

Memoranda:

MEDICAL, SURGICAL, OBSTETRICAL.

GOLD-CROWNED TEETH AS A SOURCE OF DANGER.

It appears to me that the indiscriminate crowning of teeth with gold, as is frequently done by dentists nowadays, is often attended with a considerable amount of risk. I have seen many cases where the patient's health has been seriously affected by teeth being crowned which ought to have been extracted, and I have no doubt that other general practitioners have had a similar experience. A case which I have recently had illustrates this.

In April last I was consulted by a man, aged 87, who was extraordinarily strong and active for his years, and walked regularly from four to six miles a day. He told me that he had a general feeling of malaise, and that he had frequent pain in a left lower molar which was crowned last year, and that five other teeth which had been crowned within the last few years had broken off or been extracted. I found the mouth in a septic condition, with pyorrhoea affecting the seven remaining front teeth in the lower jaw. He had had all the upper teeth removed and wore a plate. I advised his having all the teeth extracted at once. He rather demurred at this, and I tried hydrogen peroxide and mouth-washes, but soon the submaxillary gland became swollen and painful, so on May 13th I called in a consulting surgeon, who at once said that all the teeth must be taken out. This was done, and an abscess with very offensive pus was found under the crowned molar. It was hoped that with suitable treatment of the mouth improvement would take place, but the pain and swelling increased, and in June, under local anaesthesia, the gland was incised, scraped, and plugged with gauze, and a quantity of pus and broken-down glandular substance evacuated. The patient did not improve and the swelling increased and became very hard, so much so that it was a question whether the disease was not malignant. A superficial cervical gland which had become affected was removed and examined, but showed only inflammatory changes. He became slowly weaker and died on September 21st. Up to within three weeks of his death he had been able to go about, but after that took to his bed. The temperature chart for the last three weeks was typically septicaemic. The whole growth was removed after death and examined with the same result as before.

I think there is no doubt that had those teeth been removed at first, instead of crowned, the patient might have been alive to-day.

Portmadoc, Wales.

G. R. GREEN.

Reports of Societies.

MODERN ARTIFICIAL LIMBS AND THEIR INFLUENCE UPON METHODS OF AMPUTATION.

A DISCUSSION on this subject, at a meeting of the Medical Society of London on October 22nd, when the President, Sir ST. CLAIR THOMSON, was in the chair, was opened by Mr. MUIRHEAD LITTLE and Major R. C. ELMSLIE, R.A.M.C., whose remarks are reported in full at pages 550 and 553.

Major JOCKELYN SWAN, speaking of operation cases sent over from France, asked whether the speakers considered that the secondary amputation should be performed at once, while the limb was still in a septic condition, or whether it should be postponed till healing had taken place.

In reply to the question how long artificial limbs would last, and whether the parts of a limb which were worn out could be renewed by any one except a skilled maker, Mr. LITTLE, after observing that the secondary amputation should be done as late as possible, said that an artificial leg would last about seven years, but probably something would require to be done in about a year and a half. Experience was not yet sufficiently long to enable it to be said how long an artificial arm would last. Many of the men who came back to Roehampton after six months were those who had used them for very hard work. Centres for repair were being started in other towns, which would save the journey to London.

Major ELMSLIE said that the longest time an arm had been in use was one year. He considered that the fitting of an arm was only the first part of the business. The man should then be trained to use it in a general way, and later in a special way, according to his particular trade or occupation.

In addition to the makers named by Major Elmslie the following had examples of their limbs at the demonstration: Messrs. Rowley, Hanger, and the Essential Limb Co. for lower limbs, and Messrs. Blatchford for arms.

WORK FOR MEDICAL WOMEN.

At the annual meeting of the London Association of Medical Women on October 9th, Lady BARRETT, in her presidential address, said that the Association of Registered Medical Women had originally been formed to give medical women an opportunity for discussing medical subjects when the doors of other societies were closed to them. Though this was no longer the case, and though the best work in the future would be done by men and women together, there was definite work which might with advantage be done in a society for women only: (a) to discuss and express considered opinion on suggested legislation likely to affect the health of women, and (b) to work systematically at those subjects in which women had unique or sole facilities for obtaining data hitherto not available. Lady Barrett instanced as an example of the first group the proposed Ministry of Health as one of those subjects of vital interest in matters particularly affecting women, but the greater part of her address was taken up in discussing three of the subjects in which women had special facilities for obtaining experience: (1) The supervision of the health of industrial women; (2) venereal disease in women and children; (3) the care of maternity. At the present time a very large number of medical women were being employed to look after the health of industrial workers. The women's army behind the lines in France and the women replacing soldiers in England were now examined as recruits and their health watched over by a corps of army medical women. The munition workers throughout Britain, as well as the thousands of factory workers of all kinds doing war work, had medical women in charge so far as they were obtainable, and for some time past the girls in public and private schools had more and more come under constant medical supervision by medical women. Up to the present time we had no large statistics or careful records showing the effects of industrial employment of various kinds on the general health of women, or on such special functions as menstruation, pregnancy, parturition, lactation, etc. Lady Barrett said that medical women ought to feel gravely responsible for the success of the present efforts to control venereal diseases; but to approach this subject with any hope of success meant far more than the isolated work of different members in conducting out-patient clinics or helping in educational work; concerted thought, free discussion, and co-operation were needed. The care of maternity demanded the special consideration of women, although it was not to the same extent directly in their hands. The nation required both work and babies, and women had to supply both. The two popular ideas, that pregnancy was not compatible with health and that "in sorrow shalt thou bring forth children," should be abolished. Research should produce anaesthetics suitable for all cases of labour; more hospital accommodation was needed both for pre-maternal cases of illness and for administering anaesthetics during labour, so that in time it might be possible to secure painless labour for every woman. Various non-medical bodies were expressing very decided opinions as to how the needs for maternity should be met. It was surely more than fitting that medical associations, and perhaps particularly a women's medical association, should express the considered opinion of the majority of its members on this important subject.

Reviews.

TUMOURS, INNOCENT AND MALIGNANT.

A NEW edition of BLAND-SUTTON's masterly book *Tumours, Innocent and Malignant*,¹ serves as a useful reminder of some fundamental truths of the cancer problem which are apt to be forgotten. The preoccupation of specialists, as well as the lay public, with the more

¹ *Tumours, Innocent and Malignant: Their Clinical Characters and Appropriate Treatment.* By Sir John Bland-Sutton, LL.D., F.R.C.S. Sixth edition. London, New York, Toronto, and Melbourne: Cassell and Co., Ltd. 1917. (Demy 8vo, pp. 799; 383 figures, 21s. net.)

Obituary.

SIR PARDEY LUKIS, K.C.S.I., M.D., F.R.C.S.,
DIRECTOR-GENERAL INDIAN MEDICAL SERVICE.

We regret to learn that Sir Pardey Lukis, Director-General of the Indian Medical Service, died in India on October 22nd, at the age of 60. He had a serious illness a couple of years ago, and it was to a recurrence of this malady that his death was due.

Charles Pardey Lukis was a son of the late Mr. W. H. Lukis, and received his medical education at St. Bartholomew's Hospital. He took the diplomas of M.R.C.S. and L.S.A. in 1879, and entered the Indian Medical Service in 1880, being at the top of the list of successful candidates. He graduated M.B.Lond. in 1889, took the diploma of F.R.C.S. in 1890, and the degree of M.D.Lond. in 1904. He was with the field forces engaged in Waziristan in 1881, and in the Zhob Valley three years later. He then transferred to the civil branch, and held various appointments in the United Provinces. He became civil surgeon of Simla in 1899, and honorary surgeon to the Viceroy in 1905. His first connexion with Calcutta was as professor of materia medica, and in 1905 he was appointed professor of medicine, principal of the Calcutta Medical College, and first physician of the College Hospital. He was selected to be Director-General of the Indian Medical Service at the beginning of 1910, and by successive extensions had held this post for nearly eight years, a longer period, we believe, than any previous occupant of the post enjoyed. Lukis, from the beginning of his time in India, gave himself up to the clinical side of his duties with all the remarkable ability and energy with which he was endowed, and continued to keep himself abreast of the progress of medicine and surgery. When he was advanced to the highest administrative medical post in India he was able to show that he had not failed fully to appreciate the importance which laboratory and field research had attained. He used the influence his position gave him to promote the formation of the Indian Research Fund Association, which has already done a great deal for research in India. How much may partly be gathered from the paper read for him at a meeting of the Royal Society of Arts last March and from the speech of Sir Havelock Charles on the same occasion.¹ Lukis was the first editor of the *Indian Journal of Medical Research*, issued by the Research Fund. He was the editor of Ghosh's *Materia Medica* and Waring's *Bazaar Medicines of India* and the author of a manual of *Tropical Hygiene*, a third edition of which, revised with the assistance of Lieut.-Colonel Blackham, appeared a couple of years ago.

The outbreak of war threw a great deal of increased responsibility upon Sir Pardey Lukis. The civil personnel of the service he directed was greatly depleted by the calls of military expeditions sent to Europe, Mesopotamia, and East Africa, and it will be remembered that the Mesopotamia Commission bore testimony to the energy and vigour with which he laboured to remedy defects and shortcomings during the short period for which he was Director of Medical Services in India. The energy displayed and the speed with which new proposals were carried through were highly praised by the Commission. He was commissioner for the St. John Ambulance Brigade in India and chairman of the Executive Committee of the St. John Ambulance Association in India. In these positions he did everything to favour the fine efforts made by the princes and people of India for the relief of the sick and wounded.

Sir Pardey received the C.S.I. in 1910, and was promoted K.C.S.I. in 1911. He became honorary surgeon to His Majesty in 1913. He is survived by his wife, a daughter of the late Colonel John Stewart, R.A., and by one son and three daughters. His eldest son, who gave every promise of following his father's successful medical career, accepted a commission in the London Regiment immediately after the outbreak of war, and was killed in March, 1915.

JOSHUA POWELL, M.R.C.S., L.S.A.,
NEWCASTLE EMLYN, MID WALES.

The death on October 21st of Dr. Joshua Powell, of Newcastle Emllyn, will cause widespread regret in the part of

¹ BRITISH MEDICAL JOURNAL, March 31st, 1917, p. 427.

Wales in which he has so long practised. He was ill only for a short time, the cause of death being pleuropneumonia. He received his medical education at University College, London, and took the diploma of M.R.C.S. in 1874, and that of L.S.A. in the following year. After holding the appointment of house-surgeon to the Royal Free Hospital, London, he settled in practice first at Rhydlewis, the village in which he was born sixty-seven years ago; afterwards he removed to the market town of Newcastle Emllyn, from which centre he carried on a large practice in the surrounding districts of Cardiganshire and Carmarthenshire. He was medical officer of health for Newcastle Emllyn urban district and Llandyssul rural district, and was also public vaccinator and certifying factory surgeon. He took an active part in the public work of the district, and was a justice of the peace for the counties of Carmarthen and Cardigan. He was a member of the British Medical Association, and had recently vacated the office of chairman of the South-West Wales Division.

Dr. Powell leaves a widow, a daughter, and a son, who is a member of the medical profession. The interment, which took place on October 25th at Twrgwyn, near Rhydlewis, was largely attended. Among those present was Colonel Lynn Thomas, C.B., C.M.G., who was a pupil of Dr. Powell's at Rhydlewis.

Dr. Joshua Powell was a fine specimen of the country practitioner, concealing under a somewhat rough exterior not only a kindness which endeared him to his patients and all the countryside, but also a sound practical knowledge of medicine and surgery, which he took care to keep fresh by constant reading of the newest books, preferring those which dealt with the principles of physiology and pathology. Goitre is very common in that part of Wales, and it was characteristic of Dr. Powell that one of the latest books he read was Major McCarrison's masterly volume on that bewildering subject.

Universities and Colleges.

UNIVERSITY OF OXFORD.

At a congregation held on October 18th the following medical degree was conferred:

M.B.—Samuel C. Varley.

UNIVERSITY OF CAMBRIDGE.

At a congregation held on October 18th, the Vice-Chancellor (Dr. A. E. Shipley) presiding, the following medical degrees were conferred:

M.D.—P. Stocks.

M.B., B.C.—K. B. Dickson, R. Francis-Jones.

UNIVERSITY OF ABERDEEN.

The General Council met on October 13th, when it was agreed to request the Secretary for Scotland to make an order continuing in office the four retiring assessors, one of whom is Colonel Scott Riddell, for another year, and empowering the court to deal with any casual vacancies. A report from the subcommittee of the Business Committee, suggesting certain alterations in the status of lecturers and assistants, and providing for their representation on the governing body, was remitted to the committee, as was also a report recommending the establishment of a Faculty of Commerce, after the principal had suggested that the people of Aberdeen, who profited so much from fisheries, should establish a fisheries lectureship in the University.

ROYAL COLLEGE OF SURGEONS OF EDINBURGH.

The following office-bearers have been elected for the ensuing year:—President: R. McKenzie Johnston. Vice-President and Representative on the General Medical Council: James W. B. Hodsdon. Secretary and Treasurer: George Mackay. Concener of Museum Committee: Charles W. Cathcart. Librarian: Harold J. Stiles.

The following gentlemen having passed the requisite examinations have been admitted Fellows: H. H. Christie, J. B. Leather, R. Parsons, M. C. Pruitt, H. A. Rippiner, D. Welsh.

SOCIETY OF APOTHECARIES OF LONDON.

The following candidates have been approved in the subjects indicated:

SURGERY.—*E. F. Deacon, *E. A. Leak, *I. Liberman.

MEDICINE.—*J. L. D. Buxton, *E. F. Deacon, *A. Magill, J. S. Matthews, *G. L. Mitchell, *J. H. Tighe.

FORENSIC MEDICINE.—J. L. D. Buxton, O. Halstead, J. S. Matthews, J. H. Tighe.

MIDWIFERY.—G. H. Fitzgerald, O. Halstead, S. G. Mohamed, S. Robinson, G. E. Spero, T. C. Stephen.

* Section I.

† Section II.

The diploma of the society was granted to Messrs. J. L. D. Buxton, E. F. Deacon, I. Liberman, and J. S. Matthews.

The Services.

EXCHANGE.

OFFICER R.A.M.C. serving with C.C.S. France desires exchange to hospital at home.—Address, No. 3650, BRITISH MEDICAL JOURNAL Office, 429, Strand, W.C.2.

Medical News.

SIX beds for the treatment of Bright's disease have been endowed in University College Hospital by Sir Lucas and Lady Ralli in memory of their son, Captain Leo L. Ralli, A.S.C.

FOUNDER'S DAY at the National Hospital for the Paralysed and Epileptic, Queen Square, W.C., will be celebrated next Friday afternoon, when the civilian and military wards will be open for inspection from 3 to 6 p.m.

DEMONSTRATIONS of specimens of inflammation and gunshot injuries in the Museum of the Royal College of Surgeons of England will be given by Professor S. G. Shattock, F.R.S., on Mondays, November 5th, 12th, and 19th, at 5 p.m.

THE first meeting of the Röntgen Society for the session will be held on Tuesday, November 6th, at 8.15 p.m., at the Royal Society of Arts, when the president, Captain G. W. C. Kaye, D.Sc., will give an address on the part played by x rays in the war, and there will be an exhibition of apparatus.

IN reply to an inquiry by the Automobile Association, the Minister of Munitions has stated that so long as coal gas for motor vehicles is carried as at present, in bags at or slightly above atmospheric pressure and not compressed in steel cylinders, it is not considered that there is any need for restricting the use of coal gas for motor purposes. The Minister goes on to state that if motorists were to use coal gas on any considerable scale it might become necessary at some future time to impose certain restrictions.

THE arrangements of the Royal Institute of Public Health for discussions and lectures before Christmas include the Harben lectures on the "Treatment of infected wounds," by Dr. Carrel, to be given on November 26th, 27th, and 28th, at 4 p.m., at the Institute, 37, Russell Square, London, W.C. Other lectures will be delivered on Wednesdays at the same place and hour, the first to be given by Major Waldorf Astor, M.P., on October 31st, on "Health problems and a State Ministry of Health."

THE mission sent to France by the Rockefeller Foundation to assist in combating the threatened increase of tuberculosis has decided to work in three sections under the general direction of Dr. Farrand. The first section will establish in one of the arrondissements of Paris and in certain large provincial towns a complete antituberculosis organization consisting of dispensaries, clinics, and laboratories, with provision for domiciliary attendance. This section will be directed by Dr. Miller. A second section, under Dr. Charles White, will undertake the distribution of help in kind. A third section, under Professor Gunn, will be concerned with the education of the public; it has already commenced to organize travelling exhibitions, meetings, and cinematograph displays.

THE trial of Dr. George Harry Bishop, B. G. Grantway, and J. Trichter, for conspiracy to defeat the provisions of the Military Service Acts was concluded before Mr. Justice Shearman, at the Central Criminal Court, on October 20th, after a hearing which lasted several days. The allegation was that a drug had been supplied, in the form of pills, to Samuel Augustus Frank with intent to render him, or to induce the belief that he was, permanently unfit for service. Evidence given as to the analysis of the pills showed that they contained dried thyroid gland. The jury, after an hour's deliberation, found each of the prisoners guilty. The judge, in passing sentence, intimated that there was a point of law for the Court of Criminal Appeal. He sentenced Dr. Bishop and Grantway each to twelve months', and Trichter to three months' imprisonment.

AT the monthly meeting of the Staffordshire Insurance Committee it was reported that the Panel Committee had asked the Committee to support it in making representations to the Commissioners that steps should be taken to secure that panel practitioners should be supplied with petrol at pre-war rates. This had been considered by the Medical Benefit Subcommittee, which recommended the Committee to support the application. Exception was taken to the recommendation by several members of the Committee, and it was urged that the doctors who kept a horse conveyance might just as well ask for horse food at

pre-war cost. The recommendation was also opposed by a medical member of the Committee, who thought the correct way was for the doctors to organize for an increase in remuneration. In the end the matter was referred back to the subcommittee.

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.2, on receipt of proof.

The telegraphic addresses of the BRITISH MEDICAL ASSOCIATION and JOURNAL are:

1. EDITOR of the BRITISH MEDICAL JOURNAL, *Aitology, 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.
- The address of the Central Medical War Committee for England and Wales is 429, Strand, London, W.C.2; that of the Reference Committee of the Royal Colleges in London is the Examination Hall, 8, Queen Square, Bloomsbury, W.C.1; and that of the Scottish Medical Service Emergency Committee is Royal College of Physicians, Edinburgh.

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.

QUERIES.

E. P. D. desires to hear of a family with children, near London, which would receive a mild case of cretinism in a boy aged 7, with his nurse.

LETTERS, NOTES, ETC.

TETANUS BACILLI IN COURT PLASTER.

SIR JAMES BARR informs us that a good many years ago he ascertained that many specimens of gelatine contained the tetanus bacillus. As gelatine is used in the making of court plaster, the risk of using this old-fashioned remedy must be recognized.

TREATMENT OF VINCENT'S ANGINA.

J. R. W. writes to endorse Dr. Percy Newell's statement (October 13th, p. 502) that the iodine treatment of Vincent's angina is the best. I have, "J. R. W." writes, never yet seen it fail in any of the cases I had under my care in an infectious hospital in France. The cases were kept in a separate ward, and the treatment was discontinued when there were no traces of the spirilla; it seldom took more than a week to get the desired result.

THYROID GLAND DOSAGE.

MR. W. H. MARTINDALE, Ph.D. (10, New Cavendish Street, London, W.), writes, with reference to Dr. Carver's note in the JOURNAL of October 20th, p. 515, to express the opinion that the name "thyroid extract" is unfortunate, and has apparently led some to think that the prescriber intends a dose of equivalent amount of fresh thyroid gland substance. The fresh gland basis ought also, he considers, to be abolished as unsound therapeutically and commercially. He thinks it regrettable that the *British Pharmacopoeia* provides no standard for dried thyroid gland. Though it may be true that the iodine content does not adequately represent the potency of the gland, at the present time there is no other known constituent which could form the basis of assay, and he suggests that the medical man should prescribe dry thyroid gland standardized to 0.2 per cent. organic iodine content. He concludes his note as follows: "The organic iodine content in commercial samples of *thyroideum siccum* (B.P.) may vary from 0.029 to 0.5 per cent. The whole question of standardization of thyroid preparations is thoroughly sifted in the *Extra Pharmacopoeia*, vol. ii, p. 133 et seq., and a simple process of assay is provided. May I add that in your columns, June, 1913, p. 1278, you remarked: 'Standardization in accordance with the amount of dry combined iodine appears to be a wise course.'"

SCALE OF CHARGES FOR ADVERTISEMENTS IN THE BRITISH MEDICAL JOURNAL.

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