

## TROPICAL MEDICINE

*Diseases of the Tropics.* By George C. Shattuck, M.D. (Pp. 803; 131 figures. \$10.) New York: Appleton-Century-Crofts, Inc. 1951.

In his preface the author of this book states that the primary objective in its preparation was to offer at moderate cost a concise but comprehensive account of the diseases of the Tropics. He presents the subject matter in 12 separate parts of varying length, arranged in no very obvious pattern. A curious omission is that of the enteric group of fevers, especially as epidemic and endemic typhus occupy a chapter of reasonable length. Admittedly the former are not peculiar to the Tropics, but they are none the less very common there and are so important in the differential diagnosis of the many obscure fevers which occur in warm countries that their absence leaves an important gap. Apart from this the scope of the work is comprehensive. The layout within the different sections is logical, the descriptions are lucid, the illustrations are excellent, and the lists of references are useful, though few are later than 1948. There seems indeed to have been considerable delay in publication, for, although the date given is 1951, the newer antibiotics receive no more than passing mention, and other recent work, such as the treatment of leprosy with the parent sulphone, diamino diphenyl sulphone, is missed altogether.

In general the teaching is sound, though it is obvious, and indeed inevitable, that the author has little, if any, first-hand experience of some of the subjects on which he writes. This results in a certain lack of perspective which detracts from the practical value of the book. To quote a single instance: the subject of suppression of malaria receives much less attention than it deserves. Data concerning the suppressive action of the different antimalarial drugs are mixed up with those on therapy, and there is no balanced account of the advantages and disadvantages of each compound in this role to serve as a guide to the tyro. On the other hand, rather more than a page is devoted to the diagnosis of "latent" malaria by sternal, spleen, and liver puncture.

The subject of tropical medicine has now expanded to such an extent that it is beyond the capacity of any one person to write a comprehensive and up-to-date textbook. Only an edited symposium with chapters on each subject written by experts is likely to be satisfactory. However, no modern book of this type exists, and in its absence the volume under review will no doubt prove of value to many.

J. S. K. BOYD.

## TREATMENT OF TYPHOID CARRIERS

*Typhoid and Paratyphoid B Carriers and their Treatment.* Experiences from Western Norway. By Th. M. Vogelsang, M.D. (Pp. 368. No price.) Bergen, Norway: A. S. John Griegs Boktrykkeri. 1950.

The campaign against typhoid and paratyphoid B in Western Norway, started by the late Dr. Magnus Haaland at Dr. Gade's Institute in Bergen a few years after its establishment in 1912, has been systematically pursued by his successor, Professor Th. M. Vogelsang. He has paid special attention to chronic carriers of these diseases, and now reviews his work in this monograph, which is in English. It is dedicated to the memory of his former chief, Dr. Magnus Haaland, and appears as the first of a medical series of publications which the newly created University of Bergen will issue from time to time.

In the opening pages the author discusses the history of the subject and the contributions made to it by other observers, but most of the book is on the prodigious work carried out so perseveringly at Dr. Gade's Institute over many years. Professor Vogelsang paints a very tragic picture of the lot of the typhoid carrier, however conscientiously she is dealt with by the medical authorities. She is often an old woman whose fate it is to be hunted from pillar to post, disowned and shunned by her relations and friends, treated by the authorities as more dangerous than a leper. Little wonder therefore that she gladly accepts such a drastic measure as the removal of her gall-bladder in some instances. Professor Vogelsang's review of the less radical methods is as discouraging as his record of operative treatment is hopeful. His material consists of 75 carriers of *S. typhi* and 55 carriers of *S. paratyphi-B*. Seventy-eight were discovered as the result of a systematic search for the source of infection, and 38 were convalescent carriers. Nearly all were faecal carriers, but there were four who were apparently only urinary carriers. In a few cases both faeces and urine were infected. As many as 58 carriers were operated on, cholecystectomy being performed in all but two of these cases. Four-fifths of those undergoing cholecystectomy were free from their infection. Professor Vogelsang's indications for this treatment include the demonstration of the specific organism in the bile by means of the duodenal tube and of the presence of gall-stones or functional disturbances of the gall-bladder. But we have to face his admission that, "Whether the interval between infection and operation be long or short, a certain number of carriers will continue to discharge the specific germ after cholecystectomy."

C. LILLINGSTON.

## BOOKS RECEIVED

*Review is not precluded by notice here of books recently received*

*How To Look At Illness.* By N. Glas, M.D., L.R.C.P., M.R.C.S. (Pp. 48. 3s.) London: New Knowledge Books. 1951.

*The Hell Bomb.* By W. L. Laurence. (Pp. 198. 9s. 6d.) London: Hollis and Carter. 1951.

*Latex Technique and its Application to Chiropraxy.* By F. A. Drew, F.Ch.S. (Pp. 44. 3s. 6d.) London: The Actinic Press. 1951.

*The Transactions of the Hunterian Society 1949-50.* Vol. 8. (Pp. 133. No price.) London: Hunterian Society. 1951.

*Clinical Uses of Intravenous Procaine.* By D. J. Graubard, M.D., and M. C. Peterson, M.D. (Pp. 84. 8s. 6d.) Oxford: Blackwell Scientific Publications. 1951.

*The Trials of Patrick Carragher.* Edited by G. Blake. Notable British Trials Series. Vol. 74. (Pp. 278. 15s.) London: William Hodge. 1951.

*Microscopic Staining Techniques No. 3.* Edited by E. Gurr, F.R.I.C., F.R.M.S., F.L.S. (Pp. 64. 3s. 6d.) London: Edward Gurr. 1951.

*Symposium on Diseases of the Skin and Symposium in Honor of William Sharp McCann.* Nationwide Number of the Medical Clinics of North America. (Pp. 329. No price.) London: W. B. Saunders. 1951.

*Memorias do Instituto Oswaldo Cruz.* Vol. 48. (Pp. 732. No price.) Rio de Janeiro: Servico Grafico do Instituto Brasileiro de Geografia e Estatistica. 1950.

*Abdominal Distension and Intestinal Activity Following Laparotomy.* By A. Höyer. (Pp. 207. Kr. 15.) Oslo: Nationaltrykkeriet. 1950.

## Medico-Legal

### FATAL HYPERSENSITIVITY TO PENICILLIN

[FROM OUR MEDICO-LEGAL CORRESPONDENT]

The first recorded case in Great Britain of death due to hypersensitivity to penicillin was investigated by the Newport District Coroner on April 27 at the inquest on a baby girl. She had died after penicillin treatment for superficial burns. It was said that only five similar cases had ever been recorded, all in America.

On March 16, Jane Patricia Simonds, a healthy child aged 14 months, was burned on the left side of her head and face and on her left hand by spilt frying fat. Her mother at once took her to the Royal Gwent Hospital. She was seen by the casualty officer, who found a first-degree burn involving an area of about 4 in. by 3 in. (10 × 7.6 cm.) on the left side of her head extending on to her face. Her temperature and pulse were normal, she was not suffering from shock, she had no rash, and her general condition was good. The burn was dressed, she was given penicillin treatment, and sent home, and her mother was told to bring her to hospital next morning for dressing. Next day she was accordingly seen again by the casualty officer, who found her condition unchanged, and the burn was again dressed.

On that evening a doctor was called to the child's home because of swelling round her eyes. As she was not hot and had no rash he did not think it advisable to send her to hospital immediately. She was worse next morning, and when taken to hospital for dressing was at once admitted because of swelling of the face near the burnt surface. This appeared to respond to treatment, but on the evening of the next day, March 19, her temperature rose to 103° F. (39.4° C.), and on the following day a rash appeared and her temperature continued to rise. She died at 11.30 p.m. on March 21, five days after the penicillin treatment was first given.

At the post-mortem examination carried out next day it was found that the burnt area was clean and was healing, and the brain was normal. The whole body was covered with a diffuse rash. On opening the chest a quantity of clear yellow fluid gushed out. In each pleural cavity 10–15 oz. (284–426 ml.) of fluid was present, and the lungs were oedematous and somewhat collapsed. The heart was normal, but it was contracted and all the chambers were empty; there was an effusion of about 6 oz. (170 ml.) of clear yellow fluid in the pericardial cavity, which was under tension. Spleen and liver were firm and normal, as were the kidneys, apart from congestion of the medulla and ischaemia of the cortex. The adrenals were congested. The stomach and intestines were distended with gas, and there was an effusion of clear fluid into the peritoneal cavity.

In the opinion of Mr. R. V. Jones, who carried out the necropsy, death was caused by cardiac failure due to embarrassment of the heart's action by the pressure of the fluid in the pericardium. This was part of a general out-pouring of fluid into the serous cavities of the body which is typical of a sensitivity reaction. The rash and constriction of the smooth muscle of the intestinal sphincters were evidence in support of such a reaction. There was no evidence that any extraneous substance had gained access or that the reaction was caused by the breakdown of the tissue substances in the burnt area, which was clean and healthy. On laboratory examination the fluid effusions showed no micro-organisms and no characteristics of inflammatory exudates. Mr. Jones concluded that since penicillin was the main agent used in treating the burn it was probably penicillin which had caused the sensitivity reaction. Although mild reactions to penicillin such as rashes, pyrexia, and joint effusions had been recorded, he had been able to find no previous record of a fatal reaction.

The coroner recorded the cause of death as cardiac tamponade due to hypersensitivity reaction to penicillin.

## Universities and Colleges

### UNIVERSITY OF OXFORD

Provided a suitable candidate presents himself the Board of the Faculty of Medicine intends to appoint a Betty Brookes Research Fellow, who will be expected to devote himself to a study of brain metabolism in relation to nervous and mental disease. The Fellowship is tenable for three years in the first instance, but a Fellow is re-eligible, and the stipend will be not more than £1,200 per annum. It is not essential that a candidate should have medical qualifications. Applications must reach the Whitley Professor of Biochemistry, University Museum, Oxford, by June 30.

### UNIVERSITY OF CAMBRIDGE

The Council of the Senate has gratefully accepted the offer of the Trustees of the Nuffield Foundation to renew for a third period of three years its grant of £6,000 a year for an investigation under the direction of Sir Frederic Bartlett, F.R.S., into the causes and results of ageing.

In Congregation on May 12 the degree of M.A. was conferred on Dr. R. A. Noble, Associate Lecturer in the Faculty of Medicine. The degrees of M.B., B.Chir. were also conferred on B. E. L. Thompson.

Dr. Alfred Tissières has been elected into a Fellowship of King's College, Cambridge.

### UNIVERSITY OF EDINBURGH

Professor Warren H. Cole, Professor of Surgery in the University of Illinois, will deliver a Macarthur Postgraduate Lecture in the surgery lecture theatre, University New Buildings, Edinburgh, on Friday, June 15, at 5 p.m. His subject is "Electrolyte Imbalance in Surgery." Senior students and graduates in medicine are invited to attend the lecture.

### UNIVERSITY OF DURHAM

Professor Warren H. Cole, Professor of Surgery in the University of Illinois, will deliver a lecture on "Carcinoma of the Stomach" at the Royal Victoria Infirmary, Newcastle-upon-Tyne, on Thursday, June 14, at 5.15 p.m.

### UNIVERSITY OF LONDON

The following candidates have been approved at the examinations indicated:

ACADEMIC POSTGRADUATE DIPLOMA IN PSYCHOLOGICAL MEDICINE.—Part I: E. F. Carr, A. A. Cashmore, G. F. Vaughan. THIRD M.B., B.S.—<sup>1</sup>G. A. E. Baker, <sup>1</sup>Agnes R. D. Bartels, <sup>1</sup>Elaine M. Belton, <sup>1</sup>A. M. Dawson, <sup>1</sup>A. E. Dormer, <sup>1</sup>A. Gillespie, <sup>1</sup>N. A. J. Hamer, <sup>1</sup>Marion J. P. Jenkins, <sup>1</sup>Zilla M. Kaye, <sup>1</sup>R. C. Lewis, <sup>1</sup>Cicely J. Millbank, <sup>1</sup>J. W. Mold, <sup>1</sup>M. A. Pears, <sup>1</sup>A. Singer, <sup>1</sup>M. Sutton, <sup>1</sup>A. W. Tranter, <sup>1</sup>Coral I. Welch, K. R. Aberdour, J. F. Adam, J. A. M. Ager, Valerie M. D. Alcock, J. H. Allison, B. Altman, D. B. Amos, R. D. Andrews, J. M. Angeloni, R. A. J. Anthony, G. H. Apthorp, Joyce A. Arscott, J. H. Bailey, Helen J. Barnes, A. P. Barter, P. J. Batchelor, P. R. Bateson, Elizabeth L. Batson, C. H. Bearblock, J. Beasley, T. R. Beatson, T. G. L. Bellis, J. Bendas, F. W. Best, G. Birch, R. L. Bird, B. L. Bisley, O. H. Blacklay, J. A. Blundell, G. P. B. Boissard, F. E. Bonner, Pauline M. Bousquet, Audrey A. Boutwood, P. R. W. Boyd, A. L. C. A. M. Bracchi, Catherine M. Bradford, P. W. W. Branch, A. R. Brighten, B. St. J. Brown, P. P. Brown, W. Brumfitt, T. A. Bryant, A. F. Buck, P. E. Burden, D. M. Burley, J. A. B. Burn, C. F. Caldwell, J. C. D. Callander, J. C. Camac, L. Candiah, M. J. Cassells, H. N. Chambers, P. A. Chapman, V. R. Chuck, J. D. Clark, G. Clementson, L. F. Cleveland, W. G. Cleverly, D. J. Cliffe, G. E. Clulow, J. B. Coldrey, P. A. Coldrey, D. J. Coleman, M. K. Coles, Daphne C. Collins, H. W. M. Collymore, P. H. Connell, E. N. Coomes, M. P. M. Cooray, J. L. M. Corbet, J. C. Cornwell, Delia M. H. H. Cothay, P. H. E. Courtenay, F. J. Covill, A. N. Cowan, C. W. Crane, J. M. D. Crook, A. F. Cross, J. V. Dadswell, Mary D. Daly, Audrey Davidson, Joan R. Davies, J. P. H. Davies, J. P. Davies, D. M. Devane, D. G. Dick, A. B. Dickie, J. C. Dille, G. Dixon, J. W. Dodson, J. A. Dossett, J. M. Doyle, Marie Driver, M. V. Driver, R. D. P. Druitt, R. J. Drysdale-Anderson, Barbara Duguid, F. M. Dunn, C. E. Durber, G. W. Edward, S. C. Emerick, R. Emery, Beatrice M. Evans, T. W. Evans, A. C. Fairburn, S. T. Faithfull, J. D. Farley, C. P. Finch, Kathleen T. Flanagan, P. T. Flute, D. L. Foote, R. H. Fox, S. Freier, J. H. Fryer, A. P. Fuller, D. H. Gamage, K. M. Gammie, N. H. Gelpke, A. A. Gibberd, Hilda L. Gibbs, P. R. Gilbert, A. L. A. Gill, J. W. Goodfellow,

M. H. Gough, G. T. Gould, G. F. Grave, Pamela E. Green, D. Greenbaum, Joan Greene, Brenda Griffin, G. T. Griffith, Mary P. Gummer, B. C. Hale, M. H. Hambling, J. W. Hamlett, D. J. Handford, D. H. C. Harland, P. Harnarayan, W. R. Harrison, Robina Harry, C. J. R. Hart, Helena J. Harthoorn, M. D. A. Heller, N. G. B. Hersey, A. J. Hibell, A. C. Hill, R. C. Hobbs, D. C. Hodgson, B. W. Holbrook, G. C. A. Holden, J. M. Holden, J. M. Hood, I. A. Horton, H. V. Hoyle, Penelope C. Humphries, C. P. Hunt, Olive Ibberson, R. N. Ibbotson, D. Jackson, J. H. M. James, W. V. James, R. J. Jameson, G. H. Jantet, J. V. Jeffs, Pamela Jewell, A. H. John, K. Jones, R. F. Jones, T. R. Jones, M. J. Keith, T. D. Kellaway, J. C. C. Kendall, P. H. Kendall, P. J. Koblenzer, Mary I. Legg, A. G. Leslie-Smith, D. C. Levin, D. M. Lewis, J. G. Lewis, M. Lewis, J. S. Lowry, Colina C. Mackenzie, K. E. MacLachlan, K. L. McNeilly, J. G. Mander, J. W. Mann, G. E. Manning, E. J. Masters, Frances E. Mather, J. R. M. Mathieson, Althea G. Matthews, Margaret B. Mearns, J. M. Medlock, A. J. Merrifield, R. P. Michael, P. McK. Middleton, Anne E. Millar, Margery L. Moncrieff, J. L. Montagnon, J. Moran, Avis J. M. Morley, M. C. T. Morrison, W. H. Mortiboy, R. F. Mottram, J. S. Mousley, F. J. Moynihan, A. Muir, Shirley E. Nathan, R. C. Nauth-Misir, Marianna Newman, A. J. Newton, J. G. Nicholson, P. J. Nobes, J. P. Norman, K. R. Norton, M. J. C. O'Brien, P. M. J. O'Brien, T. M. O'Brien, D. R. M. P. B. O'Sullivan, J. N. Pachmayr, S. A. C. Paget, J. Palmer, J. A. Parrish, J. W. B. Parsons, R. E. H. Partridge, Jacqueline S. Pennycuik, A. G. Penrose, R. J. Pett, A. R. Phillips, G. A. Phillips, H. O. Phillipson, J. C. Pittman, T. A. Plumley, J. C. Pollard, Ariela Pomerance, J. C. Pond, J. M. Powley, I. G. Pryce, W. P.ryn, Barbara R. Purchas, J. A. Russell, C. H. R. Read, J. D. Redmill, S. H. Richards, R. A. A. Rickett, F. L. Roberts, J. McK. N. Roberts, R. E. L. Roberts, B. F. Robinson, G. E. Robinson, Ruth M. Robinson, A. Robson, D. A. Roche, A. Rodgar, Margaret Rooms, I. Rosen, D. L. Rugg-Easey, D. H. Rushton, P. S. B. Russell, J. A. Rycroft, G. C. Saint, J. R. Saunders, H. M. Saxton, I. P. Q. Scott, R. Sepson, C. H. Sheridan, S. Shuster, D. D. Silver, S. C. Simmons, A. J. Sims, H. P. Smith, K. G. Smith, K. J. Southgate, Constance R. Spittle, A. G. Spooner, Joan V. Stavert, V. L. Steinberg, R. W. Steward, D. Stewart, D. J. Stoker, T. Sussman, E. P. W. Tatford, C. W. Taylor, J. Taylor, W. N. A. Taylor, J. Terry, I. B. Thomas, T. G. Thomas, J. A. Thornton, A. C. Trevan, W. M. E. Tweed, V. Udall, P. Venables, R. J. Venn, Edith Wahl, A. H. Walker, G. F. Walker, J. D. Walters, P. J. R. Walters, D. M. Warner, M. A. T. Waters, M. G. Webber, C. P. Wendell Smith, E. D. West, W. T. White, A. E. Wilkinson, B. R. Wilkinson, D. K. Williams, J. F. Williams, P. J. Williamson, F. Wilson, D. Wimborne, J. Winstanley, Vivienne L. L. Wolfson, L. Wollner, C. H. Wood, P. R. T. Wood, R. Woodside, K. G. Worms, E. H. Wyatt, H. J. Wyatt, M. D. Youings, J. V. I. Young, Joan F. Zilva.

<sup>1</sup>With honours. <sup>2</sup>Distinguished in Pathology. <sup>3</sup>Distinguished in hygiene and forensic medicine. <sup>4</sup>Distinguished in medicine. <sup>5</sup>Distinguished in applied pharmacology and therapeutics. <sup>6</sup>Distinguished in surgery. <sup>7</sup>Distinguished in obstetrics and gynaecology.

The following candidates have been approved at the examination indicated:

**POSTGRADUATE DIPLOMA IN PSYCHOLOGICAL MEDICINE.**—D. Anton-Stephens, K. Bobath, R. B. Carr, M. B. Contractor, W. A. Cramond, H. W. D. Davies, J. Denham, L. H. Field, G. F. J. Goddard, E. S. Goller, Herta Graz, B. A. J. C. Gregory, L. G. W. J. Hannah, Mercy I. Heatley, D. Irwin, M. A. Jackson, W. G. Joffe, J. C. Kerridge, Hazel W. Liddell, J. S. B. Lindsay, J. S. Pippard, E. Roderic-Evans, P. D. W. Shepherd, S. Smith, G. F. Spaul, S. J. G. Spencer, H. P. Tarnesby, E. L. Udwin, A. A. Valentine (with Mental Deficiency in Part B), K. R. H. Wardrop, Letitia E. Woodvine. All with Mental Diseases (Psychiatry) in Part B, unless otherwise shown. *Part A:* E. Benjacer, D. H. Bennett, C. Borg, J. H. Brown, Nina A. Cohen, J. D. C. Currie, G. A. Dransfield, B. V. Earle, M. M. Ernst, M. H. Friedman, G. P. Hartigan, J. A. Irwin, N. B. Jetmalani, K. S. Jones, I. S. Kreeger, N. P. Lancaster, R. C. MacGillivray, E. Marley, W. Pappenheim, J. M. K. Rehmany, E. J. Rich, W. D. G. Robson, W. F. Salter, R. C. Simpson, R. W. Simpson, Daphne G. D. T. Smedberg, R. A. Y. Stewart, G. E. Swinney, W. B. Tudor, E. A. Williams, S. C. B. Yorke.

Peter Brian Medawar, D.Sc., F.R.S., has been appointed to the Jodrell Chair of Zoology and Comparative Anatomy, tenable at University College, from October 1. Professor Medawar is at present Mason Professor of Zoology in the University of Birmingham and Dean of the Faculty of Science.

Harry Butler, M.D., has been appointed to the University Readership in Anatomy tenable at St. Bartholomew's Hospital Medical College, from October 1.

## UNIVERSITY OF MANCHESTER

Dr. Colin Fraser Brockington has been appointed Professor of Social and Preventive Medicine in the University in succession to Professor Andrew Topping and will take up his duties in August. Dr. Fraser Brockington qualified M.R.C.S., L.R.C.P. in 1927 and took the D.P.H. in the following year. He graduated B.Chir. in 1930, and two years later he obtained the Cambridge M.D. He was appointed Deputy Medical Officer of Health for Warwickshire in 1938 and became the County Medical Officer of Health in 1942. He received his present appointment of County Medical Officer of Health for the West Riding of Yorkshire in 1946 and has been Lecturer in Preventive Medicine in the University of Leeds since 1948.

## UNIVERSITY OF BIRMINGHAM

The following have been appointed representatives of the University: Professor A. P. Thomson on the General Medical Council, in place of the late Sir Leonard Parsons; Professor C. F. V. Smout on the Board of Governors of the United Birmingham Hospitals in place of Professor Hilda Lloyd; and Professor J. M. Smellie on the Standing Joint Committee of the University, the United Birmingham Hospitals, and the regional hospital board in place of Professor Hilda Lloyd.

The following have been appointed University Clinical Lecturers from April 1: Dr. L. Nagley (Medicine); Mr. A. B. Watson (Surgery); Mr. E. A. Turner (Neurosurgery); Mr. R. Evans (Diseases of Ear, Nose, and Throat); and Dr. J. W. Woodward (Anaesthetics).

Dr. B. S. B. Wood, Lecturer in Paediatrics, has resigned his appointment on becoming Assistant Paediatrician at the Dudley Road Hospital.

## UNIVERSITY OF LIVERPOOL

Dr. Andrew Wilson, Reader in Applied Pharmacology at University College, London, has been appointed to the Chair of Pharmacology in the University of Liverpool.

## UNIVERSITY OF LEEDS

Dr. A. B. Eastwood has been appointed Lecturer in Anaesthetics and Dr. T. H. Flewett Lecturer in Bacteriology.

## UNIVERSITY OF SHEFFIELD

The title of Reader in Pathology has been conferred on Dr. H. E. Harding, at present Senior Lecturer in Pathology.

Dr. D. M. Matthews has been appointed Honorary Demonstrator (part-time) in Physiology.

Dr. A. A. Belton, Dr. E. J. Clegg, Dr. J. A. Howarth, and Dr. P. A. King have resigned their appointments as demonstrators in anatomy on returning to clinical work, and Mr. T. Smith has resigned his appointment as temporary lecturer in obstetrics and gynaecology on becoming Consultant in Obstetrics and Gynaecology to the Northern Regional Hospital Board.

## The Services

A Supplement to the *London Gazette* has announced the following awards:

*Three Clasps to the Territorial Efficiency Decoration.*—Major R. H. Mortis, T.D., R.A.M.C.

*Two Clasps to the Territorial Efficiency Decoration.*—Colonel J. B. S. Guy, C.B.E., T.D., and Majors F. J. L. Lang, T.D., and J. M. Lees, T.D., R.A.M.C.

*First Clasp to the Territorial Efficiency Decoration.*—Lieutenant-Colonels H. D. Chalke, O.B.E., T.D., and C. K. Sconce, T.D., Major (acting Lieutenant-Colonel) W. H. Wolstenholme, O.B.E., T.D., Majors D. S. Austin, T.D., J. G. McDowell, T.D., and F. E. Street, T.D., R.A.M.C.

*Territorial Efficiency Decoration and First Clasp.*—Lieutenant-Colonel (acting Colonel) D. H. Young, Lieutenant-Colonels A. Barber, M.C., C. Berens, A. T. Burn, R. P. Kemp, A. McQuiston, and G. C. Pether, Major (acting Colonel) P. Hawe, Majors (Honorary Lieutenant-Colonels) R. Evans, O.B.E., C. E. Moorhead, O.B.E., and H. B. Porteous, Majors R. W. Evans, J. L. Fraser, J. R. Hamerton, and E. Shipman, and Captain F. Buchan, R.A.M.C.

*Territorial Efficiency Decoration.*—Lieutenant-Colonels R. G. W. Ollerenshaw, A. B. Pain, and T. D. Pratt, Honorary Lieutenant-Colonel F. B. Mackenzie, D.S.O., M.C., T.D., retired, Majors E. V. Bevan, A. B. Dick, and A. K. Dougall, M.C., and Captains (Honorary Majors) S. R. A. Beckett, G. F. Petty, and J. A. W. Shearer, R.A.M.C.

## Wednesday

- INSTITUTE OF DERMATOLOGY, Lisle Street, Leicester Square, London, W.C.—June 6, 5 p.m., "Medical Mycology—Microsporon and Epidermophyton Infections," by Dr. R. W. Riddell.
- OXFORD UNIVERSITY.—At Radcliffe Infirmary, Oxford, June 6, 5 p.m., "Gastric Biopsy in the Study of Chronic Gastritis and Pernicious Anaemia," Litchfield Lecture by Dr. Ian Wood.
- ROYAL EYE HOSPITAL, St. George's Circus, Southwark, London, S.E.—June 6, 5.30 p.m., "Surgical Treatment of Squint," by Mr. R. P. Crick.
- WEST LONDON MEDICO-CHIRURGICAL SOCIETY.—At Royal College of Surgeons of England, Lincoln's Inn Fields, London, W.C., June 6, 7.30 for 8 p.m., annual banquet.

## Thursday

- EDINBURGH UNIVERSITY, University New Buildings (Anatomy Theatre), Teviot Place, Edinburgh.—June 7, 5 p.m., "Infantile Gastro-enteritis," Honyman Gillespie Lecture by Dr. Glenys M. Lowdon.
- INSTITUTE OF DERMATOLOGY, Lisle Street, Leicester Square, London, W.C.—June 7, 5 p.m., "Acne Vulgaris and Seborrhoea," by Dr. G. B. Mitchell-Heggs.
- INSTITUTE OF UROLOGY.—At Royal College of Surgeons of England, Lincoln's Inn Fields, London, W.C., June 7, 5 p.m., "Uraemia," by Professor M. L. Rosenheim.
- ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, London, W.C.—June 7, 5 p.m., "Uraemia," Urology Lecture by Professor M. L. Rosenheim.
- ROYAL SOCIETY, Burlington House, Piccadilly, London, W.—June 7, 4.30 p.m., "Lethal Synthesis," Croonian Lecture by Professor R. A. Peters, F.R.S.
- ST. ANDREWS UNIVERSITY.—At Lecture Theatre, Materia Medica Department, Medical School, Small's Wynd, Dundee, June 7, 5 p.m., "Balance of Life and Death in Brain Lesions," by Professor Sir Geoffrey Jefferson.
- ST. GEORGE'S HOSPITAL MEDICAL SCHOOL, Hyde Park Corner, London, S.W.—June 7, 4.30 p.m., "Neurology," lecture-demonstration.
- UNIVERSITY COLLEGE: DEPARTMENT OF BIOCHEMISTRY, Physiology Theatre, Gower Street, London, W.C., June 7, 4.45 p.m., "Biological Syntheses Concerning Carbohydrate Radicles," third of four public lectures by D. J. Bell, Ph.D., Sc.D., F.R.I.C.
- WESTMINSTER SCHOOL OF MEDICINE, Meyerstein Lecture Theatre, Horseferry Road, London, S.W.—June 7, 5.30 p.m., clinico-pathological demonstration. Discussion: "A.C.T.H. and Cortisone," speakers, Professor N. F. MacLagan, Dr. F. Dudley Hart, and Dr. J. G. Humble.

## Friday

- INSTITUTE OF DERMATOLOGY, Lisle Street, Leicester Square, London, W.C.—June 8, 5.30 p.m., clinical demonstration by Dr. R. T. Brain.

## BIRTHS, MARRIAGES, AND DEATHS

## BIRTHS

- Bedford.**—On May 14, 1951, at Stoke-on-Trent, to Janet (formerly Shrimpton), M.B., B.Ch., wife of Godfrey Thomas Bedford, M.B., Ch.B., D.O.M.S., a son.
- Bunting.**—On May 5, 1951, at 12, Wilmington Road, Quinton, Birmingham, to Vera M., wife of Dr. John Bunting, a daughter—Alison Margaret.
- Crichton.**—On May 20, 1951, at Ahyad, Egypt, to Jean, wife of Squadron Leader David Crichton, M.B.E., of Royal Air Force, Kabrit, M.E.A.F., 15, a daughter.
- James.**—On May 15, 1951, at Parkhouse Nursing Home, Liverpool, to Joyce, wife of Dr. H. Watkin James, a son.
- Pillai.**—On April 20, 1951, at Swansea, to Lenora (formerly Anthony), wife of S. Pillai, M.B., F.R.C.S., a son—Mohan Anthony.

## DEATHS

- Carter.**—On May 20, 1951, at his home, Clifford Broadstone, Dorset, William Henry St. Leger Carter, L.R.C.P.&S.Ed., aged 89.
- Connal.**—On May 22, 1951, at the Hospital of St. John and St. Elizabeth, London, N.W., John Connal, M.B., Ch.B., late of Isleworth, Middlesex, aged 59.
- Crean.**—On May 23, 1951, Thomas Francis Crean, O.B.E., L.R.C.P.&S.I., Surgeon Commander, R.N., retired, of 512, Allerton Road, Springwood, Liverpool.
- Gray.**—On May 25, 1951, at Highgate, London, N., Cyril Gray, L.R.C.P.&S.Ed., L.R.F.P.S., late of Gosforth, Newcastle-upon-Tyne.
- Harvey.**—On May 23, 1951, at Bermuda, Eugenius Harvey, M.R.C.S., L.R.C.P.
- Martin.**—On May 18, 1951, at 12, Croxteth Road, Liverpool, John Graham Martin, M.D., Colonel, A.M.S., retired.
- Pringle.**—On May 24, 1951, at Hong Kong, Leonard Duncan Pringle, M.R.C.S., L.R.C.P., formerly of Finchley, London, N.
- Rankin.**—On May 19, 1951, at 58, Clevedon Drive, Glasgow, Frederick Powlett Rankin, O.B.E., M.B., Ch.B., Lieutenant-Colonel, R.A.M.C., retired.
- Sullivan.**—On May 23, 1951, at South Kirkby, Yorks, Fleetwood William Porter Sullivan, M.D.
- Upcott.**—On May 24, 1951, at China Garth, Thornton-le-Dale, Yorks, Harold Upcott, F.R.C.S., aged 71.

## Any Questions?

## Bacillary Dysentery Carriers

**Q.**—I have lately come across a few cases of Flexner and Sonne dysentery which clear up clinically on treatment but give positive stool results for many weeks afterwards in spite of repeated courses of sulphonamides. What drugs are likely to be most effective in the treatment of these "chronic excretors"? Is there a "carrier" condition in bacillary dysentery in any way comparable to that in typhoid?

**A.**—Persistent excretors of *Shigella flexneri* are rare. Organisms of this group live and multiply in the superficial layers of the mucous membrane, and such persistent excretors are therefore suffering from mild chronic infections. *S. sonnei*, on the other hand, is more closely related to the non-pathogenic coliform organisms and can live and multiply in the contents of the bowel. This organism frequently persists for long periods after symptoms have disappeared, and subjects infected in this way can be regarded as true carriers. The most favoured sulphonamides for the treatment of persistent excretors are the slowly absorbed compounds sulphaguanidine, succinylsulphathiazole, and phthalylsulphathiazole, but these are frequently ineffective. Good results have been achieved in some cases with the newer antibiotics, particularly chloramphenicol. This is given orally in a dosage of 250 mg. four-hourly for 6 to 10 days, and is claimed to produce a rapid clearance.

## Sore Tongue

**Q.**—For the past five years a boy of 18 has complained of pain in his tongue brought on by eating acid foods or highly spiced dishes such as curry and haggis. This is followed by soreness for about half an hour. Examination shows a tongue deeply furrowed transversely which is a little redder than normal, with fairly prominent papillae at the tip. There is no coating on it, and from every other point of view he seems perfectly fit. Urine examination, Wassermann and Kahn tests, and haematological examination are negative. A swab from the tongue produced on culture *Neisseria pharyngis* with a few colonies of *Streptococcus viridans* and haemolytic streptococci. There can be little doubt that he has a congenital furrowed tongue, with, I suppose, the possibility of a chronic glossitis. I can find little about these symptoms of sore tongue in the books. What line of treatment would you advise?

**A.**—The aetiology and treatment of a sore and painful tongue are difficult and often complex problems. The commonest association is with achlorhydria, so that sore tongue is a feature of pernicious anaemia and hypochromic microcytic anaemia, and it may also occur in non-anaemic achlorhydric patients. In these cases the condition nearly always clears up on a hydrochloric acid and pepsin mixture taken in plenty of water through a glass tube after meals. Where anaemia is present then the appropriate therapy should be given. There is, however, a group of cases associated with hyperacidity, and often there appears to be a multiple vitamin deficiency of mainly the vitamin-B complex. Some of these cases will respond to an alkaline mixture (for the hyperacidity) and a high vitamin intake; one of the vitamin-B-complex mixtures may be prescribed. Particularly do these cases seem to require nicotinic acid, aneurin, and folic acid, with sometimes the addition of vitamin A. Again, any mild degree of hypochromic anaemia should be treated appropriately.

There is a further group of cases seen in young women which takes the form of a cyclical mucosal ulceration of the tongue and mouth which occasionally also involves the vaginal membrane. It often comes on before the menstrual