

APPOINTMENTS

GUNN, WILLIAM, M.B., Ch.B., D.I.H., Chief Medical Officer, North Thames Gas Board.

HART, DAVID MCKAY, M.B., Ch.B., F.R.F.P.S., F.R.C.O.G., Consultant Obstetrician and Gynaecologist, Stobhill Hospital, Glasgow.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, London, W.C.—J. N. Montgomery, M.D., M.R.C.P., D.C.H., Resident Assistant Physician; E. P. J. Silberstein, M.B., B.S., House-physician to Neurological and Neurosurgical Department; Daphne M. Kirkman, M.B., B.S., and T. J. Parkinson, M.B., Ch.B., M.R.C.P., D.C.H., House-physicians; B. J. Penry, M.R.C.S., L.R.C.P., House-surgeon; Mary F. Thomson, M.B., Ch.B., Resident Medical Officer, Tadworth Court.

MANCHESTER REGIONAL HOSPITAL BOARD.—H. Bolton, M.B., Ch.B., F.R.C.S., Consultant Orthopaedic and Accident Surgeon, Stockport and Macclesfield Hospital Centres and Crewe Memorial Hospital; R. M. Fulton, M.D., M.R.C.P., Consultant Physician, Stockport and Buxton Hospitals; H. B. Andrews, M.B., Ch.B., Deputy Superintendent and Resident Medical Officer, Wrightington Hospital; K. Sen Gupta, M.B., D.A., Assistant Anaesthetist, Bury and Rossendale Hospitals; N. J. Roussak, M.B., Ch.B., M.R.C.P., Consulting Physician to Withington and Wythenshawe Hospitals, Manchester; Z. Golen, M.B., Ch.B., Assistant Psychiatrist, Whittingham Hospital, Preston.

NORTH-EAST METROPOLITAN REGIONAL HOSPITAL BOARD.—J. Littlejohn, M.B.E., M.R.C.S., L.R.C.P., D.L.O., Part-time Consultant Ear, Nose, and Throat Surgeon, Chelmsford and Essex Hospital and St. John's Hospital, Chelmsford; W. F. Dunham, B.M., B.Ch., D.Phys.Med., Part-time Consultant Physician in Physical Medicine, Vale Road School Spastic Unit, Tottenham; B. Fairburn, M.B., F.R.C.S., D.A., Maximum Part-time Consultant Neurosurgeon, Oldchurch Hospital, Romford; N. A. Thorne, M.D., M.R.C.P., Part-time Consultant Dermatologist, Mile End, St. George-in-the-East, and St. Andrew's, Bow, Hospitals; G. Grunberger, M.D., D.L.O., Part-time Consultant Ear, Nose, and Throat Surgeon, St. Margaret's, Epping, and Honey Lane, Waltham Abbey, Hospitals; R. W. Crockett, M.B., F.R.F.P.S., M.R.C.P.Ed., D.P.M., Part-time Consultant Psychiatrist, Oldchurch and St. George's, Hornchurch, Hospitals; J. J. F. O'Sullivan, M.B., B.Ch., M.R.C.O.G., Part-time Consultant Gynaecologist, Whipps Cross Hospital; G. C. Pritchard, M.B., F.R.C.S., D.O.M.S., Part-time Consultant Ophthalmic Surgeon, East Ham Memorial Hospital; D. V. Martin, M.R.C.S., L.R.C.P., D.P.M., Full-time Consultant Psychiatrist and Deputy Physician Superintendent, Claybury Hospital; Margaret M. Mason, M.B., F.R.C.S., Part-time Consultant Ear, Nose, and Throat Surgeon, Ilford and Barking Group of Hospitals and Clinics.

NORTH-WEST METROPOLITAN REGIONAL HOSPITAL BOARD.—Rosalind Vacher, M.B., Ch.B., D.P.M., Consultant Child Psychiatrist, Hoddesdon Child Guidance Clinic; Hilda C. Abraham, M.D., Consultant Psychiatrist, British Hospital for Functional Nervous Disorders; H. J. M. Stratton, Consultant Ear, Nose, and Throat Surgeon, Ashford Hospital, Ashford, F.R.C.S.Ed., D.L.O., Consultant Ear, Nose, and Throat Surgeon, Ashford Hospital, Ashford, Middlesex; H. S. A. Henry, M.B., B.Ch., F.R.C.S.I., D.P.H., D.L.C., Consultant Ear, Nose, and Throat Surgeon, Hornsey Central Hospital; E. F. G. Stewart, F.R.C.S.Ed., Consultant Ear, Nose and Throat Surgeon, Finchley Memorial Hospital; also at Northwood, Pinner and District Hospital, Northwood, Middlesex, C. P. C. Gore, M.D., M.R.C.P.I., D.P.M., Assistant Psychiatrist (S.H.M.O.), Child Guidance Training Centre, N.W.

ROBERTS, GRIFFITH WYN, M.B., B.Ch., D.P.H., County Medical Officer and School Medical Officer, Flintshire County Council.

BIRTHS, MARRIAGES, AND DEATHS

BIRTHS

Bihari.—On March 27, 1954, at University College Hospital, London, W.C., to Mac (formerly McMullan), wife of Julian Bihari, F.R.C.S., a brother for Katherine Anne—David Julian.

Cantor.—On March 27, 1954, at the Kent and Canterbury Hospital, to Kathleen, wife of Dr. Jack Cantor, D.Obst.R.C.O.G., of Kent Lodge, Faversham, Kent, a brother for Timothy.

Evans.—On March 19, 1954, at the Norfolk and Norwich Hospital, to Evelyn (formerly Smith), wife of Dr. Trevor Evans, a son—Andrew Leighton.

Gresham.—On March 28, 1954, at Mill Road Hospital, Cambridge, to Gweneth Margery (formerly Leigh), M.B., B.S., wife of Geoffrey Austin Gresham, M.B., B.Chir., a daughter—Diana.

Shribman.—On March 28, 1954, at the Royal Buckinghamshire Hospital, Aylesbury, to Hazel (formerly Isaacs), wife of Irving Shribman, M.B., B.Ch., D.P.M., of the Old Vicarage, Stone, Aylesbury, Bucks, a son.

White.—On March 20, 1954, at the Birmingham Maternity Hospital, to Frances Mary (formerly Cottam), M.B., Ch.B., wife of Dr. H. M. White, a son.

DEATHS

Cole.—On March 18, 1954, at 110, Cooden Drive, Bexhill-on-Sea, Sussex, Sydney John Cole, D.M., aged 83.

Collen.—On March 21, 1954, at The Limes Nursing Home, Jacob Post, Burgess Hill, Sussex, George Denbigh Collen, M.D., aged 86.

Freedlander.—On March 19, 1954, at Manchester Royal Infirmary, Isaac Harry Freedlander, M.B., Ch.B., of 618, Oldham Road, Failsworth, Manchester.

Gurney.—On March 18, 1954, at The White House, Grainger Park Road, Newcastle-upon-Tyne, Helen Mary Gurney, M.D., aged 79.

Halley.—On March 23, 1954, at Forester Hill, Aberdeen, Thomas Curr Halley, M.B., Ch.B., late of Bath, Somerset, aged 67.

Jacques.—On March 18, 1954, in a nursing home, Carlisle, Cumberland, Frederick Viel Jacques, V.R.D., M.B., Ch.B., D.P.H., D.T.M.&H.

Jones.—On March 23, 1954, at Aberdare, Glam, Martin Llewelyn Jones, F.R.C.S., D.P.H.

Melville.—On March 25, 1954, Charles Melville, M.B., Ch.B., D.P.H., late of Grangemouth, Stirlingshire.

Milligan.—On March 21, 1954, in hospital, Ernest Henry Marcus Milligan, M.D., D.P.H., of Daisy Bank, Hadfield Road, Hadfield, Derbyshire, formerly of Glossop, Derbyshire.

Schwarzwald.—On March 18, 1954, Raimund Theodor Schwarzwald, M.D., of London, W.

Visger.—On March 21, 1954, at "The Paddocks," Chippenham, Wilts, Charles Visger, O.B.E., M.R.C.S., L.R.C.P., of Clevedon, Somerset, aged 79.

Walker.—On March 23, 1954, at the Old Manse, Tyndrum, Perthshire, Robert Alexander Walker, M.B., F.R.C.S., late of Peterborough, aged 79.

Any Questions?

Correspondents should give their names and addresses (not for publication) and include all relevant details in their questions, which should be typed. We publish here a selection of those questions and answers which seem to be of general interest.

Drugs in Breast Milk

Q.—What drugs in common usage are excreted in the breast milk in amounts likely to have a harmful effect on the infant? In particular, I am interested in antihistamine drugs, sulphonamides, antibiotics, barbiturates, aspirin, and purgatives.

A.—Definite clinical evidence exists that breast-fed infants may suffer ill-effects if the mother is receiving bromide and iodide, ergot alkaloids, or thiouracil compounds. Excessive maternal consumption of alcohol or nicotine (cigarette smoking) has also been followed by symptoms in the suckling. Active constituents of purgatives of the anthracene group (cascara, senna, etc.) may be excreted in sufficient quantity to affect the baby, and it is wise to avoid their use in the nursing mother. Liquid paraffin is a suitable preparation to use. There is some evidence that sufficient amounts of the barbiturates and phenytoin may be excreted in breast milk to cause drowsiness in the baby. Caffeine, hyoscine, morphine, codeine, and atropine are either not excreted at all or only in insignificant quantities.

Other drugs which are excreted in breast milk, but in insufficient concentration to have a deleterious effect on the infant, include sulphonamides, antihistamines, salicylates, penicillin, streptomycin, chloramphenicol, terramycin (oxytetracycline), and aureomycin.

Ammoniacal Dermatitis in Infants

Q.—In view of the possible dangers of mercury absorption, particularly pink disease, is it unwise to continue prescribing conspersus hydrarg. subchlor. co. for ammoniacal dermatitis in infants? If so, what alternative treatment is recommended?

A.—The use of local applications containing mercury is contraindicated. Likewise rinsing of previously washed napkins in a saturated (or weaker) solution of boracic acid crystals is undesirable. Effective local treatment consists in the use of destructible napkins; bathing the affected parts in warm normal saline after each toileting; and applying pure lanoline if there is severe excoriation, the lanoline being replaced by dusting with a high-grade infant powder as the condition improves. If, as is frequently the case, the stools are abnormal in character, necessary feeding adjustments should be made.

Lipuria and Chyluria

Q.—A woman of 22 has visible lipuria. Diabetes, pregnancy, fracture, and phosphorus poisoning have been excluded as the cause. How should she be investigated now, and what possibilities must be considered?

A.—It is essential to determine whether the urine contains fat globules only (lipuria) or fat globules together with protein, fibrinogen, and a few red cells. In lipuria the fat globules can be recognized with a microscope, using the low power objective and ordinary lighting; in chyluria the fat globules are much smaller, but they can be seen with a high power objective, if dark ground illumination is used.¹

The only other condition, besides those mentioned, which may cause lipuria is said to be a severe chronic nephritis, which can easily be excluded. It is therefore unlikely that the patient has lipuria. Chyluria is due to blocking of a main branch of the receptaculum chyli. If the patient has been abroad the lymphatics may have been blocked by filarial parasites. A more likely cause in this country is