew's Hospital, took the diploma of M.R.C.S. in 1879, graduated M.A., M.B.Oxon. in 1880, proceeded M.D. in 1888, and was elected F.R.C.P.Lond. in 1890. He was casualty physician at St. Bartholomew's Hospital; as he saw no opening at this school he became physician to the Metropolitan Hospital and also to the Royal Waterloo Hospital for Children and Women, and was consulting physician to both institutions at the time of his death.

As has been said, he was not a man of robust constitution: he suffered severely from migraine, and this personal affliction caused him to turn his attention to dietetic questions. He conducted numerous researches, and became convinced that excessive uric acid was the clue to the pathology and treatment of many functional disorders. He believed that in the diet of civilized man there was commonly an excess of protein, and worked out a purin-free diet which he advocated in season and out of season. For a time his theories had a great vogue. He wrote a book on *Uric Acid as a Factor in the Causation of Disease*, which reached its seventh edition in 1908, and another on *Diet and Food*, the sixth edition of which appeared in 1908. He retired from practice some years ago, and afterwards took little or no part in medical affairs. He married, in 1878, his cousin, the daughter of the late Mr. James Haig, barrister, and is survived by his widow and one son and two daughters.

The Services.

ROYAL NAVY MEDICAL CLUB.

THE annual dinner of the Royal Navy Medical Club will take place at the Trocadero Restaurant, Piccadilly Circus, W.1, on Thursday, April 24th, at 8 p.m. Members who wish to be present are asked to inform the Honorary Secretary, Royal Navy Medical Club, 68, Victoria Street, S.W.1.

Medical News.

A COURSE of lectures on pathological research in its relation to medicine will be given in the lecture room of the Institute of Pathology and Research of St. Mary's Hospital, on Thursday afternoons, at 5 o'clock, from April 24th to June 12th. On the first date Sir Almoth Wright will lecture on the antibacterial functions of the leucocytes, and will be followed on May 1st by Sir Thomas Lewis, who will deal with the reactions of the skin to injury. Later on Professor A. V. Hill will lecture on the function of haemoglobin in the body. The lecturers for the remainder of the course include Dr. Andrew Balfour, Dr. Major Greenwood, Dr. G. W. Holmes, Mr. W. Trotter, and Dr. W. Bateson. The lectures will be open to all members of the medical profession and all students of medical schools without fee.

A MEETING of the section of the Royal Microscopical Society formed to deal with the industrial application of the microscope will be held at 20, Hanover Square, on Wednesday next, April 23rd; Sir Charles Parsons, K.C.B., F.R.S., will take the chair at 7 p.m.

THE annual meeting of the Cremation Society of England will be held at the society's offices, 52, New Cavendish Street, London, W., on Monday, April 28th, at 3 p.m., with Dr. P. Chalmers Mitchell, F.R.S., in the chair.

THE annual award of the Hunterian Society Medal, which for some years has been in abeyance, is to be resumed. The medal is awarded for the best essay on any subject which shall be submitted by any general practitioner resident within Great Britain, Ireland, or the Channel Islands, "whether Fellows of the society or not." Essays should be sent to the Honorary Secretary, Mr. A. E. Mortimer Woolf, at 94, Harley Street, W.1, not later than December 31st, 1924. The medal will be presented at the annual dinner of the society in February. The medallist will be expected to read his essay at the annual general meeting of the society. Full particulars can be obtained from the Honorary Secretary.

THE late Sir Henry Lucy, who left estate sworn for probate of over £250,000, has bequeathed £1,000 to the Salop Infirmary to endow a cot in his name, £1,000 to the Liverpool Northern Hospital to endow a bed in the name of his mother, and £1,000 to Westminster Hospital to endow a bed in the name of Lady Lucy. On the death of Lady Lucy the following institutions will each receive £1,000 for the endowment of a cot or bed in the name of "Nancy Lucy": Alexandra Hospital for Children, Royal Ear Hospital, Royal Eye Hospital, Seamen's Hospital, Royal Waterloo Hospital for Children and Women, Royal Orthopaedic Hospital, Central London Throat Hospital, Liverpool Infirmary for Children, Children's Convalescent Home, West Kirby, Belgrave Hospital for Children, Cancer Hospital, Fulham Road, Charing Cross Hospital, Chelsea Hospital for Women, City of London Hospital for Diseases of the Chest, East London Hospital for Children and Women, Evelina Hospital for Sick Children, Guy's Hospital, Hospital for Sick Children, Great Ormond Street, King's College Hospital, London Hospital, Metropolitan Hospital, Middlesex Hospital, North-Eastern Hospital for Children, London, North London Consumption Hospital, Poplar Hospital, Royal Free Hospital, St. Bartholomew's Hospital, St. George's Hospital, St. Mary's Hospital, St. Thomas's Hospital, West London Hospital, and the Victoria Hospital for Children, Chelsea.

THE annual returns of lunacy show that the total number of insane patients for whose accommodation the London County Council was responsible on January 1st, 1924, was 18,918 (7,728 males, 11,190 females), an increase of 418 upon the previous year. In addition, there were 5,148 chronic harmless lunatics, idiots, and imbeciles maintained by the Metropolitan Asylums Board at the charge of London boards of guardians, an increase of 47 on the year. The number of patients admitted to the London county mental hospitals during 1923 (excluding those transferred from out-county institutions) was 3,183, the number of patients who died was 1,180, and the number discharged as recovered was 881, the number discharged as relieved 600, discharged as "not improved" 381, and discharged as "not insane" 6. One was discharged "by operation of law."

DR. W. HARVEY SMITH, medical officer for the Meriden district and workhouse of the Meriden Union, has been appointed to the Commission of the Peace for Warwickshire.

In 1922 Professor Maurice Arthus invited a party of young biologists to attend the Institute of Physiology in Lausanne in order to obtain training in the method of prosecuting a scientific research. He modelled his course on those given by Claude Bernard at the Collège de France. The members of the class lived the life of the laboratory and observed the manner in which some particular problem was attacked. Professor Arthus took as his subject the experimental study of cobra venom, which was investigated purely by the experimental method. Encouraged by the fact that sixty-six biologists from fifteen different countries attended in 1922, Professor Arthus intends to give another three weeks' course, beginning on July 21st. Applications, mentioning nationality and previous experience, should be received by Professor Arthus at the Institute not later than June 15th. Suitable accommodation in a pension will cost seven Swiss francs a day.

PROFESSOR SCHITTELHELM of Kiel has succeeded Geheimrat von Strümpell as director of the medical clinic at Leipzig.

In Berlin during 1922 the deaths exceeded the births by 8,000; in 1923 the deaths exceeded the births by 12,000.

At the annual meeting of the Hospital Saturday Fund, held at the Mansion House on April 12th, it was reported that during 1923 the Fund had received £100,765, being £3,368 in excess of the previous year; the sum of £75,775 was awarded.

THE second International Congress of Comparative Pathology, which was to have been held in Rome on April 27th, has been postponed to next October.

THE eighty-eighth Congress of German Natural Science and Medicine will be held at Innsbruck from September 21st to 26th, under the presidency of Professors von Schweidler and Haberer. The following papers will be read: Constitution and character, by Professor Grubbe of Heidelberg; the problem of body and soul, by Professor Hoche of Freiburg; the "speech" of bees, by Professor v. Frisch of Breslau; and the blood and special senses of insects, by Professor Knoll of Prague.

THE third International Congress of Military Medicine and Pharmacy will be held in Paris in May, 1925, under the presidency of Inspector-General Vincent.

A new university has been founded by the Republic of Armenia at Erivan. The professors of the medical faculty have mostly been educated in Germany.

THE annual Congress of the German Orthopaedic Society will be held at Graz, under the presidency of Professor A. Wittich, from September 15th to 18th, when the principal subject for discussion will be the relation of orthopaedics to other branches of medical science.

A SOCIETY for racial hygiene has recently been founded at Graz under the presidency of Dr. R. Pollard, professor of dermatology in Graz University.

PROFESSOR HANS SPIEMANN has succeeded the late Richard von Hertwig in the chair of zoology and comparative anatomy in the University of Munich.

Letters, Notes, and Answers.

Communications intended for the current issue should be posted so as to arrive by the first post on Monday or at latest be received not later than Tuesday morning.

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

ORIGINAL ARTICLES and LETTERS forwarded for publication are understood to be offered to the BRITISH MEDICAL JOURNAL alone unless the contrary be stated. Authors desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL are requested to communicate with the Financial Secretary and Business Manager, 429, Strand, W.C.2, on receipt of proof.

ALL communications with reference to advertisements as well as orders for copies of the JOURNAL should be addressed to the Financial Secretary and Business Manager, 429, Strand, London, W.C. Attention to this request will avoid delay. Communications with reference to editorial business should be addressed to the Editor, BRITISH MEDICAL JOURNAL, 429, Strand, W.C.2.

THE telephone number of the BRITISH MEDICAL ASSOCIATION and BRITISH MEDICAL JOURNAL is Gerrard 2630 (Internal Exchange). The telegraphic addresses are:

EDITOR OF THE BRITISH MEDICAL JOURNAL, Aitiology Westrand, London.

FINANCIAL SECRETARY AND BUSINESS MANAGER (Advertisements, etc.), Articulate Westrand, London.

MEDICAL SECRETARY, Mediscera Westrand, London.

The address of the Irish Office of the British Medical Association is 16, South Frederick Street, Dublin (telegrams: *Pacillus, Dublin*; telephone 4737, Dublin), and of the Scottish Office, 6 Rutland Square, Edinburgh (telegrams: *Associate, Edinburgh*; telephone, 4361, Central).

QUERIES AND ANSWERS.

"J. R. P." asks whether delusional insanity has been known to result from falls on the head, and, if so, whether there is any possibility of treatment.

LETTERS, NOTES, ETC.

APPENDICECTOMY FOR OXYURIS VERMICULARIS.

DR. GEORGE P. BLETCHLY (Nailsworth) writes: In the *Medical Annual*, 1924 (p. 228), it is stated, "There can be no doubt that the appendix often serves as a breeding ground for threadworms, and that the bowel can be constantly reinfected from it. In obstinate and old-standing cases in adults removal of the appendix has therefore been suggested in order to root out the parasites, but I am not aware that operation has ever actually been done solely with this object." Recently I had a man under my care, aged about 21, for threadworms, and tried most remedies both "fore" and "aft"; he always got better, but always the parasites shortly reappeared, and it was

obvious that they had a safe breeding ground somewhere. So I advised him to have his appendix removed, and he consented. Mr. T. Carwardine of Bristol performed the operation, and in a letter to me dated September 22nd, 1922, he reported that the appendix was 7 inches long and contained a number of worms. He added, "I put some iodoform into the caecum to give the worms a bad time." In this case it is obvious that a cure by any other means was impossible.

A SECOND ATTACK OF MEASLES?

DR. C. B. GERVIS (Seaford) writes: During a recent epidemic of measles at a girls' school here one of the girls, with a definite history of having had a previous attack, was laid up. There was no question about the former illness, as the girl was old enough to describe the epidemic at the school she was then at. There were no premonitory symptoms; the rash appeared in the typical manner of measles, though rather fainter than usual, but there was no temperature, no cough, and only slight injection of the conjunctivae. The whole attack cleared up in a few days. It would be interesting to know whether this kind of abortive attack could be in any way infectious.

AN IMPOSTOR AT LARGE.

SIR CHARLES GORDON-WATSON, K.B.E., F.R.C.S., writes: May I take this opportunity of warning medical men and others that for some time past an unknown young man has been going about imposing on people. He either alleges that he is a recently qualified medical man or a medical student, and that he is either a relative of mine or my assistant. He visits hospitals in various places and states that he has had a motor-cycle accident and sustained slight concussion. He obtains a bed and anything else he can lay his hands on. The police are very anxious to get hold of this young man, and there is a warrant for his arrest on various charges. May I request that, if anyone should meet with an individual whose conduct suggests that he may be an impostor of this type, he will, while verifying his statements, endeavour to detain him, so that the police may have the opportunity of an interview.

DR. CECIL McCALDIN (Resident Medical Officer, Kent and Canterbury Hospital, Canterbury) writes: Having seen two letters in the BRITISH MEDICAL JOURNAL of April 12th (p. 696) with regard to "an impostor at large," I think it advisable to relate a recent experience. On Saturday evening, March 15th, a taxi drove up to the casualty department of the hospital with a patient who stated that he had had an accident on his motor cycle whilst trying to avoid a child. As he seemed to be suffering from "concussion," he was admitted to hospital. He gave his address as Dr. Bernard Burke, aged 28, of s.s. *Ordetta*, Albert Docks, London; he stated that when the accident occurred he was proceeding to Margate to visit an uncle of his there. He posed as a Fellow of the English College of Surgeons, and said that his uncle in London was Sir Charles Gordon-Watson. As we thought his "uncle" might be anxious about him, we asked for his telephone number, which was fictitious. His name was not in the *Medical Directory* for 1924. On admission to hospital he was placed in an ordinary ward, but came down the next afternoon to the R.M.O.'s room. We telegraphed to his ship, which was found to be non-existent. His motor cycle (a horizontally opposed Harley-Davidson 7-9 h.p., incidentally not manufactured) was not at the garage. He presented the night superintendent with a hypodermic syringe—no doubt passed on—and he decamped next morning, March 17th, without leave and unobserved. There was missing an ophthalmoscope, the ward box, containing under 30s., and a bottle of stimulant, leaving as a reminiscence his bowler hat, a stethoscope, and two pairs of dissecting forceps.

MEDICAL BIOGRAPHIES.

DR. HOWARD M. STRATFORD (London, W.) writes: Some of the most interesting pages in the BRITISH MEDICAL JOURNAL are, and have been for many years past, to be found in those dealing with obituary notices of well known medical men. It seems to me that it would be a good thing if some of these could be collected into book form by the Association, with possibly further details of interest obtained from their contemporaries still living who knew them personally. Short biographies such as these would, I believe, be of great interest to medical men both here and abroad, and also to the public. The portraits accompanying some of the notices would add to the value of the book, and others, if absent, might be obtained.

KANGRI-BURN CANCER: CORRECTION.

DR. ERNEST F. NEVE (Kashmir, N. India) calls attention to an error in his article on kangri-burn cancer, published in the JOURNAL of December 29th, 1923 (p. 1255). Paragraph 4 should commence as follows: "The duration of the growth when first seen is on an average fifteen months"—not, as printed, "the duration of life."

VACANCIES.

NOTIFICATIONS of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 33, 35, 36, and 37 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 34 and 35.

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 176.