

The arms should not be moved. The respiratory muscles and apparatus have been exercised day and night since birth and well know how to breathe. Breathing is entirely self-adjusted and requires nothing more than to be saved from interference.

No artificial exercises, unless a lesion is present, whether they cramp the chest or not, can possibly improve on this self-adjustment possessed by every human being, inherited through many ages. Also, artificial exercises designed to strengthen the muscles of the chest are not breathing exercises. We do not breathe by muscular strength.

Bankart, in his article on physiology of muscular action (*Proceedings of the Royal Society of Medicine*, November, 1925), says, "There is too much arm and leg wagging in the scheme of most gymnasts."

## Memoranda:

### MEDICAL, SURGICAL, OBSTETRICAL.

#### COINCIDENT HERPES AND VARICELLA.

THE two following cases, both occurring in the same family, of a definite herpes associated with chicken-pox, are of interest in view of a possible common origin of the two conditions.

The elder child, a boy aged 10 years, on December 21st, 1926, had shooting pains in the right side of the chest, and several raised red spots were noticed by the parents along the line of about the seventh rib. During the following two or three days other spots appeared at intervals over the chest, back, and forehead; there was no complaint of pain.

The younger child, a boy aged 4 years, on January 6th, 1927, had slight malaise, followed the next day by red papules on the chest and back. At intervals on succeeding days others appeared. On examination on the third day of illness there was a typical rash of varicella on the chest and back, showing the vesicles in various stages of development, while on the back of the right hand there was typical herpes over the distribution of the radial nerve to the thumb and first finger. The elder boy then showed the remains of the chicken-pox rash, and in addition several larger scabs along the line of the seventh dorsal nerve, which were the result of the herpes.

It is interesting to note that the herpes and varicella appeared almost at the same time in both cases.

E. E. OUSELEY-SMITH.  
G. WILLIAMSON.

Birkenhead.

#### HEREDITARY HAEMORRHAGIC TELANGIECTASIA.

THE following case is reported as one of an unusual hereditary condition of the venules and capillaries of the skin and mucous membranes.

A man, aged 38, came under treatment for advanced pulmonary tuberculosis of some five or six years' duration; he gave a much longer history of recurring epistaxis. He had numerous telangiectases on the lips, which he stated had existed since he was about 15 years of age; they appeared one at a time, but all, he thought, within two years of each other.

Some years later similar spots appeared on the nose and cheeks, and about the same time he noted the same condition on his tongue. Fifteen years ago he began for the first time to be troubled by occasional attacks of epistaxis, which have become much more frequent within the last few years, and were of almost daily recurrence. The spots from time to time became more prominent and more palpably raised, and looked bluer; he thought that this was most frequently observed in the morning, and more especially if he had been drinking the night before. Ordinarily if he cut himself he did not bleed much, but if one of the telangiectases was cut the haemorrhage might continue for hours. Within the last two years he had noted two or three spots on his penis, on the dorsum of the glans.

In addition to the spots noted on the lips and face the patient had a number on the nasal septum, on the anterior two-thirds of the tongue, on the inner aspect of the gums, and on the soft palate. The spots were bright red and, except at certain times, were not palpable. They consisted of a cluster of dilated venules or capillaries, which lay immediately under the surface layer of the epithelium.

The family history is interesting. The patient's grandfather had the same condition, as had also his father and two of his uncles. One sister was also affected, and it had appeared in three cousins; one of the affected cousins died at the age of 28 from a "ruptured vessel in the brain." The patient had seven children—the oldest being 15—but none of them nor any of his sister's

children were, so far as he could tell, affected. In all the members of the family in which the condition has been present the onset of the disease was about the age of 15.

C. M. Williams<sup>1</sup> has collected thirty-two cases and added five of his own. The essential features of the cases mentioned by him are the same as in the case here reported—namely (1) the appearance of the telangiectatic spots at puberty; (2) the familial nature of the condition; (3) the marked tendency to haemorrhage; (4) the distribution of the spots especially about the nasal and buccal cavities.

I am indebted to Dr. Elder for allowing me to record this case.

Edinburgh.

ERIC C. MEKIE, M.B., Ch.B.

#### PULMONARY EMBOLISM FOLLOWING CHILDBIRTH.

THE cases reported by Dr. McCulloch and Dr. Young under this title (November 6th, 1926, p. 835) induce me to record two cases in my own experience.

The first was that of a primipara, aged 22, in whom labour had been quite normal; she was attended by the district nurse; I saw the placenta, which was intact. All went well until the fourteenth day, when, as she was getting up (her husband being in the room), she suddenly felt a severe pain in her side and slid down to the floor gasping for breath; her husband said "her face turned blue," and he put her into bed and rushed out to get help. On my arrival I found that he had not exaggerated her condition; she was cyanosed, breathing with difficulty, and evidently in great pain. I could find no sign of disease in lungs, pleura, or heart, and I knew that her history was free from serious disease. I remembered that I had read in the late Dr. Galabin's book an account of pulmonary embolism as a cause of pain, and frequently death, in parturition and child-bed, also a lecture by Professor Briggs on the same subject, so I put a mustard plaster on her side and gave a hypodermic injection of morphine hydrochloride 1/4 grain; she shortly became easier. She was ill for two or three days, and then gradually got better; a thrombosed left femoral vein was found on the day after her sharp attack, which produced a white leg and was treated in the usual manner. She was allowed up at the end of seven weeks and has since had no ill effects. She had no rise of temperature the whole time.

The second case occurred five years ago. The patient was a primipara, aged 19; labour was protracted owing to the size of the child, which weighed 9½ lb. I had to use forceps, and the perineum was lacerated; it was sutured and healed by first intention. She was very restless, and used to shuffle herself about her bed even when I was in the room. The temperature was not raised and all went well up to the eighth day, when I found her normal at my morning visit. In the afternoon I was hurriedly sent for, the messenger saying "that her mother thought that the patient was dying." On arrival I found a similar picture of distress—a "blue patient," gasping for breath and giving instructions to her mother to "take care of the bairn." I had a vivid remembrance of the former case, and gave her a hypodermic injection at once; as soon as she seemed easier I felt for the femorals, but could find no trace of clot, nor did I find any clot on successive days. However, to be on the right side I kept her in bed and gave her citrates. She made an uneventful recovery and has had two more children since. The second child, only 6 lb. in weight, was born without the nurse or myself being called. The third child weighed 8 lb.; delivery was somewhat slow, but otherwise normal. She passed through her lying-in periods without incident.

PERCIVAL HENDERSON, M.D.,  
L.R.C.P., L.R.C.S.

Seghill, Northumberland.

#### EXCISION OF PROTRUDING PORTIONS OF THE LIVER.

A YOUNG native man, while celebrating a harvest festival with numerous potations, made an amateur attempt at hari-kari by stabbing himself in the abdomen with a long knife. From this wound, which was directed from above downwards, that portion of the liver which lies towards the left, and beneath the left lower margin of the sternum, protruded to the extent of six inches in length by four inches in breadth.

As the patient had come a long way (three days' journey on foot) it was impossible to think of replacing the gland within the abdominal cavity; three ligatures were passed round the pedicle of the protruding portion of the gland, clip forceps were also fixed at this point, and the entire mass was cut away close to the parietal rent. The abdominal wound healed by first intention, and the patient made an uneventful recovery. The operation was bloodless.

C. R. HOBART TICHBORNE.

Dar-es-Salaam, Tanganyika Territory.

<sup>1</sup> Arch. Derm. and Syph., July, 1926, p. 1.

## Universities and Colleges.

### UNIVERSITY OF OXFORD.

At a congregation held on February 19th the following medical degrees were conferred:

D.M.—V. S. Hodson.  
B.M.—D. A. Robertson, C. S. Broadbent, M. D. Bower.

### UNIVERSITY OF LONDON.

#### THE SENATE.

#### *The Coming Election.*

SIR WILLIAM COLLINS has informed the London County Council that he does not wish to be reappointed its representative on the Senate when his term of office expires next May. Sir William Collins has explained his reason in the following statement to the Education Department of the L.C.C.:

"The University of London Act, 1926, which, by appointing commissioners to effect, during the current year, the reconstitution of the University in general accordance with the report of the recent Departmental Committee, has, as you are aware, altered the relation of the L.C.C. to the University. The L.C.C. is no longer to be represented on the Senate, but on a Finance Council, and the Senate is no longer to be, as it has always hitherto been, the supreme governing and executive authority of the University, and is to be otherwise modified in its constitution and powers. This being the case, the L.C.C. may well desire to consider the advisability of finding a new representative for this entirely new position. As you may have gathered from the very pleasant interview which I had with your Higher Education Committee last summer, I view with mistrust and misgiving some of the changes which are about to be imposed upon the University. I do not desire to seek nomination to the new position."

Sir William Collins has represented the London County Council on the Senate for twenty-seven years, and for seven years before that was a representative elected by Convocation. It is reported that Lord Justice Atkin and Sir Robert McCall, K.C., will also cease to be members of the Senate.

At the forthcoming election of a medical member of Convocation to a seat on the Senate, Mr. W. McAdam Eccles, M.S., M.B.Lond., F.R.C.S.Eng., has consented to stand. He has, we are informed, strong support, and his long experience as a member of the Council of the Royal College of Surgeons of England, and as a member of the Council of the British Medical Association, should make him a suitable candidate. The vacancy is created by the expiration of the term of office of Dr. R. A. Young, who does not intend to offer himself for re-election. Members of Convocation must vote before or on Tuesday, May 10th.

#### *Matriculation.*

At the January matriculation examination 147 candidates passed in the first division and 779 in the second division; 63 took the supplementary certificate for Latin.

#### *Appointments.*

Professor G. Elliot Smith has been appointed the representative in respect of University College at the celebration in London of the centenary of the birth of Lord Lister on April 5th. Sir William J. R. Simpson will represent the University at the thirty-eighth congress of the Royal Sanitary Institute at Hastings in July, and Sir Holburt Waring has been appointed one of the representatives at the second International Congress of Byzantine Studies, to take place in Belgrade in April.

Sir StClair Thomson has been appointed a Fellow of King's College.

Two lectures on the history of medicine, illustrated by lantern slides, will be given at University College Hospital Medical School by Dr. Charles Singer, on March 11th and 18th, at 4.15 p.m.; they will deal respectively with the hygienic idea in world history and the history of yellow fever.

The Cancer Hospital (Free), Fulham Road, has been admitted as a school of the University under Statute 74 for three years from March 1st, 1927.

### UNIVERSITY OF ABERDEEN.

At a meeting of the Senatus on February 22nd it was agreed to confer honorary degree of LL.D. upon the following members of the medical profession on March 23rd: Professor Matthew Hay, M.D., Sir Frederick Gowland Hopkins, D.Sc., F.R.S., F.R.C.P., Sir William Milligan, M.D., and Mr. Charles Howard Usher, F.R.C.S.

### UNIVERSITY OF MANCHESTER.

THE resignation of Professor W. W. C. Topley from the chair of bacteriology and the directorship of the Public Health Laboratory has been accepted by the Council as from September next, when Professor Topley will take up his duties as professor of bacteriology and immunology in the new London School of Hygiene and Tropical Medicine.

The Council has expressed its congratulations to Professor J. S. B. Stopford, professor of anatomy and dean of the Medical School, Professor I. Graham Brown, formerly lecturer in experimental physiology in the University, and to Dr. J. W. Mellor, a graduate of the University, on their nomination for election as Fellows of the Royal Society.

### SOCIETY OF APOTHECARIES OF LONDON.

The following candidates have passed in the subjects indicated:

SURGERY.—I. G. Briggs, J. D. Evans, L. J. Lawrie, A. W. Marsden, J. H. Mulvany, W. D. Neill, L. W. Rose, R. S. S. Smith, S. le R. Switzer, H. N. Walker.  
MEDICINE.—L. Ashkenza, B. Best, I. G. Briggs, J. de Rosa, J. A. Fernandez, S. Jenkinson, R. Kahn, J. H. Mulvany, H. Rundstrom, H. N. Walker.  
FORENSIC MEDICINE.—P. V. Bamford, I. G. Briggs, J. de Rosa, R. Kahn, J. H. Mulvany, S. Wray.  
MIDWIFERY.—I. G. Briggs, J. D. Evans, K. E. Gallagher, R. Kahn, J. H. Mulvany, S. Sotar, H. N. Walker, R. W. Wood, S. Wray.

The diploma of the Society has been granted to Messrs. B. Best, I. G. Briggs, J. H. Mulvany, L. W. Rose, H. Rundstrom, R. S. S. Smith, S. Wray.

## Medico-Legal.

### AN OSTEOPATH'S CLAIM FOR FEES.

UNDER the Medical Act, 1858, Section 32, "no person shall be entitled to recover any charge in any court of law for any medical or surgical advice, attendance, or for the performance of any operation, or for any medicine which he shall have both prescribed and supplied, unless he shall prove upon the trial that he is registered under this Act." Notwithstanding the clear terms of this section, an osteopath sought last week to recover £30 9s. from a boxing referee and timber merchant, for professional services as osteopath to the defendant's wife. The case was heard in the Bloomsbury County Court by Deputy Judge Stoker, and was reported in the *Times* of February 25th.

According to the plaintiff, the defendant's wife came to him on March 10th last, stating that she desired osteopathic treatment. He observed that she was suffering from nervous debility and facial neuralgia, and found that one of her legs was longer than the other and contributed to the debility. His fees were 3 guineas for each consultation and 2 guineas for each subsequent visit. He obtained his osteopathic degree in America; he made no claim to be legally recognized in this country.

For the defendant it was argued that there had been improper treatment, and that the plaintiff was not qualified.

The Deputy Judge expressed the view that the plaintiff was prevented by the Medical Act of 1858 from recovering payment for medical or surgical treatment. Upon the plaintiff interposing that he did not claim to be giving medical or surgical treatment, the Judge rejoined: "The question is whether you do so. You are not registered under the Medical Act, which states that you must have a special qualification in order to entitle you to recover fees." He thought the plaintiff's case failed, and that he was precluded under the Act from recovering his fees in a court of law.

Judgement was accordingly entered for the defendant, with costs, with leave to appeal if desired.

## Medical News.

IT is announced that the Canton Government has now taken over the John Kerr Hospital for the Insane from the charge of Dr. Selden, who has been working in Canton for thirty years. We referred last week (p. 392) to the recent difficulties experienced by this institution in carrying on its very important work.

PROFESSOR VITTORIO PUTTI, director of the Rizzoli Orthopaedic Institute, Bologna, will deliver the Lady Jones lecture in the medical school of the University of Liverpool on Thursday, March 10th, at 4 p.m. The subject of the lecture is "New conceptions in the pathogenesis and treatment of sciatica."

THE second of two Chadwick public lectures on rheumatism, its causes and prevention, will be given by Dr. Carey F. Coombs, physician to the General Hospital, in the Barnes Hall, Royal Society of Medicine, 1, Wimpole Street, W., on Thursday, March 10th, at 5.15 p.m., with Sir James Crichton-Browne, M.D., F.R.S., in the chair.

THE annual meeting and conference of the British Hospitals Association will be held at Norwich on Thursday and Friday, June 23rd and 24th. The honorary secretary of the association is Mr. J. Courtney Buchanan, C.B.E., Stapley House, 33, Bloomsbury Square, W.C.1.

THE microscopy of the living eye will be the subject of a paper to be read to the Optical Society on Thursday next by Mr. Basil Graves, M.A., M.R.C.S. The meeting will be held at the Imperial College of Science, South Kensington, at 7.30 p.m. Messrs. Clement Clarke will show an ophthalmoscope attachment to the Flucham slit lamp and the Cambridge Scientific Instrument Company its photographic ophthalmoscope.

DR. KENNETH BRUCE ALLAN, senior medical officer, West Africa Medical Staff, Gambia, has been appointed a member of the Executive Council of the Gambia and an official member of the Legislative Council of that colony.

MR. JOCELYN SWAN will lecture for the Fellowship of Medicine on the suppression and retention of urine at the Medical Society, 11, Chandos Street, W., on March 10th, at 5 p.m. On March 8th Mr. Gabriel will give a demonstration in clinical surgery at St. Mark's Hospital, City Road, at 4.30 p.m. The lecture and demonstration are free to members of the medical profession. The Hospital for Consumption and Diseases of the Chest, Brompton, will hold an all-day course of demonstrations for one week, starting on March 7th. A special course in orthopaedics will be given at the Royal National Orthopaedic Hospital from March 21st to April 2nd, with a visit to the Brockley Hill Country Hospital. From March 14th to 26th the Chelsea Hospital for Women will hold a course in gynaecology. A course in general medicine and surgery, primarily intended for general practitioners, will be held at the London Temperance Hospital from March 21st to April 2nd in the late afternoons. At the Queen's Hospital for Children, Bethnal Green, there will be an all-day course in diseases of children from March 28th to April 9th. In the afternoons only, for two weeks, from March 28th the Royal Eye Hospital will give a series of demonstrations on the diagnosis and treatment of eye diseases. Copies of all syllabuses and of the *Post-Graduate Medical Journal* may be obtained from the Secretary of the Fellowship, 1, Wimpole Street, W.1.

A VACATION course in pediatrics will be held at the Hôpital des Enfants-Malades in Paris from April 20th to 30th, the fee being 200 francs. Recent researches and methods will be dealt with, including those relating to cerebro-spinal meningitis, scarlet fever, infantile asthma, the prevention of infantile tuberculosis, congenital syphilis, and the thyroid syndromes. Further details may be obtained from the Secretary of the Faculty of Medicine, 149, Rue de Sévres, Paris (XV<sup>e</sup>).

UNDER the auspices of the Society of Hydrology and Climatology of Nancy and the Vittel Society of Medicine a congress on the gouty diathesis will be held at Vittel on June 5th and 6th, over which Professor P. Carnot of Paris will preside. Further information may be obtained from M. Renard, Société générale des Eaux, Vittel, Vosges.

AT a council meeting of the Society of Members of the Royal College of Surgeons of England a resolution was passed unanimously deploring the great loss sustained by the death of Mr. C. Edward Wallis, M.R.C.S., L.D.S., and placing on record its appreciation of his untiring zeal and self-sacrificing service on behalf of the society and all the Members of the College.

THE Council of Epsom College is about to award a St. Anne's Home Scholarship of £52 a year to the orphan daughter of a medical man who had been in independent practice in England or Wales for not less than five years. Candidates must be fully 7 years of age and not over 12 years on May 1st next. The Council is also about to award a Henry Duncliffe Annuity of £30 a year to the unmarried daughter of a medical man. Candidates must not be under 50 years of age. Forms of application can be obtained from the Secretary, at the Office of the College, 49, Bedford Square, W.C.1, and must be returned not later than the morning of March 16th.

DR. R. A. MILLIGAN, who recently retired from the position of surgeon to the Northampton General Hospital after more than forty years' service, has been presented with a cheque for £453 and an album containing the names of the subscribers to the testimonial fund.

A BAS-RELIEF bronze bust has been placed in the main hall of Leeds General Infirmary as a memorial to the late Mr. Walter Thompson, for many years honorary surgeon to the institution.

THE Ministry of Health has published a report (No. 39) on the determination of benzoic acid in foodstuffs, which has been prepared by Dr. G. W. Monier-Williams. In addition to a review of the literature on the subject and discussion of the difficulties associated with the methods of analysis, various laboratory investigations are considered. The report, which is intended especially for public analysts and chemical advisers to industrial concerns, may be obtained from H.M. Stationery Office, or through any bookseller, price 1s. net.

THE Rockefeller Foundation has made a further grant of 75,000 dollars to the German Research Institute for Psychiatry at Munich, to which it contributed 250,000 dollars last year.

THE issue of *Hospitaltidende* for January 20th contains a memoir, by Dr. Carl Sonne, of the late Danish surgeon Professor Thorild Røvsing, with a bibliography of his scientific writings.

THE Bureau of the Far East at Singapore reports that during the week ending January 22nd there were 33 cases of plague with 16 deaths, 66 cases of cholera with 65 deaths, and 306 cases of small-pox with 91 deaths.

FOR the purpose of binding in two parts the *Proceedings of the Royal Society of Medicine* for 1925-26 (vol. xix) there is now available a main title-page for each of the two sub-volumes; a special title-page and list of contents for the reports of general and joint discussions; a title-page and contents for the reports of each of the Sections, in case it is desired to bind these separately; and a general index. Binding cases may be obtained, post free, from Messrs. John Bale, Sons and Danielsson, Ltd., for the whole year's *Proceedings* in two parts 6s., and for separate Sections 3s., each. These publishers are also prepared to bind any single Section for 4s. 6d., or the whole *Proceedings* in two parts for 10s. 6d.

ON page 445 of this issue appears an announcement by the War Office regarding temporary commissions in the R.A.M.C. for home service. As we go to press we are informed by the Army Medical Department that the response to this notification has been so satisfactory that enough applications have already been received to fill all existing vacancies.

## Letters, Notes, and Answers.

All communications in regard to editorial business should be addressed to **THE EDITOR, British Medical Journal, British Medical Association House, Tavistock Square, W.C.1.**

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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, Drumsheugh Gardens, Edinburgh (telegrams: *Associate, Edinburgh*; telephone: 4361 Central).

## QUERIES AND ANSWERS.

MR. W. F. HAMILTON (St. Leonards-on-Sea) asks whether unsatisfactory results have been found to follow the use, in the preparation of the skin for surgical operations, of a solution containing 1 per cent. each of crystal violet and brilliant green in a mixture of rectified spirit and water. He states that he has known blistering to occur and also some delay in skin union, even in aseptic wounds.

### CHRONIC URTICARIA.

"PRURITUS" would be glad of suggestions in the treatment of a case of chronic urticaria in a woman aged 50. The condition has lasted several months, in spite of careful dieting, administration of intestinal antiseptics, and calcium chloride and lactate; externally, soothing lotions and exposures to x rays and artificial sunlight—all with no beneficial effect. The patient looks healthy, though suffering from disturbed sleep, and the urine is free from sugar and albumin.

### INFECTION IN BAKERIES.

A MEDICAL CORRESPONDENT (Scotland) relates that he has been concerned in the following case: A working baker employs several workpeople; two of them were removed to hospital suffering from diphtheria, and within a week a third developed a sore throat. Our correspondent asks what section of the Public Health Act covers the matter.

\* \* The baker would not, as such, under the Public Health (Scotland) Act, 1897, be required to intimate the occurrence of sore throat in his third employee to the medical officer of health. If, however, the working baker happened to stand to his third employee in one of the relations specified in Section 3 (1) (a) of the Infectious Disease (Notification) Act, 1889, and if at the same time he was aware that his third employee was, in fact, suffering from diphtheria, he would, in these circumstances, but not otherwise, be required to send a notice to the medical officer of health. Action might possibly be contemplated against the employer under Section 16 (6) of the Public Health (Scotland) Act, 1897, which says that any trade or business so conducted as