

## Memoranda:

### MEDICAL, SURGICAL, OBSTETRICAL.

#### SQUAMOUS-CELLED EPITHELIOMATA.

##### IMMUNITY NEARLY TWO YEARS AFTER OPERATION.

A. H., male, aged 61, had a small ulcer on the highest point of the helix, which ulcer had commenced as a sore place owing to an accidental cut by a barber while having his hair cut in May, 1907. It had remained sore and continued to grow until I saw him on December 6th, 1907. It was then about  $\frac{3}{8}$  in. in every diameter, with a raw surface at the top; there was very little pain, and no enlarged glands could be felt in the neighbourhood. The growth with a wedge-shaped piece of the ear was removed under cocaine anaesthesia. The wound healed by first intention.

W. P., male, aged 62, was seen in December, 1907, with a "sore place" on the tip of the great toe, which he said started as a corn some nine months previously, and in spite of numberless corn cures and ointments had gradually got larger. The growth was  $\frac{3}{4}$  in. in diameter, with a raw surface, and about  $\frac{1}{2}$  in. in depth. The last joint of the toe was removed under cocaine anaesthesia. The femoral glands were not enlarged until after the operation, when owing to some suppuration one enlarged and inflamed, but quickly subsided.

W. B., male, aged 61, was being treated in January, 1908, for influenza, when I noticed a small sore about  $\frac{1}{2}$  in. in diameter on the left upper eyelid. He then told me he had noticed a little sore place there for over a year which periodically scabbed over, but each time he picked off the scab. There were no enlarged glands in the vicinity to be felt.

The interest in these three cases lies, first, in that microscopically they were all proved to be squamous-celled epitheliomata; secondly, they were not considered by the patients to be of sufficient importance to lead them to consult a doctor, as all the three were being treated for something else when brought to my notice; and thirdly, the immunity from other symptoms for nearly two years.

Middlesbrough.

THOMAS M. BODY, M.R.C.S.

#### THE CAUSE OF DYSMENORRHOEA.

A BENGALI lady, aged about 24 years, gave a history of dysmenorrhoea before her marriage, at times so painful as to require the use of morphine. Eventually she was prevailed upon by her relatives to submit to local treatment. The cervix was dilated under an anaesthetic, and kept dilated by bougies passed at intervals for some months afterward. This afforded her great relief. She was married about three years ago, and has since had two perfectly normal, and by no means painful, labours. Her last child was born a year ago; I attended her in that confinement. She has had no return of the dysmenorrhoea since her marriage.

Three weeks ago I was called to see her, and she informed me that she had a return of the old pain. She was in the third day of a so-called period, and was suffering acutely. As, however, there was a history of a scanty period the previous month and clots had been passed I insisted upon an examination, and found, tightly gripped in the cervical canal, a mass of clot and membrane, which was with the greatest difficulty removed by the finger. On attempting to pass the finger into the uterus to remove any remaining products of conception I found distinct spasm of the internal os, which was with difficulty overcome. This manoeuvre relieved the pain somewhat, but spasms of pain continued to occur daily for four or five days with decreasing intensity until the discharge ceased. The discharge itself was quite normal, and only contained shreds of membrane and small clot. The pain curiously came on regularly at about 11 a.m., and, if not relieved by morphine, continued to increase until about 2 p.m. and then gradually died away, until by the evening it was merely discomfort. As the continuance of the pain suggested that the uterus still contained clots, I examined several times both before, during, and after the spasms of pain; and whilst the cervical canal remained patent, one could distinctly feel a constricting band at the upper end of it, almost impossible to dilate with the finger

so long as the pain was present. Before and after the spasms this was not noticeable. The patient herself remarked that a few hours before the pain came on the discharge increased in quantity, but was diminished while the pain persisted and again increased as the pain passed off.

I make no comment upon the above fact, but it seems to me to supply the missing link demanded by your correspondent in your issue of May 15th.

Assam.

F. C. McCOMBIE, M.B.Lond.

#### TREATMENT OF TRAUMATIC TETANUS BY ANTITOXIN SERUM.

S. M., aged 28, sustained a lacerated wound of the fleshy portion of the second finger of the left hand, caused by a hook of a window-fastener on the evening of March 24th, 1909. The wound was dressed antiseptically on the same evening and began to heal. On the morning of April 7th, fourteen days after the injury, he complained of stiffness of the left jaw, cramp on the left front of his chest over the cardiac region; later in the day the abdominal muscles became tense on pressure, and there was spasmodic contraction of the dorsi-lumbar muscles. The case was seen in consultation by Dr. Pearce. The temperature was 97°, and the pulse 54. The patient was removed to hospital, and at 8 p.m. 20 c.cm. of antitoxin tetanic serum was given by the mouth.

During April 8th 100 c.cm. of the serum was injected subcutaneously, and a mixture containing chloral hydrate 15 grains, pot. bromidi 15 grains, was given every fourth hour. He suffered from slight spasms of the abdominal and dorsi-spinal muscles, from recurring cramps in the muscles of the calves, and inability to open the mouth beyond a very small extent; slight risus sardonius was present, and there was a peering appearance of the eyes, but no photophobia. The bowels were constipated, and he was very restless and unable to sleep for long.

On April 10th he had severe spasms at 1 p.m., when he bit the right side of his tongue, making a jagged wound; 50 c.cm. of serum were again administered subcutaneously, and 50 c.cm. more within the twenty-four hours. No subsequent severe spasms occurred. He continued in much the same condition with slight recurring cramps in the calves of the legs and clonic contraction of the hamstring tendons. Opisthotonos was slightly marked. He slept in snatches, and hypodermic injections of morphine  $\frac{1}{2}$  grain were given every second hour without beneficial result. Sodium bromide was substituted for potassium bromide as being less depressing. Subsequently the patient had more prolonged sleep. The wound of the finger had continued to heal except at a small pin-head point from which projected a small hair. On inquiry it was found that the patient, while the wound was healing, used the injured hand grooming a horse, though cautioned not to do so. The hair presumably conveyed germs to the wound, as I am informed the patient had even removed the dressings he felt the wound to be healing so well.

On April 14th the temperature was 100.3°, and 100 c.cm. of antitoxin serum were given. On April 17th the temperature was 101.1°, and 20 c.cm. of antitoxin serum were given. On April 18th he was much weaker and restless. The pulse was 80, small, and wanting in tone; the temperature was 101°. This condition lasted till the evening of April 19th. He had been given sulphate of magnesia to act on the bowels, which continued constipated.

Subsequently he improved steadily, was able to go into the garden on April 30th, and was discharged from hospital on May 12th.

H. V. McMAHON-DILLON, L.R.C.S.I., L.R.C.P.I., L.M.

A CORRESPONDENT of the *New York Medical Record* calls attention to what he calls the "passing of sectarianism" in America. He says: "A homoeopathic college in Denver and one in Baltimore have in effect taken themselves out of the homoeopathic ranks. An old homoeopathic college in St. Louis has closed its doors. The board of regents of the University of Minnesota has practically abolished homoeopathy in that institution. It is said that some of the Iowa authorities are growing impatient over the burdensome homoeopathic department in that university. There remain some three or four strong and well-equipped homoeopathic colleges, which are largely reduced to a modern basis but which remain nominally sectarian."

discovery, but we cannot assign to him any influence upon the historical development of our knowledge of surgical anaesthesia, or any share in the introduction to the world at large of the blessings of this matchless discovery.

Long's work, though published by himself in 1849, and more fully in 1852, was not made generally known to the profession until 1877, when he found a *vates sacer* in Marion Sims. We may be allowed here to reproduce some of Weir Mitchell's lines on the fiftieth anniversary of anaesthesia quoted by Professor Welch, although they have already appeared in the JOURNAL:

Whatever triumphs still shall hold the mind,  
Whatever gift shall yet enrich mankind,  
Ah! here no hour shall strike through all the years,  
No hour as sweet, as when hope, doubt, and fears,  
'Mid deepening stillness, watched one eager brain,  
With Godlike will decree the death of pain.

Authors often find fault with their illustrators for obvious mistakes, as for instance, for giving a character two right feet, or for glaringly misconceiving or misrepresenting the text. But writers themselves are not exempt from human frailty in this matter. Our English writers are often enough careless, but, knowing the enormous importance attached by French writers to minute accuracy of detail, we are surprised and amused by some examples gathered by Dr. Bougon and published in the last number of the *Chronique Médicale*. Thus Paul de Saint Victor tells us that the prophet Ezekiel read with one eye and wrote with the other. Alexandre Dumas in *San Felice* gives a thrilling description of an obstetrician holding between his teeth a handkerchief in which the newborn babe was wrapped, and a pistol in each hand. As if this athletic feat were not enough, he is represented as hurling himself head first into the middle of a crowd, crying out through his clenched teeth, "Room for the dead mother's child!" Ponson du Terrail describes a handsome old man as walking in his garden with his hands behind his back, reading a newspaper. Alfred de Musset speaks of the mouth keeping silence that it may listen to the heart speaking. This may perhaps be forgiven on the score of poetic licence; but what are we to say of Alexis Bouvier who, having mentioned a phial considerably earlier in the narrative, describes a wretch as throwing himself on the child, seizing its head and emptying its contents into its mouth? The most striking example of all is taken from Flaubert, who was nothing if not meticulously exact in his descriptions, and who yet tells us in *Madame Bovary* of some one who received as a birthday present "a fine phrenological head, all painted blue and marked with figures down to the thorax!"

Human nature is always the same, whether arrayed in the velvet and love-locks of the Restoration or the frock-coat and top-hat of to-day. In common with the rest of mankind, Samuel Pepys, most human of men, suffered from periodical fits of tidiness, when he turned out drawers and desks, and expended much time and energy in sorting and destroying old papers. An entry in his diary dated December 31st, 1664, reads thus:

This Christmas I judged it fit to look over all my papers and books; and to tear all that I found either boyish or not to be worth keeping, or fit to be seen, if it should please God to take me away suddenly. Among others, I found these two or three notes, which I thought fit to keep.

Amongst these notes are the following charms:

#### CHARMES.

##### 1. For Stenching of Blood.

Sanguis mane in te,  
Sicut Christus fuit in se;  
Sanguis mane in tua vena  
Sicut Christus in sua poena;  
Sanguis mane fixus,  
Sicut Christus quando fuit crucifixus.

##### 2. A Thorne.

Jesus, that was of a Virgin born,  
Was pricked both with nail and thorn;  
It neither wealed, nor belled, rankled nor boned.  
In the name of Jesus, no more shall this.

##### 3. A Cramp.

Cramp be thou faintless,  
As our Lady was sinless,  
When she bare Jesus.

##### 4. A Burning.

There came three Angels out of the East;  
The one brought fire, the other brought frost—  
Out fire; in frost—

In the name of the Father, and Son, and Holy Ghost.  
Amen.

Pepys does not tell us where or when these charms came into his possession, or anything of their history. They are obviously of Christian origin. But long before the Christian era spells were in use for the cure of disease. So hard-headed a man as the elder Cato—he of the *atrox animus*—gives a number, and Dr. Payne in his *FitzPatrick Lectures for 1903 (English Medicine in the Anglo-Saxon Times)* cites several of Pagan origin and others in which Scriptural names, heathen mythology, and old Teutonic folklore are mixed up. Doubtless, in patients of suitable mental constitution suffering from diseases curable by faith, these charms did good in the same way as those of Christian Science do under like conditions at the present day.

## Medical News.

THE first meeting for the session of the Medical Society of London will be held on Monday next, when the incoming president, Dr. Samuel West, will deliver an address at 8.30 p.m.

MR. W. A. MEREDITH, of Little Massingham Manor, Lynn, Consulting Surgeon to the Samaritan Free Hospital, London, has been placed upon the Commission of the Peace for the County of Norfolk.

PROFESSOR WILLIAM WRIGHT will read a paper before the London Hospital Medical Society on Some Problems in Teratology. The meeting will be held on Thursday, October 21st, at 8 p.m., in the anatomical theatre of the Medical College.

THE annual meeting and festival of the Birmingham Ward of the Guild of St. Luke will be held on Wednesday, October 27th, at 8 p.m., at Holy Trinity Church, Coventry, when the festival sermon will be preached by the Lord Bishop of Worcester. All medical practitioners in the district are invited to attend.

FURTHER experiments have recently been conducted by the British Fire Prevention Committee with the object of obtaining precise data as to the fire resistance of treated flannelette after many washings, and of devising some easy method of rapidly proving the precise resistance of flannelette sold as non-inflammable. An illustrated report will shortly be issued.

THE next meeting of the Society for the Study of Inebriety will be held in the rooms of the Medical Society of London, 11, Chandos Street, Cavendish Square, W., on Tuesday, October 12th, at 4 p.m., when Dr. Milne Bramwell will open a discussion on Suggestion and its rôle in the Treatment of Inebriety.

THE first Hunterian Lecture of the Hunterian Society is to be delivered at 8.30 p.m. next Wednesday, October 13th, at the London Institute by Dr. Sidney Martin, who will discuss certain infective processes in the intestine and their results and treatment. All members of the profession are invited to attend.

IN his address next Monday, on the occasion of the opening of the winter session at the West London Post-Graduate College, Dr. Theodor Schott, of Nauheim, will deal with some further investigations on the subject of acute overstraining of the heart. Tea and coffee will be served at 4.15 p.m., and the address delivered at 5 o'clock.

MRS. SIDNEY WEBB has given notice on behalf of the National Committee to Promote the Break-up of the Poor Law that application for tickets for a meeting at St. James's Hall, London, on Tuesday next, "to inaugurate the Minority Report campaign," have been so numerous that it has been arranged to hold a second meeting on November 16th, when the Earl of Lytton will preside. Tickets for this second meeting can be obtained on application to her at 5 and 6, Clement's Inn, W.C.

A HOME for the treatment of lupus will be opened shortly in Vienna. It will be first of its kind in the Austrian Empire. No other cases will be received. The treatment will be in the hands of a special staff, the members of which are now undergoing instruction in the Lupusheilstätte of the general hospital in Vienna. Treatment will be free to all patients sent by hospitals; if a private practitioner sends a patient, a small charge will be made. The hospital will contain twenty-four beds, to accommodate surgical cases, and five sets of Finsen apparatus, together with x-ray apparatus. A home for patients coming from abroad will also be provided for. The expenses will be met partly by the State, partly by charitable contributions.

done!" cried Rhodes, looking aghast, "my dear sir, I did not come here to discuss the question with you as to whether it could or could not be done; it will have to be done." "Oh, if that's how you speak, doctor, you had better come in here, and we'll have a talk over it and see how it can be managed." This was typical of the man—his earnest personality, his sound judgement, and complete mastery of detail carried the day.

An impressive funeral service was held at Emmanuel Church, Didsbury, on Wednesday, September 29th, which was largely attended by his personal friends and deputations from various public bodies. Cremation followed at the Manchester Crematorium. One of the greatest and most eloquent tributes to his character occurred on the way to the Crematorium when a number of aged pauper men from the workhouse were seen standing with heads uncovered and with visible signs of emotion plainly written on their faces.

It has been written of him with truth—

Milson Rhodes's name will live. The good he has done will not die with him, and generations yet to come will have reason to remember him gratefully.

And we might also add "lovingly."

"Wire-pulling" on his own behalf was alien to Milson Rhodes's nature, and if he did not meet with many of the outward earthly rewards for his unselfish labours in the cause of suffering humanity, we know of no more fitting quotation that could be said of him than: "Well done thou good and faithful servant: thou hast been faithful over a few things, I will make thee ruler over many things: enter thou into the joy of thy Lord."

## Universities and Colleges.

### UNIVERSITY OF LONDON.

#### *Advanced Lectures in Physiology.*

THE first of the course of eight lectures during the first term in the Physiological Laboratory, by Professor G. A. Buckmaster and Mr. J. A. Gardner, will be given on October 12th, at 5 p.m., the subject being recent researches on chloroform anaesthesia.

Professor E. H. Starling's course of eight lectures on recent advances in the physiology of digestion, will begin on Friday, October 15th, at 5 p.m.

The course of six lectures on the pineal and pituitary bodies, by Professor A. Dendy and Professor W. D. Halliburton, at King's College, commences on Monday, November 1st, at 4.30 p.m.

#### *Lectures by the Professor of Protozoology.*

Professor E. A. Minchin will give a course of fourteen lectures on protozoan parasites, with special reference to those of man at the Lister Institute of Preventive Medicine on Mondays and Thursdays, at 5 p.m., during the second term (January to March). These lectures, which are free by ticket, will be addressed to B.Sc. students, medical men and others interested in the subject, and will be followed by exhibits of preparations as occasion requires.

### THE UNIVERSITY OF BELFAST.

#### *Proposed Lectureship in Scholastic Philosophy.*

THE Marquess of Londonderry and others have presented a petition to the Lord Lieutenant of Ireland against the establishment of a lectureship in scholastic philosophy in the university. One of the reasons advanced is that at a public meeting to further the Better Equipment Fund of the college the most explicit promises were made by the authorities that no attempt would be allowed to introduce any sectarian education, and that in reliance on these promises, funds were subscribed, and that the petitioners consider a lectureship in scholastic philosophy is sectarian.

Three petitions have also been presented to the Judicial Committee of the Privy Council, and a preliminary hearing took place, but was adjourned; and the full hearing will be held on October 14th. Both petitioners and the University Commission will be represented by counsel.

The matter, although not strictly medical, is arousing the deepest concern in all circles. Many feel strongly that indirectly the interests of the Belfast Medical School are vitally involved in the issue.

### THE UNIVERSITY OF BIRMINGHAM.

#### *Appointments.*

PROFESSOR JORDAN LLOYD has accepted the invitation of the Council of the University to succeed Professor Bennett May as Professor of Surgery.

The vacancy caused by the resignation of Professor Robinson, who was Professor of Anatomy, has been filled by the election of Mr. Peter Thompson, M.D., Ch.B.Vict., Professor of Anatomy in King's College, London.

The Chair of Zoology has been filled by the appointment of Mr. Frederick William Gamble, D.Sc., F.R.S., who was Assistant Director of the Zoological Department and Lecturer and Examiner in Zoology in the University of Manchester. He succeeds the late Professor T. W. Bridge.

Miss Jessie S. Bayliss, D.Sc., a former student, has been appointed Lecturer in Botany.

#### *Walter Myers Travelling Studentship.*

Mr. John Dale, M.B., Ch.B., B.Sc., has been recommended for election to the Walter Myers Travelling Studentship, and the Senate has approved of his holding the studentship at Hamburg. This is the first time this scholarship has been awarded since its foundation in 1901.

#### *Matriculation.*

The pass list of the September matriculation examination contains the names of fifty-three students, and of these seven have been placed in Class I.

## Medico-Legal.

### MEDICAL INSPECTION OF SCHOOL CHILDREN.

ETIQUETTE writes: A medical inspector of schools signs a child up as having "a weakness in one lung." This has the effect of greatly disturbing the parents, who bring the child to be examined by their doctor. The doctor finds no symptoms, and no signs of any lung trouble whatsoever, and the parents state that the child has always been perfectly healthy, is gaining weight, and has no cough or trouble of any description. Another medical man examining the child independently agrees with the parent's doctor that there is no lung trouble whatever. What is the course to adopt?

\* \* A notice given by the medical inspector of schools to a parent is of the nature of a warning, or advice, or recommendation that in his judgement the child requires special care or treatment. The parents in the case related have done their duty in taking the advice of their own doctor with, in addition, the opinion of another medical man. The proper course would seem to be for the parent's doctor to write to the medical inspector, telling him that the child had been carefully examined and appeared free from evidence of disease, and that the parent's doctor had therefore advised them to let the child return to school.

## Medico-Ethical.

*The advice given in this column for the assistance of members is based on medico-ethical principles generally recognized by the profession, but must not be taken as representing direct findings of the Central Ethical Committee.*

### THE COURTESY CALL.

PEANA.—The courtesy call should be made as soon as possible after the practitioner has settled in a neighbourhood. There can be no reason for deferring it until after the termination of the introduction, unless there is any doubt that he will stop.

## Public Health

AND

## POOR LAW MEDICAL SERVICES.

### REGULATIONS AS TO IMPORTED MEAT.

It was to be anticipated that the regulations made by the Local Government Board under the Public Health (Regulations as to Food) Act, 1907, would require amendment from time to time as experience in their enforcement was gained. There came into force on September 30th important alterations and additions to the definitions of foreign meat of Class I and Class II. Of special significance is the addition of "stripped" meat to Class I. It appears that the attention of the Board has been called to the fact that meat, particularly beef, is sometimes imported in the form of carcasses, or portions of carcasses, from which the pleura or lining membrane of the thorax have been stripped. The object of this removal of the pleura is no doubt to conceal evidence of disease. When meat in this condition is imported it is now the duty of the Customs Officer to forbid its removal until seen by the medical officer of health.

THE fifth annual public meeting of the Association of Women Pharmacists will be held in the lecture theatre of the Pharmaceutical Society at 17, Bloomsbury Square, W.C. (by kind permission of the President and Council), this day, Friday, October 8th, at 8 p.m. An address on The Power of Little Things will be given by Miss Mary Thorne, M.D., F.R.C.S.I.