

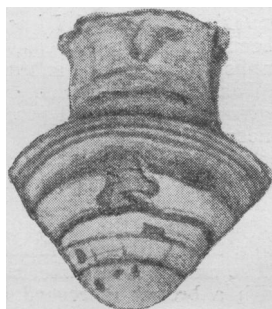
⁴ *Annal. de dermat. et de syphilol.*, 1893, p. 3. ⁵ *Ibid.*, 1895, p. 525. ⁶ *Soc. Méd. des Hôp. de Paris*, April 23rd, 1897. ⁷ *Thèse de Paris*, April 28th, 1907. ⁸ *Soc. Méd. des Hôp. de Paris*, July 21st, 1899. ⁹ *Gazette médicale de Nantes*, 1901, No. 6. ¹⁰ *Monats. über die Gesamtleistungen auf dem Gebiete der Erkenntn. des Harn- und Sexualapparatus*, 1900, p. 643. ¹¹ *Archiv. für Dermat. und Syphil.*, 1904, Bd. 69, p. 363. ¹² *Muench. med. Woch.*, May 30th, 1905, p. 104. ¹³ *Archiv. de méd. expériment. et d'anat. pathol.*, September, 1906, No. 5. ¹⁴ *Bull. de la Soc. Fr. de Dermat. et Syph.*, May, 1909, No. 5, p. 162. ¹⁵ *Bulletin médical*, 1909, p. 851. ¹⁶ *Ikongraphia Dermatologica*, Fasc. v, 1910, p. 196.

Memoranda:

MEDICAL, SURGICAL, OBSTETRICAL.

AN EXTRAORDINARY SHELL WOUND.

A SEAFORTH Highlander, aged 23, was brought to the temporary field hospital at Burey le Long, suffering from a severe shell wound in the back, sustained two days before, while lying in the trenches. He had on his field dressing, which had been applied at the time he was wounded. On removing this dressing a compound comminuted fracture of the right



Sketch of time fuse by M. Nichol, French interpreter.

scapula below the spine presented itself accompanied by extensive laceration of the soft tissues. The gaping opening in the skin was about 7 in. by 5 in. This appeared to be the only injury he had received, and was cleaned up, dressed, and bandaged, but on removing his kilt an extraordinary lump was seen lying immediately above the base of the sacrum and slightly to the right side, giving exactly the appearance that might be expected in a case of complete fracture dislocation of the spine. The skin above this was like parchment, and being quite insensitive a cross incision was made through the skin and subcutaneous tissue, beneath which the object was found. This turned out to be the complete time fuse of a large shell, familiar to laymen as the brass nozzle of the shell. This object weighs 2½ lb., and while it may be interesting to conjecture as to the exact manner in which it travelled the whole length of his back, passing in its course beneath the tight belt of his kilt, the fact that he should have lived to tell of his marvellous escape makes the case, in our opinion, one worth recording. As he was transferred the same night to the base, his subsequent history has not been obtainable.

HUGH STEWART,
Captain R.A.M.C.,
J. F. MURPHY,
Captain R.A.M.C.,
Special Reserve.

HERPES AND VARICELLA.

IN view of recent correspondence and articles in the *BRITISH MEDICAL JOURNAL*, I think the following is of interest. On September 12th I was called to a boy with varicella. The rash was three days old. On August 24th his mother had an attack of herpes zoster; none of my colleagues have any cases of varicella, and I can learn of none in the district. In both cases the rash was typical and unmistakable. It will be noted that the incubation period of varicella is accurately fulfilled. I think there are so many recorded cases that coincidence does not explain them, and we do not know how many unrecorded cases there may be; for instance, my attention was only arrested on account of the publication on the subject in the *JOURNAL*.

Beaumaris.

J. HEPWORTH.

"RAT-BITE FEVER" CAUSED BY A FERRET.

F. L. L. was bitten by a ferret whilst ratting on April 2nd. As the wound, inflicted on the left thumb, was small, no particular attention was paid to it. On the third day the healed wound became inflamed and the glands in the axilla painful. The general symptoms were extreme weakness, shiverings, sweats, and fear of impending death. The patient looked very pale and exhausted and his temperature ran up to 104° F. He quite recovered in four days, but a week later had a recurrence of symptoms,

and on this occasion in the neighbourhood of the healed wound there was an erythematous rash. The glands in the axilla were swollen and hard to the touch, but only moderately tender. After four days in bed he expressed his condition by saying he felt as well as ever he did in his life, and was considerably surprised to have a relapse ten days later, with a repetition of former symptoms together with pain in the throat and diarrhoea. On this occasion the erythematous patches were present on both arms and chest; the inguinal glands and a few of the cervical glands were affected.

Dr. Carey Coombs, of Bristol, saw the case and supported the diagnosis of "rat-bite fever." The blood count was as follows:

| | |
|--|--------------|
| Red blood corpuscles (no abnormal forms) | 4,856,000 |
| Leucocytes (normal in number) — | |
| Polymorphs... | 64 per cent. |
| Large mononuclears... | 18 " |
| Lymphocytes... | 16 " |
| Mast cells... | 2 " |

No causal protozoan could be demonstrated.

The patient responded so well to inunctions of mercury that recourse to neo-salvarsan was deemed unnecessary. The attacks have become slighter and the intervals between them of longer duration.

On looking through the literature of rat-bite fever I find a case recorded of a ferret-bite leading to such consequences, and, curiously enough, it occurred in this neighbourhood at Malmesbury, and was eventually under Dr. Luff's care at St. Mary's Hospital.

Chippenham, Wilts.

J. HOBART NIXON, M.D.

Reports

ON

MEDICAL AND SURGICAL PRACTICE IN HOSPITALS AND ASYLUMS.

GOVERNMENT HOSPITAL, MBARARA, UGANDA.

ABDOMINAL WOUND: PROLAPSE OF STOMACH: RECOVERY.

(By R. E. McCONNELL, M.D. McGill, Medical Officer.)

A MALE Ankole native, of poor physique, aged about 22, was carried to hospital on December 1st, 1912, suffering from a penetrating abdominal spear wound which had been self-inflicted five days previously at a village about seventy-five miles away. The incision was about 4 in. long, running diagonally downward from the left side of the epigastrium into the left hypochondrium. Through this the entire stomach presented. It was wrapped in a filthy cloth and bathed in green offensive pus.

The viscus was washed with carbolic lotion four times daily and a wet dressing was left on it during the intervals. For the rest the treatment was one of moderate stimulation with strychnine. The temperature on admission was 99° F., but at the end of thirty-six hours became subnormal. The patient took food well, and his bowels behaved in a normal manner.

On December 7th I had to leave my station before a relieving medical officer arrived in order to connect with a homeward-bound steamer at Mombasa. The stomach, though not yet altogether healthy in appearance, had become clear, and to replace it in the abdominal cavity seemed the lesser of two evils. It was found to adhere firmly in its whole circumference to the surfaces of the wound. This adhesion was broken down with the fingers, aided, when necessary, by scissors. As considerable difficulty was experienced in returning the organ, the abdominal wall near it was transfixed by three long strands of stout silk; by pulling on these the wall was elevated and the return satisfactorily made. The wound was then closed by through-and-through sutures.

The further record of this case, kept by the sub-assistant surgeon, Mr. Gokal Chand, states that on the evening of December 8th the temperature reached 99.6° F., but on the following day became normal and remained so. Recovery was uninterrupted, and the patient left the hospital well on January 2nd, 1913.

This case is reported, not as a triumph of surgery, but as an astounding example of the recuperative power of negroes.

attention was that of medical officer of health for Harrow. He held this position up to the time of his death, never losing interest in Harrow and its neighbourhood, and had the strength to prepare the report of his work to the Harrow Council for the year 1913.

To medical men in London Dr. Little was well known on account of his early advocacy and unfailing interest in schemes for post-graduate instruction. He had personally appreciated the value of this in his own career, and felt sure of the desirability of making post-graduate study easily obtainable. He assisted in starting a post-graduate course at Charing Cross Hospital, which was for many years very successful, and was almost the only course of instruction at the time arranged for post-graduates in London. Later, in association with the late Sir Jonathan Hutchinson, he was greatly instrumental in starting the London post-graduate scheme which ultimately developed into the Medical Graduates' College and Polyclinic, an institution which has done so much good work for the medical profession.

He was a man gifted with a sanguine temperament, enthusiastic in all that he undertook; difficulties were never too great to be overcome, and his optimism was of unfailing value to his colleagues in the various undertakings with which he was associated during his career. His cheerfulness of disposition never stood him in better stead than during the long and trying illness which preceded his death. His resourcefulness and brightness of character will always remain a pleasant memory to those who had the privilege to know him well.

Dr. Little was a member of a family consisting of three sisters and five brothers. Two brothers—William and Joseph—entered the medical profession, and practised in Australia; Shepherd Little, a barrister, was at one time M.P. for Whitehaven, and during the latter years of his life stipendiary magistrate for Liverpool; the remaining brother was the late Reverend R. Wentworth Little.



LIEUTENANT A. K. ARMSTRONG,
(Photograph by Stereoscopic Company, London.)

Sir Alfred Thomson was unmarried, and leaves an aged aunt, with whom he resided at home before he went into the private hospital, and a brother, Dr. Robert Thomson, of Margate, with whom deep sympathy is felt.

LIEUTENANT A. K. ARMSTRONG, R.A.M.C., MONMOUTH.

LIEUTENANT ARTHUR KEITH ARMSTRONG died in France on September 15th from the effects of wounds received in action. The sad news was conveyed to Mrs. Armstrong in a War Office telegram as follows: "We beg to inform you that Lieutenant A. K. Armstrong died of wounds on September 15th. With Lord Kitchener's regrets." Lieutenant Armstrong, who was only 33 years of age, was the only son of Mr. and Mrs. Henry Armstrong, of 42, Dartmouth Park Road, London, and grandson of Dr. Armstrong, J.P., Gravesend. He was educated at Highgate School,

where he was a member of the cadet corps. He afterwards entered St. Bartholomew's Hospital. In 1907 he was appointed house-surgeon at Huntingdon County Hospital, and afterwards became surgeon to the British India Mail steamer *Jelunga*. In 1909 he began practice in Monmouth in partnership with Dr. Lloyd-Smith, and became a member of the staff of the Monmouth Hospital. At the outbreak of the war he offered his services to the Government and was granted a commission in the R.A.M.C., being stationed first at Woolwich Hospital and then ordered abroad. During his residence in Monmouth Dr. Armstrong had made himself very popular with his colleagues and had earned the respect and regard of the public. In the town of his adoption he will be much missed and the deepest sympathy is felt for his widow and two children. He was a member of the British Medical Association, and published in this JOURNAL in

1911 a paper on a case of eclampsia treated by saline infusion and another on hydrocephalus as a sequel to shock in 1912.

SIR ALFRED EDWARD THOMSON, M.D., M.Ch.,

R.U.I., L.M.R.C.P.I., M.R.C.S. Eng.,

VISITING SURGEON, NEW SOMERSET HOSPITAL, CAPETOWN, S.A.;
FELLOW ROYAL SOCIETY OF MEDICINE.

It was with deep regret that the announcement of the death of Sir A. E. Thomson, M.D., of Capetown, South Africa, was received in Ulster. He died in Belfast on September 27th. He had resided long in Capetown, but those who were his fellow students and who had met him from time to time on his visits to his native land felt that a personal friend, a conscientious and highly skilled surgeon, and a personality of exceptional worth had been lost. Sir Alfred had long been an invalid, and had suffered much from stomach and subsequently bowel trouble. He had been operated on in London four years ago, and had come back once more to Belfast to seek for aid, but numerous adhesions between coils of bowel, into which old abscesses had evidently emptied, and finally perforation brought about the untimely end. His old fellow students and personal friends gave him all that skill and affection could do for him. Sir Alfred Thomson's work and success in South Africa under such most painful and trying conditions proved his courage and determination.

He was the second son of the late Dr. Thomson, of Bangor, County Down, and entered the Queen's College, Belfast, and Royal University of Ireland. After taking his degree in 1886, he was for a time resident medical officer in the old Belfast Royal Hospital, and York Road Lying-in Hospital in London; even then the gastric ulcer troubled him, and he sought health in the south of France in charge of a patient. Going to South Africa he became resident medical officer of Kimberley Hospital. He was most successful in Capetown, where he finally settled, and soon entered the leading ranks of the profession. Within the last year he received the honour of knighthood, which gave great pleasure to his friends in Ulster, who recognized the suitability of the bestowal and the merit of the recipient.

Universities and Colleges.

UNIVERSITY OF LONDON.

UNIVERSITY COLLEGE.

THE following entrance scholarships and exhibitions have been awarded in the Faculty of Medical Sciences: Bucknill Scholarship (135 guineas), B. Rosenstein, of Westminster City School; First Medical Exhibition (55 guineas), H. N. F. Cook, of University College, London; Second Medical Exhibition (55 guineas), A. W. Holgate, of Alleyn's School, Dulwich; *proxime accessit*, M. Baranov, of King Edward VII School, Johannesburg, and University College, London; Epsom Free Medical Scholarship, N. E. Beasley.

LONDON HOSPITAL.

The entrance scholarships have been awarded as follows: Price Entrance Scholarship in Science (£100), Mr. I. H. Zortman; Price Entrance Scholarship in Anatomy and Physiology, for students of the Universities of Oxford and Cambridge (£52 10s.), Mr. H. D. McIlroy, Jesus College, Cambridge.

ST. MARY'S HOSPITAL.

The competition for entrance scholarships at the medical school resulted in the following awards: The three open Scholarships in Natural Science (value £100, £50, and £26 5s. respectively) to Mr. J. O'F. Fletcher, St. Mary's College, Trinidad; Mr. W. F. Francis, Berkhamsted; and Mr. H. B. Suter, Epsom College. The two University Scholarships (each of the value of £52 10s.) to Mr. J. W. G. Phillips, St. Mary's Hospital Medical School, and Mr. T. S. Evans, University College, Cardiff. A University Exhibition was also awarded to Mr. R. A. Woodhouse, Downing College, Cambridge.

GUY'S HOSPITAL.

The following were the successful candidates for the entrance scholarships awarded at the Medical School in September. The two Senior Science Scholarships (for University students), value £75 and £35, Mr. J. M. H. Campbell, New College, Oxford, and Mr. F. A. Unwin, King's College, London. The two Junior Science Scholarships, value £120 and £50, Mr. A. E. Sawday and Mr. S. A. Sharpe, both of Guy's Hospital Preliminary Science Class. The two Scholarships in Arts, each of the value of £50, Mr. E. E. D. Gray, St. Paul's School, and Mr. M. W. O'Brien, Oratory School, Edgbaston.

ST. GEORGE'S HOSPITAL.

The entrance scholarships in Anatomy and Physiology, of the value of 70 guineas and £50, have been awarded to Mr. R. Salisbury Woods, of Downing College, Cambridge, and Mr. A. Birrell, of the University of Wales, respectively.

VICTORIA UNIVERSITY OF MANCHESTER.

The following candidates have been approved at the examinations indicated:

FIRST M.B.—Part I (*Inorganic Chemistry and Physics*): Mary G. Cardwell, S. E. Critchley, F. L. Heap, F. S. Horrocks, A. W. Kirkham. (*Physics*): F. H. Moor, V. T. Smith, Marie Wardman, James Yates. Part II (*Elementary Biology*): Mary G. Cardwell, Elizabeth C. Davies, F. S. Horrocks, Kathleen O'Donnell, Marie Wardman, Ethel D. Willis.

Medical News.

THE 1st (Home Service) Home Counties Field Ambulance, with head quarters at the Old Palace, Maidstone, requires officers to complete its establishment. Inquiries should be addressed to the officer commanding.

As announced in our advertisement columns, the autumn session of the Post-Graduate College, West London Hospital, Hammersmith, will open on Monday, October 12th. Full information can be obtained on application to the dean or vice-dean at the college.

THE winter term of clinical lectures and demonstrations at the National Hospital for the Paralyzed and Epileptic, Queen Square, Bloomsbury, commenced on Tuesday, October 6th, and will be continued on Tuesdays and Fridays, at 3.30 p.m. up to and including December 11th.

A 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 13th, at 4 p.m., when Dr. Robert Armstrong, M.D., will open a discussion on drug addiction in relation to mental disorder.

THE Local Government Board has issued a revised list of sanatoriums approved by the Board under the Insurance Act for the treatment of persons suffering from tuberculosis and resident in England excluding Monmouthshire. Under the provisions of Section 42 (1) of the Insurance Act, 1913, sanatoriums for the treatment of insured persons suffering from tuberculosis and resident in Wales and Monmouthshire are subject to the approval of the Welsh Commissioners.

THE prizes of the School of Dental Surgery of the Royal Dental Hospital, Leicester Square, will be distributed on November 17th by Mr. Arthur Hood, Chairman of the Managing Committee, in place of Sir Charles Wyndham, who, it is hoped, will distribute the prizes next year. The dinner of past and present students will not be held and the post-graduate lectures announced for October and November have been postponed, but will be given in the new year if circumstances permit.

INCOME tax used to be accounted a war tax, and though it has been largely used to meet other expenditure, it is reasonable to anticipate in the next and the following years a considerable increase in the amount of taxation levied on income. While no one wishes to shirk his responsibilities in this respect, it is only right that each should secure the advantages by way of exemption and abatement that the law permits. Returns are often difficult to make out, and we may therefore call attention to the advertisement of the Income Tax Protection and Relief Association, 7, Staple Inn, Holborn, W.C., published in this issue, offering assistance in the preparation of returns at an annual subscription of half a guinea.

A SPLENDID gift of £57,000 has been made by the women of Canada to show their sympathy with the sufferers through the war. Of this sum £37,000 has been set aside, by request, for a naval hospital at Portsmouth, the remainder being placed at the disposition of Lord Kitchener for use in connexion with our forces in the field. The Admiralty have gratefully accepted the gift on behalf of the navy, and have undertaken to identify the hospital with the women of Canada, whose happy inspiration and thoughtful sympathy have thus forged a new link between the navy, Portsmouth, and the Dominion. The hospital of the Canadian War Contingent Association, particulars of which were given in the JOURNAL of September 19th, is being established in a country house at Shorncliffe, lent by Sir Arthur and Lady Markham.

Letters, Notes, and Answers.

Queries, answers, and communications relating to subjects to which special departments of the BRITISH MEDICAL JOURNAL are devoted will be found under their respective headings.

LETTERS, NOTES, ETC.

MR. A. W. BALL, Director of Oppenheimer, Son and Company, Limited, asks us to state that the product sold by that company under the name Metramine, and mentioned in the note on "Drugs with German Names," published in the JOURNAL of October 3rd, page 594, is a trade mark name for purified hexamethylenetetramine. The name is registered in London and other British-speaking countries, and also in Italy. The process used in its manufacture is not a protected or patented process of German origin, but a secret in the company's laboratories. Mr. Ball also asks us to state that the company was founded in Great Britain by William Oppenheimer, who was born in 1849 at Manchester, whose wife also is of British origin; his children were born in Great Britain and are the only Oppenheimers interested in the business, all the other shareholders are British-born subjects, the capital is British, and all the members of the staff are British-born subjects, and the products of the company are manufactured in London.

PROPOSED SPECIAL SERVICE (CHOLERA) CORPS.

DR. A. WHITE ROBERTSON, Honorary Secretary, writes: As there seems to be no call for the services of this corps in the immediate future I have, after correspondence with the War Office and British Red Cross Society, to inform the large number of medical men and nurses who have applied for special training that the project will now be dropped, leaving its members free to accept other appointments.

LECTURER CHARGED WITH MANSLAUGHTER.

MR. ORLANDO EDGAR MILLER, who has been committed for trial on a charge of manslaughter, was incorrectly described in the JOURNAL of last week, page 607, as a teacher of Christian Science. He described himself at the inquest as a lecturer on higher thought, and a practitioner of faith-healing, and said he was not a Christian Scientist.

ELEVATION OF DEPRESSED FETAL CRANIUM.

FUSTER of Algiers (*Bulletin de la Soc. d'Obstét. et de Gynéc. de Paris*, etc., June, 1914, p. 496) delivered a big multiparous woman, aged 47, by turning, after an unsuccessful attempt at delivery by forceps had been made by a resident assistant at a lying-in hospital. The patient had been delivered normally six times in succession, but version had been employed at the seventh labour, the forceps at the eighth, and embryotomy at the ninth. On this occasion, the tenth labour, the first stage was greatly prolonged, pituitrin was given, and the dilating bags applied, but oedema of the cervix developed. On that account the forceps was applied, but unsuccessfully. Fuster detected a deep depression in the fetal cranium, which was quite movable. He turned and delivered with ease. The child was a well-developed female, weighing 8½ lb., the occipito-frontal diameter was 4½ in., the occipito-mental 4½ in., and the biparietal 3½ in. It was asphyxiated when delivered, but revived a little after the usual treatment; the left parietal bone was so completely depressed as to be concave instead of convex. Fuster cut down through the scalp on the depressed bone, making an incision about a fifth of an inch long at the level of the uppermost part of the parietal eminence. The only instrument at his disposition, as it happened, was a Farabeuf's perforator employed for symphysiotomy, but with it he was able to open the parietal bone. Then he pushed the instrument under the inner surface of the bone and succeeded in elevating it almost completely. The scalp was closed by one suture and a drop of collodion applied to the wound. At the end of three weeks, when the mother was discharged, the child was in perfect health. Fuster notes that Hauch recently elevated a depressed frontal bone in a newborn child by means of a small corkscrew. If immediately undertaken, with aseptic precautions, elevation of the depressed frontal cranium, on its delivery, is a safe and simple operation.

SCALE OF CHARGES FOR ADVERTISEMENTS IN THE BRITISH MEDICAL JOURNAL.

| | £ | s. | d. |
|-----------------------|-----|-----|--------|
| Seven lines and under | ... | ... | 0 5 0 |
| Each additional line | ... | ... | 0 0 8 |
| A whole column | ... | ... | 3 10 0 |
| A page | ... | ... | 10 0 0 |

An average line contains six words.

All remittances by Post Office Orders must be made payable to the British Medical Association at the General Post Office, London. No responsibility will be accepted for any such remittance not so safeguarded.

Advertisements should be delivered, addressed to the Manager, 429, Strand, London, not later than the first post on Wednesday morning preceding publication, and, if not paid for at the time, should be accompanied by a reference.

NOTE.—It is against the rules of the Post Office to receive *postes restantes* letters addressed either in initials or numbers.