

## Memoranda :

### MEDICAL, SURGICAL, OBSTETRICAL.

#### TWO CASES OF DYSENTERY IN CHILDREN DUE TO *B. DYSENTERIAE* OF FLEXNER TYPE.

I PUBLISH these cases with the object of drawing attention to the dysenteric origin of some of the cases of infantile diarrhoea occurring in this country.

It was shown by Bainbridge and Dudfield (1911) that *B. dysenteriae* (Flexner type) was one cause of epidemic infantile diarrhoea in England. Four of the twelve children attacked in the outbreak they described had blood in the motions. Marshall (1909) had previously described one fatal case of dysentery from which he isolated the same organism. Similar observations have been made in Denmark, the United States of America, and elsewhere.

The position in reference to summer diarrhoea of infants is probably this: There is one type of diarrhoea accompanied with blood in the stools, which may occur in infants, and is due to the *B. dysenteriae* (Flexner or Shiga), while there is a second type of acute choleraic character, without blood in the stools, associated in this country with the bacillus No. 1 of Morgan.

The two cases I desire to report occurred in my own family, and had the following clinical histories.

#### CASE I.

P., a girl aged 3½ years, woke up on the night of June 12th-13th, 1915, in a state of delirium. The delirium continued the whole of the following day. Marked diarrhoea and vomiting set in at 7 a.m. on the same day. The motions at the commencement were green and watery, but rapidly became slimy, and contained a considerable quantity of blood.

The temperature on this first day of illness was: 11 a.m., 103.8°; 2.30 p.m., 102.8°; 6 p.m., 103.2°. The treatment was dietetic, while tepid sponging was needed to lower the temperature and diminish the delirium.

*Second Day.*—The motions, which were very frequent (over a dozen), contained mucus and blood and were intensely foul-smelling. The temperature was normal throughout the day. Delirium had abated, the patient had intervals of restlessness and drowsiness. Thirst was marked. Small doses of grey powder were given.

*Third Day.*—The patient was much better; blood and mucus were still present in the motions, however.

*Fourth Day.*—Motions still slimy in character, but no blood present.

*Sixth Day.*—Motions formed and natural in character.

#### CASE II.

The infant sister of the first case was attacked on June 20th. This case was afebrile, and no delirium occurred. On the first day of the disease the child passed six motions, the later ones containing blood and slime. The motions were of a similar character the second day. No blood was present on subsequent days. The case was exceedingly mild; the child objected to lie in bed throughout the whole period.

#### Bacteriological Findings.

A sample of faeces from the first case containing blood and slime was plated on MacConkey's medium on June 13th. The next day the plates showed one-third of the colonies to be non-lactose fermenters; four such colonies were inoculated on to agar and tested on the ordinary media with the following results:

	First Day.	Seventh Day.
Glucose ... ..	Acid only.	Acid only
Cane sugar ... ..	No change	No change
Dulcitol ... ..	No change	No change
Lactose ... ..	No change	No change
Mannitol ... ..	Acid only	Acid only
Milk ... ..	Acid	Alkaline
Broth ... ..	Cloud, non-motile rod	Indol positive
Agar ... ..	Dysentery-like growth	—

The strain was completely agglutinated by a Y serum in dilution of 1 in 2,560, and slight agglutination occurred at 1 in 5,120 dilution. This was the end titre of the serum. The patient's serum definitely agglutinated her own

organism on the fourth day of the disease in a dilution of 1 in 80 and slightly at 1 in 160.

The first blood-containing motion of the second case was similarly examined. Only one non-fermenting colony appeared on the MacConkey plate, which colony, however, proved to be a genuine *B. dysenteriae* of Flexner type. On testing this new strain against the Y serum it agglutinated also to the full titre of the serum.

Bacteriological Department,  
Lister Institute.

W. J. PENFOLD.

#### A NOTE ON THE "IRRITABLE HEART" OF SOLDIERS.

THE somewhat remarkable character of our observations and the urgency of the problem with which they deal is our reason for giving them publicity at the present stage of their progress.

Of soldiers admitted to our beds at University College Hospital for the special purpose of investigation, and sent to us with the diagnosis of "cardiac strain" or disordered heart action, a large group isolates itself.

They are men in whom the following prominent symptoms have arisen either gradually or suddenly, in some during the period of training, in others while serving actively in the trenches: Aching or sharp pain over the region of the heart, sometimes radiating but rarely severe, and breathlessness and palpitation on the slightest exertion, are the rule. So also is a sense of fatigue or exhaustion with effort; and oftentimes giddiness, occasionally proceeding to actual fainting, may be present.

On examination the heart's action is vigorous, the apex beat often forcible and covering a wider area than is normal. The limits of dullness are not usually increased; no murmurs are heard as a rule, but a systolic murmur may be present at base or apex. The pulse-rate is increased, often notably, and is peculiarly susceptible to posture and exercise. The blood pressure may show a notable fall as the patient passes from the lying to the upright posture. In many subjects there are other evidences of vasomotor instability—coldness and blueness of hands and feet or a prominent *tache*.

For the moment we exclude from this group all such cases as give a past history of rheumatic fever, chorea, or syphilis. In a number of the included patients, on the other hand, there is a history of throat affections or intestinal troubles.

The group is well defined, and in our view the symptomatology suggests, not primary cardiac mischief, but disturbances of function resulting from toxic absorption or actual infection. We have systematically examined eleven patients from this point of view, and in ten of them have found that streptococci (in two cases, staphylococci) are present in the urine; as a rule the organisms are found at the first examination; in other patients several such examinations are required. We take the view that we are dealing with an infection of the blood with organisms of a low grade of virulence and that these are filtered out in the urine, for the urine contains no pus cells, and, in a number of the patients, the organism has been recovered from the blood itself.

The source of the infection, its relation to local mischief, such as may occur in throat or gum sockets, and the relation of the infection to the symptomatology, are subjects which we propose to consider more fully at a later date.

THOMAS COTTON.  
THOMAS LEWIS.  
F. H. THIELE.\*

London, W.C.

\* Working under the Medical Research Committee.

A RADIUM INSTITUTE on the lines of that which has been at work in London for some years will, it is announced, be established in New York. The institute will consist of a hospital for the treatment of cancer and other diseases by the external and internal use of radium, and laboratories for the study of radium.

THE number of patients treated during 1914 in the Royal Northern Sea-bathing Infirmary, Scarborough, was 590. They included 34 Belgian soldiers (22 wounded and 12 sick), 44 British soldiers from the Expeditionary Force (23 wounded, 9 sick, 2 injured, and 10 frost-bitten), and 6 seamen from a patrol trawler. The Red Cross Society supplied relays of most willing and capable workers.

taken from its venerable neighbour, the Glasgow Cathedral. At the same meeting the Treasurer intimated a donation from Dr. Barlow, the retiring President, to the Benevolent Fund of the Royal Faculty.

## Ireland.

### ELECTION OF MASTER OF THE ROTUNDA HOSPITAL.

AT the annual charter meeting of the Board of Governors of the Rotunda Hospital held last week to fill a vacancy at present existing in the Mastership, Dr. Henry Jellett was unanimously elected Master on the proposition of Sir William Smyly, M.D., seconded by the Dean of St. Patrick's, and leave of absence was given to him for three months, without prejudice to any further extension he may require. Conditionally the three ex-Masters—Sir William Smyly, M.D., Dr. Purefoy, and Dr. Tweedy—have kindly undertaken to carry out the duties of the Master. Dr. Henry Jellett, who was Master of the Rotunda, last December applied to the board for leave of absence for six months to go to France to drive a motor ambulance. Leave of absence was granted, and was renewed for another six months. That he is doing excellent work at the front is shown by the fact that he was mentioned in dispatches.

### DUBLIN CASTLE RED CROSS HOSPITAL.

At a meeting of the Committee of Management last week a resolution was passed, on the recommendation of the Medical Committee, appointing the Presidents of the Royal Colleges of Physicians and Surgeons to act in an advisory capacity in rotation as honorary visitor to the hospital. It was reported that there were at present in the hospital 10 officers and 111 men.

The Committee had under consideration the very much increased cost of maintenance by reason of the general rise in prices, including the very serious increase in cost in connexion with the supply of drugs and medical requisites generally. It was resolved to ask the War Office to place this hospital on the same footing as the ten clinical hospitals in Dublin and other hospitals in the United Kingdom as regards the capitation grant for wounded soldiers.

## Obituary.

### BRIAN O'BRIEN, B.A., M.D.(T.C.D.),

MEDICAL INSPECTOR, LOCAL GOVERNMENT BOARD IN IRELAND.

IT was with deep grief that the news of the death of Dr. Brian O'Brien was received among the profession and the public in Ulster, and perhaps more especially in Belfast, where he was so well known for many years. Dr. O'Brien was in good health and discharging his duties as medical inspector of the Local Government Board up to October 21st; he fell ill on the following day, and cerebro-spinal fever of a very acute and severe form developed on the 23rd. He was removed from his home in Malone Park, Belfast, to the Purdysburn Fever Hospital, under his friend, Dr. Gardner Robb. From the first the attack was of a malignant type, and he succumbed on October 29th. The profession are glad that he was under the care of Dr. Gardner Robb, who since the epidemic of this disease in Belfast some few years ago has had such exceptional experience, and has visited Flexner in New York with regard to the bacteriology and serum treatment.

Dr. Brian O'Brien belonged to a very old Irish family. He was a grandson of William Smith O'Brien, M.P., the leader of the "Young Ireland" movement of many years ago. He was born in 1872. He received his medical education in Trinity College, Dublin, in 1896, and obtained the M.D. degree in 1898. He was appointed dispensary medical officer in Faughan, co. Derry, and also at Portsalon. Fourteen years ago he settled in private practice in Belfast, and became medical officer of one of the districts of the Royal Irish Constabulary, and assistant surgeon to the Queen Street Hospital for Sick Children. About eight years later he was appointed medical inspector of the Local Government Board for Ulster. His last report to the Board was on the subject of cerebro-spinal meningitis. In it he

says: "Since the beginning of the year 1915 this disease has made its appearance in my district in epidemic form." He had not been, however, knowingly in personal contact with any case for several weeks. His professional ability, skill, tact, and high sense of honour brought him rapidly to the front, and the promise of rapid advance in the service of the Local Government Board was sure to one with so many high qualifications.

Dr. Brien was an athlete. He was a prominent amateur golfer, and won many club trophies; he also rowed for his college, and took his part in most games. Personally he inspired more than liking in those with whom he came in contact. His private friends were innumerable and closely attached, but all claimed him as a friend. He leaves a widow and three young children, with whom much sympathy is felt.

DEPUTY SURGEON-GENERAL WILLIAM FARQUHAR, Madras Medical Service (retired), died at his residence in London on October 15th. He was educated at Marischal College, Aberdeen, where he took the degree of M.B. in 1853 and that of M.D. in 1857, as well as the L.R.C.S.Ed. in 1853. Entering the Indian Medical Service as assistant surgeon on May 28th, 1858, he became surgeon on May 31st, 1870, surgeon-major on July 1st, 1873, brigade-surgeon on May 16th, 1885, and deputy surgeon-general on July 1st, 1885. He retired on July 1st, 1890. The *Army List* assigns him no war service, though most of his service was spent in military employ in the Madras Presidency, the Straits Settlements, and Burma. In November, 1882, he was appointed to the medical charge of Utakamand, the summer capital of the Madras Government; and from 1885 to 1890 he was administrative medical officer of Belgaum and the Western District.

## Universities and Colleges.

### ROYAL COLLEGE OF SURGEONS OF ENGLAND.

THE annual report of the Council, 1915, contains the report of the annual meeting held on November 14th, 1914, the letter addressed to the Home Secretary by the President of the College on the scarcity of "subjects" for dissection, the Council's reply to the Director of Public Prosecutions respecting the observations of Mr. Justice Avory in his charge to the grand jury at Birmingham on a case in which the question of professional secrecy was raised in respect of clinical abortion, the special regulations during the war, and other minor matters. The President (Sir W. Watson Cheyne, Bt., C.B.), who holds the rank of Surgeon-General in the Royal Navy, was away from the June meeting, and leave of absence was given to Sir George Makins, K.C.M.G., C.B., Sir Anthony Bowly, K.C.M.G., Sir Berkeley Moynihan, and Mr. F. F. Burghard, C.B., in France, and to Mr. C. J. Symonds, Mr. C. A. Ballance, M.V.O., and Mr. W. Thorburn, at Malta. Mr. R. H. Burne, physiological curator of the museum, is working at Dunkirk, under the French Red Cross, and a large proportion of the servants of the College have enlisted. The obituary of Fellows includes thirty-three names, three of whom lost their lives on active service, and the obituary of Members includes 385 names, thirty-three of whom died on active service, while of the twenty-one Licentiates in Dental Surgery one died on service. The Conservator's annual report is followed by a similar communication from the librarian, who announces that the great catalogue is now practically completed. The librarian's request for additions to the library in a previous report has been liberally responded to, and in consequence it is enriched by many works of real value, among which are the late Mr. Edmund Owen's donation of medico-historical works by Asher and Cabanès.

## The Services.

### EXCHANGES DESIRED.

R.A.M.C.(T.F.) Captain, temporarily invalided, whose unit is now abroad, wishes to effect an exchange into home service unit. Only suitable for surgeon who can perform major operations quickly. Address No. 5490, BRITISH MEDICAL JOURNAL Office, 429, Strand, W.C.

Officer in home service field ambulance (T.F.), wishes exchange to casualty clearing station, hospital, hospital ship, etc., either home or abroad. Address Alpha, BRITISH MEDICAL JOURNAL Office, 429, Strand, W.C.

MR. DOUGLAS CRAWFORD CLERK has been awarded a university entrance scholarship, value £50, at King's College, London, for anatomy and physiology.

## Medical News.

A SALE in aid of the funds of the Royal Medical Benevolent Fund Guild will, by kind permission of the Earl and Countess of Crewe, be held at Crewe House, Curzon Street, London, W., on the afternoon of November 24th.

THE Cuban Parliament has voted an allocation of 400,000 pesos for the construction of six maternity hospitals, one in each of the provinces of the Republic.

THE Swiney Lectures on Geology will be delivered this year by Dr. J. D. Falconer, the subject being "Ice and the Ice Age." The course will be given at the Victoria and Albert Museum on Mondays, Tuesdays, and Saturdays at 3 p.m., beginning on November 13th.

AMONG the medical men who have assumed or resumed office this week are Dr. R. J. Smith, Lord Mayor of Cardiff, and the following Mayors:—Dr. James Pearson (Bootle), Dr. A. Macgregor Sinclair (Burnley), Dr. S. R. Alexander (Faversham), Dr. Miles C. Atkinson (Leamington), Dr. Lewis Hunt (Richmond, Surrey), and Dr. J. Parkinson Atkinson (Saffron Walden).

AT Nottingham Assizes, on November 5th, William Henry West, described as a physician, and Ernest Townsend, a boot salesman, were convicted of the manslaughter of a girl, who died as the result of an illegal operation performed by West at the other prisoner's request. West was sentenced to seven years' penal servitude and Townsend to three years'.

AT a meeting of the Society of Public Analysts on November 3rd, Mr. Edward Hinks, F.I.C., stated that the length of time for which hydrogen peroxide persisted in milk depended upon the age and condition of the milk. In one instance 0.2 per cent. peroxide added to a perfectly fresh milk was still present in estimable proportion after the lapse of eighteen months. It was found that within the range of 15° to 37° C., the higher the temperature the longer did the peroxide persist.

IN the ninth annual report of the Norwood Sanatorium, issued to the medical profession only, Dr. Francis Hare has avoided the temptation, to which editors of such reports often fall, of indulging freely in tables and statistics, to the weariness of the average reader. Though figures are, of course, not wanting, the report on the whole is an interesting essay on the treatment of alcoholism and other drug habits by a writer who combines first-hand knowledge of his subject with a facile pen.

THE staffs of the medical and dental schools of Guy's Hospital, at a meeting on November 9th, recorded the unanimous opinion that all schools should endeavour to facilitate the recently expressed official wish that students, in their first, second, and third years should place themselves at the disposal of the military authorities, but that in view of the national necessity of a constant influx of newly qualified medical and dental practitioners for the services of the navy and army, representations should be made to the Government that students after enrolment should be required to pursue their technical studies until otherwise instructed by the Admiralty or the War Office. A committee was appointed to consider how effect could best be given to this resolution.

THE Central Midwives Board held a special meeting on October 28th for hearing penal cases. Sir Francis Champneys was in the chair, and Mr. Parker Young, Professor Briggs, Dr. West, and Miss Paget were present. Of the seven women about whom final and interim reports had been received, one was struck off. Twelve fresh cases were heard, and eight midwives were removed from the roll, two were censured, and two cases were adjourned for judgement in three and six months. Apart from the usual charges of neglect with regard to taking pulse and temperatures, and of want of cleanliness, both personal and in connexion with their appliances, there were various serious cases of neglected puerperal fever, ophthalmia neonatorum, and rupture of the perineum. Two women were charged with insobriety, and another with employing an uncertified person as her substitute.

DR. R. O. MOON, in his third Chadwick lecture on typhus fever in Serbia, said that the Mussulman population seemed to suffer less than the rest of the inhabitants, owing, as he thought, to their greater personal cleanliness due to the frequent ablutions enjoined by Mohammedan law. Much evidence pointed to the contagion of typhus being carried by lice, and ordinary kerosene, such as is used for lighting, was an efficient and economical insecticide. He thought, however, that the opinion formerly held in this country and still maintained by many Serbian doctors of much experience in the disease, that it might be conveyed by direct inhalation, had not been disproved.

## Letters, Notes, and Answers.

AUTHORS desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL are requested to communicate with the Office, 429, Strand, W.C., on receipt of proof.

THE telegraphic addresses of the BRITISH MEDICAL ASSOCIATION and JOURNAL are: (1) EDITOR of the BRITISH MEDICAL JOURNAL, *Atiology, Westrand, London*; telephone, 2631, Gerrard. (2) FINANCIAL SECRETARY AND BUSINESS MANAGER (advertisements, etc.), *Articulate, Westrand, London*; telephone, 2630, Gerrard. (3) MEDICAL SECRETARY, *Medisecra, Westrand, London*; telephone, 2634, Gerrard. The address of the Irish office of the British Medical Association is 16, South Frederick Street, Dublin.

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.

### ANSWERS.

#### EXAMINATION OF RECRUITS.

J. A. C.—The medical examination of recruits for the navy and army does not differ in any real manner from the examination of any man for life insurance of the lesser orders, or for entry into any of the many civil forms of service which nowadays demand such examination. There are differences in point of detail according to the standards set up for the men in the several grades of the services. For example, a seaman for the navy must have perfect eyesight; for the army a soldier need not have such a high standard of vision. The difference of detail and the general scope of the examination can be found in *Recruiting Regulations*, to be obtained at any military bookshop; some parts of the examination are dealt with in the *Regulations of the Army Medical Service*, to be obtained at the same source.

### LETTERS, NOTES, ETC.

#### THE GRIEVANCES OF SHIPS' SURGEONS.

G. M. H., in the course of a contribution to the correspondence on this head, says that the attitude assumed by "Nauticus" must tend to prevent the much-needed reform in the status of ship surgeons. So long as the companies can get men "to take a voyage" they are, he says, not greatly concerned in establishing a regular medical branch in their services, with increased pay and the best ships for the longest-service men. Why, he asks, should there not be a well-organized medical service in the British mercantile marine of equal importance and with equal prospects to the British navy? Both are equally important to the nation. Again, a ship's surgeon has a good deal of authority if only he knows how to use it. With regard to placing a man on the sick list or returning him to work, he has practically absolute power, for nobody dare oppose his orders for fear of trouble under Compensation Acts. Let "Nauticus" be in charge of a ship with, say, an outbreak of small-pox, and he will soon see how much authority is given to the surgeon. Naturally, no surgeon himself gives orders to the crew, except his own hospital attendants. Such orders go through the executive department. If "Nauticus" maintains that by so doing he loses all "authority," then, of course, the senior medical officer of a flagship has no "authority," which, as Euclid says, "is absurd." Perhaps the cost of an outfit for only one voyage is a little expensive, but it is just the one-trip man who is preventing any improvement in the service. Let me add that I have had over two years' experience as a ship's surgeon, and as soon as the war is over I hope to return to being "a member of the crew." In the meanwhile I am serving in the navy.

#### THE GIANT CRICKETER.

DR. CLIPPINGDALE writes: Those who follow family history and hereditary proclivity may be interested to know that the patronymic "Grace" is a transformation of the French "Gros," a sobriquet bestowed originally upon a man of large stature, the first to bear the name being Raymond Fitz-Walter, surnamed "Le Gros," one of the companions in arms of Strongbow. The fine physique of the late Dr. Grace has therefore apparently lasted in his family during eight centuries and approximately through twenty-four generations.

### SCALE OF CHARGES FOR ADVERTISEMENTS IN THE BRITISH MEDICAL JOURNAL.

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