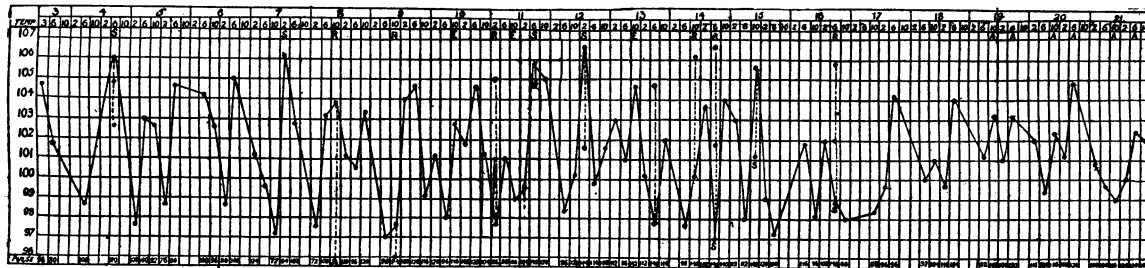


Memoranda: MEDICAL, SURGICAL, OBSTETRICAL.

A CASE OF TREVES'S MASKED APPENDIX.

The following case is worth publishing for two reasons—first, because the patient recovered from a severe portal pyaemia, and secondly, because every possible source of primary infection was very carefully gone into without throwing any light on the cause of his disease:

The patient, an engineman R.N.R.T., aged 39, was admitted to hospital from a trawler on October 3rd, 1917, giving a history of having been ill for forty-eight hours with headache and severe shivering fits. On admission there was a slight icteric tinge in the conjunctiva, and the liver and spleen were a little enlarged. A suppurating superficial wound of middle and ring finger of right hand, with fracture of first phalanx of ring finger, had been caused by the chafing of a wire rope. No history was obtained of malaria or any previous illness. There were no abnormal physical signs in the heart or lungs, and no history of appendicitis could be elicited. A diagnosis of portal pyaemia was made, but the *fons et origo* of the condition could not be discovered. The four-hourly temperature chart (of which a portion only can be reproduced) showed a series of severe rigors. The patient's heart muscle soon began to deteriorate, and his



S=Sponged. R=Rigor. E=Eusol, intravenously. A=Antistreptococcic serum.

dependent parts became waterlogged, causing sloughing of the scrotum and perineum, and producing a perineal urinary fistula, through which all his urine escaped.

The fractured phalanx showed no attempt at union, and the patient's vitality was so lowered that his condition was many times considered to be hopeless. Intravenous injections of 100 c.cm. of eusol were given on October 10th, 11th, 12th, and 13th, and two 40 c.cm. doses of antistreptococcic serum were given daily from October 19th to 29th inclusive, but neither seemed to have the smallest effect. Very gradually the patient seemed to wear down his disease and slowly returned to convalescence. His appetite had remained excellent throughout.

As soon as the denuded surfaces showed signs of the appearance of healthy granulations, a plastic operation was performed to close his urinary fistula and provide covering for his testes, and at the same time good union took place in his fractured phalanx, after weeks of no attempt at union.

On February 7th, 1918, when quite convalescent and about, the patient developed a typical attack of appendicitis. At the operation a matted appendix was found densely bound down with old adhesions. He was discharged to duty on March 10th, 1918.

He always denied having any pain in his abdomen, and certainly allowed deep abdominal pressure with the examining hands all over his abdomen without experiencing even discomfort, to say nothing of pain, until he developed his attack of appendicitis, when well of his pyaemia.

F. DALTON,

Royal Naval Hospital, Portland.

Surgeon Commander, R.N.

A CASE OF SUDDEN DEATH FROM ELECTRICITY. DEATH from an electric discharge is due to the actual current passing through the body. The voltage in most recorded fatal cases is very high, and often there have been circumstances which would lessen the usually high resistance of the body, and so increase the amount of current electricity passing through the tissues, such as wet clothing or, more especially, moisture of the skin. In the following case the pressure was 250 volts (alternating current), the maximum allowed in dwelling-houses, etc., by the Board of Trade regulations.

On April 9th, 1919, whilst I was a medical officer in a military hospital, I was called to see F. H., a private in the Royal Engineers, employed in the engine house of the hospital. The chief engineer, who had called me out, told me on our way to the engine house that H. had been using a portable electric

hand lamp which suddenly went out; the lamp was connected to the ordinary lighting wires. The man removed a small piece of the insulation, leaving one wire exposed. He was seen to fall suddenly and lie still. The current was shut off promptly and the man removed to the open air. The engineer stated that as he left to get a medical officer, H. was of a "bad colour and gasping for breath."

Ten to fifteen minutes must have elapsed before my arrival, when I found H. lying on his back in the open with his clothing well loosened. His face and ears were a dusky bluish colour. The heart sounds could not be heard; the pupils were equal but widely dilated, and no sign of life was apparent. The body seemed to have cooled a little. Artificial respiration was tried in vain. I believe death was practically instantaneous. A thorough examination of the body later failed to show any marks except a small raised thickening on the inner side of the left middle finger near the tip: it bore the imprint of the wire, and was brownish in colour, but it did not smell of burning. There were no marks of any sort on the clothing.

The deceased was a powerfully built young man without any history or evidences of heart trouble. He had been playing football about an hour before, but his army shirt and his hands were free from perceptible perspiration. He was wearing the ordinary army ammunition boots, shod with iron heel-plates and nails, and at the moment of the accident he was standing on an iron grating. The fuse in the distribution box did not give out, as only one of the wires had been completely exposed.

It is worthy of note that the stated voltage of an alternating current is only the mean of a rhythmical rise and

fall, so that in this case the pressure could have risen to a maximum of 260 volts. Electricians are of opinion that 250 volts alternating current are more dangerous than 500 volts continuous current.

Aberdeen.

A. G. B. DUNCAN, M.D. Aberd.

A CASE OF PALATAL PARALYSIS FOLLOWING INFLUENZA.

The following case of palatal paralysis, which occurred during the November epidemic, is worth recording, as it is difficult to dissociate it from what was apparently a straightforward case of influenza.

A girl aged 6 years had an attack diagnosed as influenza in November, 1918. It seems from the mother's description to have been only moderately severe, the fever lasting about four days. There was some general catarrh, cough, and furred tongue. At about the same time the whole household was afflicted with the same disease. A little more than two weeks after the fever the child began to speak with a nasal voice, and a week later still was brought to see me at the Children's Hospital in Harrow Road. I had often seen her before, as she was a delicate child and had attended with various ailments, so that I recognized immediately the alteration in the voice; it was, in fact, the typical nasal voice of palatal paralysis. The palate was found to be immobile. The fauces were quite clean. The pupils were equal and reacted well. The right knee-jerk was completely absent, the left knee-jerk feeble. The condition cleared up in about two months, and the voice is now normal.

Peripheral neuritis is recognized as a sequel of influenza, but is, I believe, rarely located in the palate. The obvious objection to the diagnosis of influenzal paralysis is that there is no real proof that the feverish attack was not diphtheria. This objection would have been difficult to meet had the case been isolated, although the symptoms and course did not sound very like those of diphtheria; but since all the members of the household were having influenza at about the same time, it at any rate comes within the bounds of possibility that the palatal paralysis was produced by the influenza toxin.

London, W.

HAZEL H. CHODAK, M.D., M.R.C.P.

HONOURS.

MENTIONED FOR WAR SERVICES.

THE names of the following medical officers have been brought to the notice of the Secretary of State for War for valuable services rendered in connexion with the war:

Department of the Under Secretary of State for War.

Colonel L. K. Harrison, 5th Northern General Hospital R.A.M.C.(T.F.).

Colonel U. Matthews, London Vol. R.A.M.C.

Lieut.-Colonel J. G. Yolland, Kent Vol. R.A.M.C.

Major J. Lytle, Shropshire Vol. R.A.M.C.

Department of the Chief of the Imperial General Staff.

Captain J. P. Kinloch, R.A.M.C.(T.F.).

Department of the Adjutant-General to the Forces.

Lieut.-Colonel H. A. Williams, D.S.O., M.M., I.M.S.

Majors: G. N. Anderson, E. L. D. Dewdney, and J. H. Dixon, R.A.M.C.(T.F.), J. Fairbairn, R.A.M.C.

Temporary Majors: A. S. G. Bell, L. E. Lanyon-Owen, R. T. Meadows, P. J. A. Seccombe, T. Walcott, and A. W. Wilcox, R.A.M.C.

Captains: E. B. Allnutt, M.C., H. F. Bellamy, and L. C. Hayes, R.A.M.C., C. A. Laubach, M.C., U.S.A., A. B. Pettigrew, R.A.M.C.(T.F.).

Temporary Captains (acting Majors): W. A. Clayton, H. McIntyre, and H. H. O'Heffernan, R.A.M.C.

Temporary Captains: W. G. E. Allen, I. M. Byers, H. B. Emerson, P. R. Eskell, J. H. Glover, S. W. Green, W. R. G. Hamilton, J. G. Heath, T. Heywood, W. P. Jones, F. Jubb, H. A. Lane, J. C. Lavertine, J. M. Lazenby, G. W. P. Maitland, J. A. Quin, R. E. Smith, H. G. Steel, and L. H. Walsh, R.A.M.C.

Department of the Quartermaster-General to the Forces.

Captain S. C. Wyatt, R.A.M.C.

Temporary Lieutenant (acting Captain) J. L. Wright, R.A.M.C.

Aldershot Command.

Lieut.-Colonel W. Turner, C.M.G., R.A.M.C.

Temporary Majors: T. W. Eden, R.A.M.C.; T. Rankin, Special List, attached R.A.M.C.

Captain (acting Lieut.-Colonel) A. G. Wells, D.S.O., R.A.M.C. Temporary Captain A. D. Ball, Special List, attached R.A.M.C.

Eastern Command.

Colonels: C. R. Elliott, R.A.M.C.(R.P.), G. T. Goggin, A.M.S.(R.P.), A. D. Sharp, C.B., C.M.G., A.M.S.(T.F.).

Lieut.-Colonels: T. Archer, R.A.M.C., G. E. Wherry, R.A.M.C.(T.F.).

Temporary Lieut.-Colonel L. W. Rolleston, R.A.M.C.

Majors: G. F. Alexander, R.A.M.C., W. Patterson, V.D., R.A.M.C.(T.F.) (Lieut.-Colonel T.F. Reserve).

Temporary Majors: W. A. Chapple, H. Irving, W. F. Jones, A. Neve, A. O'Neill, and E. Swainston, R.A.M.C.

Captains (acting Majors): A. J. Gibson, L. J. E. McHugh, E. W. Matthews, W. Redpath, and A. E. Ridsdale, R.A.M.C.(T.F.).

Temporary Captains (acting Majors): J. V. Bates, M.C., A. E. Marsack, G. A. Skinner, and A. W. Tabuteau, R.A.M.C.

Captains: C. N. Atlee, H. J. Blackler, C. Clifford, and A. K. MacLachan, R.A.M.C.(T.F.); T. M. Savage, R.A.M.C.

Temporary Captains: H. E. Batten, R. L. Bell, and J. B. Dalton, R.A.M.C., L. Dinnis, Special List, attached R.A.M.C., J. W. Edington, G. D. Gripper, H. A. Hancock, H. Johnston, W. Kirk, W. E. Passmore, F. J. Rawlinson, J. Renwick, and M. E. A. Wallis, R.A.M.C.

Northern Command.

Colonels: A. Connell and A. E. L. Wear, C.M.G., R.A.M.C.(T.F.); Lieut.-Colonel (acting Colonel) E. V. Gostling, D.S.O., R.A.M.C.(T.F.).

Lieut.-Colonel and Brevet Colonel H. L. Battersby, R.A.M.C.(R.P.).

Lieut.-Colonels: A. G. Barrs, T. Beattie, and W. M. Gabriel, V.D., R.A.M.C.(T.F.), F. Harvey, R.A.M.C., W. B. Mackay, C.M.G., T.D., R.A.M.C.(T.F.), A. Martin, R.A.M.C., W. Murray, R.F.A.(T.F.), attached R.A.M.C., S. Nesfield, T.D., R.A.M.C.(T.F.), J. A. Wait, T.D., R.G.A.(T.F.), attached R.A.M.C., G. H. Younge, R.A.M.C.(R.P.).

Temporary Lieut.-Colonels: J. J. G. Blandford, E. G. Coward, H. H. Curgrave, A. Russell, and W. Scatterry, R.A.M.C.

Major and Brevet Lieut.-Colonel J. W. Watson, R.A.M.C.(T.F.).

Majors (acting Lieut.-Colonels): H. E. J. A. Howley, R.A.M.C., J. K. Jamieson, W. H. M. Telling, and W. Thompson, R.A.M.C.(T.F.).

Majors: G. Ashton, R.A.M.C.(T.F.), R. H. Clement, R.A.M.C.(R.P.), J. A. Coupland, H. L. de Legh, E. F. Finch, F. S. Genney, A. R. Hallam, W. W. Jones, W. M. Mackay, J. B. McBride, S. Newfield, S. W. Plummer, H. A. Rudyard, T.D., G. A. C. Shipman, J. D. Slight, E. C. Stack, W. E. F. Tinley, C. B. Turner, and A. G. Yates, R.A.M.C.(T.F.).

Temporary Majors: H. S. Brander, M.C., C. D'O. Grange, and T. E. Holmes, R.A.M.C., F. R. Lucas, R.A.M.C. (Major 9th Battalion Royal Scots, T.F.), J. M. Macmillan, H. D. Macphail, J. M. Mathieson, J. Phillips, A. Robertson, J. G. Rowell, T. C. Sqaunce, R. H. Trotter, W. H. Whitehouse, and J. C. Wright, R.A.M.C.

Captain (temporary Major) G. S. Simpson, R.A.M.C.(T.F.).

Captains (acting Majors): L. R. Braithwaite, R.A.M.C.(T.F.), J. Gossip, R.A.M.C.(S.R.), A. Griffith, W. A. Robertson, and C. W. Vining, R.A.M.C.(T.F.).

Temporary Captains (acting Majors): B. Cox, J. McF. Donnan, H. G. Drake-Brockman, J. Maxwell, and J. P. Musson, R.A.M.C.

Captains: G. P. Anning, J. le F. C. Burrow, W. J. Gray, G. C. Hayes, G. S. Lewis, A. H. Lowe, J. W. Malim, H. Mason, J. P. Matthews, A. Miller, A. Richardson, S. Thompson, and C. Tweedy, R.A.M.C.(T.F.).

Temporary Captains: J. Cameron, Special List, attached R.A.M.C., J. J. Healy, H. Keighley, H. A. Mahony, E. Montgomery, R. Park, and P. L. Pollard, R.A.M.C., B. B. Samuel, General List, attached R.A.M.C., W. C. Sharpe, R. S. Snowie, R. E. Walker, J. B. Whitfield, and T. L. Wormald, R.A.M.C.

Scottish Command.

Major-General J. B. Wilson, C.B., C.M.G., A.M.S.

Colonel E. Butt, A.M.S.(R.P.).

Lieut.-Colonels: J. B. Jamieson, T.D., A. Mackintosh, J. Mill, V.D., and A. D. Moffat, T.D., R.A.M.C.(T.F.).

Temporary hon. Lieut.-Colonel H. Chaffer, R.A.M.C.

Temporary Lieut.-Colonel H. C. Marr, R.A.M.C.

Major and Brevet Lieut.-Colonel E. S. Forde, R.A.M.C.(T.F.) (Major 5th Battalion K.O.S.B.(T.F.)).

Majors: J. W. B. Hodsdon, A. MacGillivray, and W. J. Mackinnon, T.D., R.A.M.C.(T.F.).

Temporary hon. Major A. MacD. Westwater, R.A.M.C.

Captain (acting Lieut.-Colonel) W. Brown, R.A.M.C.

Captain (temporary Major) G. N. Anderson, R.A.M.C.(T.F.).

Captain (acting Major) A. A. McWhan, R.A.M.C.(T.F.).

Temporary Captain (acting Major) D. J. Glen, R.A.M.C.

Captains: W. C. Davidson, R.A.M.C.(S.R.), J. C. McKenzie, R.A.M.C.(T.F.).

Temporary Captain A. Campbell, R.A.M.C.

Southern Command.

Colonel and honorary Major-General W. F. Stevenson, C.B., K.H.S., R.A.M.C.

Colonels: A. W. Bewley, C.M.G., R.A.M.C., C. H. Melville, C.M.G., A.M.S.

Lieut.-Colonels: W. T. Brooks, R.A.M.C.(T.F.), W. G. Clements, R.A.M.C., W. Collier and G. W. Craig, R.A.M.C.(T.F.), G. H. Goddard, D.S.O., and E. P. Hewitt, R.A.M.C., C. W. S. Magrath and A. E. Master, R.A.M.C., W. A. Mawson, R.A.M.C.(I.M.S.), E. G. Peck, D.S.O., T.D., R.A.M.C.(T.F.).

Temporary Lieut.-Colonel A. C. Sufern, R.A.M.C. Major and Brevet Lieut.-Colonel (acting Lieut.-Colonel) J. E. H. Sawyer, R.A.M.C.(T.F.).

Majors: G. S. Abram, E. C. Bevers, E. J. Davies-Taylor, and A. G. Gibson, R.A.M.C.(T.F.), A. E. Milner, R. of O., R.A.M.C., W. J. Orr, J. Orton, and W. P. Purvis, R.A.M.C.(T.F.), C. E. G. Stalkart, R. of O., R.A.M.C., E. G. Stocker, and P. McK. Terry, R.A.M.C.(T.F.), E. C. Whitehead, R.A.M.C.

Temporary Majors: G. E. MacLeod, E. M. J. O'Farrell, and E. W. Witham, R.A.M.C.

Captain and Brevet Major J. L. Joyce, R.A.M.C.(T.F.).

Temporary Captain (acting Lieut.-Colonel) C. J. West, R.A.M.C.

Captains (acting Majors): C. W. J. Brasher, A. Campbell, and G. P. D. Hawker, R.A.M.C.(T.F.).

Temporary Captains (acting Majors): N. Dunn, W. Martin, H. E. Rawlence, J. A. W. Watts, and W. A. Wheeldon, R.A.M.C.

Captains: F. Clarke, R.A.M.C.(T.F.), J. M. Courtney, R.A.M.C.(S.R.), W. J. Foster, A. Gregor, G. H. R. Holden, S. Jones, G. D. Kettlewell, H. R. Parsloe, T. S. Pettitt, E. W. S. Rowland, W. A. Stokes, and J. W. Stretton, R.A.M.C.(T.F.).

Temporary Captains: M. Ashley, H. H. Butcher, E. K. Campbell, H. G. Carlisle, T. H. R. Crowle, C. E. Fenn, E. L. Z. Fickling, J. C. Fox, K. Fraser, J. C. Glen, A. F. Hewat, E. Huntley, W. M. M. Jackson, H. Joslen, E. L. Livingstone-Learmouth, G. E. Lockyer, J. N. Martin, M.B.E., H. W. Pigeon, G. Y. Richardson, C. H. L. Rixon, E. A. Shirvell, A. G. Welsford, and S. Wyborn, R.A.M.C.

Lieutenant (temporary Captain, acting Major) R. G. Oram, 9th Battalion London Regiment, attached R.A.M.C.

Lieutenant F. J. Babb, Dorset R.A.M.C.(Volunteers).

Western Command.

Colonels: C. Averill, V.D., and W. Coates, C.B., V.D., R.A.M.C.(T.F.).

Lieut.-Colonel and honorary Surgeon-Colonel D. Hepburn, C.M.G., V.D., R.A.M.C.(T.F.).

Lieut.-Colonels: J. H. P. Graham, R.A.M.C.(S.R.) (honorary Lieutenant Indian Army), and G. A. Wright, R.A.M.C.(T.F.).

Temporary Lieut.-Colonels: E. Goodall, A. Lingard, and A. Simpson, R.A.M.C.

Majors: H. T. Jenkins, 6th Battalion Royal Welsh Fusiliers (T.F.), attached R.A.M.C., R. W. Murray, and F. T. Paul, R.A.M.C.(T.F.).

Temporary Major F. M. Rodgers, R.A.M.C. Captain (acting Major) J. Tait, R.A.M.C.(T.F.).

Temporary Captain (acting Major) A. J. H. Boyton, R.A.M.C. Captains: A. E. Hodgson and C. P. Lapage, R.A.M.C.(T.F.).

33rd Army Corps.

Majors: H. A. Howes, T.D., R.A.M.C.(T.F.) (Major 4th Battalion Lincolnshire Regiment T.F.), S. R. Matthews and D. J. Penney, T.D., R.A.M.C.(T.F.).

Captains (acting Majors): R. Armstrong and G. Raymond, R.A.M.C.(T.F.).
Temporary Captains: E. S. Cuthbert, R.A.M.C., attached 51st (Grad.) Battalion Royal Fusiliers, A. Grant and S. B. Hanbury, R.A.M.C.

Irish Command.

Lieut.-Colonels: J. B. Buchanan, M.C., R. of O., R.A.M.C., G. J. Coates, R.A.M.C., H. C. Donald, T.D., and H. Jones, R.A.M.C.(T.F.), J. P. J. Murphy, A. de C. Scanlan, C.M.G., and B. W. Somerville-Large, R.A.M.C.

Surgeon-Major G. W. Trouton, West Kent Yeomanry (T.F.).

Major E. T. Vint, R.A.M.C.(T.F.).

Temporary Majors: R. D'A. Irvine, R.A.M.C., A. K. Macdonald, Special List, attached R.A.M.C.

Temporary Captain (acting Lieut.-Colonel) J. D. O'D. Egan, R.A.M.C.

Temporary Captains (acting Majors): W. Law and D. Murphy, R.A.M.C.

Captain O. H. Blacklay, R.A.M.C.(T.F.).

Temporary Captains: I. A. Davidson and B. Ferrar, R.A.M.C., A. F. A. Howe, Special List, attached R.A.M.C., R. B. Hunt, T. Kirkwood, H. S. Laird, N. C. Patrick, C. B. Pearson, R. H. Scovell, and H. R. Wright, R.A.M.C.

Channel Islands.

Surgeon-Captain and honorary Surgeon-Major H. D. Bishop, R. Guernsey Artillery and Engineers Militia.

Miscellaneous.

Captain and Brevet Major C. W. Wirgman, R.A.M.C.(T.F.).

Ministry of Munitions.

Captain J. M. McQueen, R.A.M.C.(T.F.).

Temporary honorary Captain C. G. L. Wolf, R.A.M.C.

Dominion of Canada.

Captains (acting Majors): T. McC. Creighton and W. Ross, C.A.M.C.

Captains: E. A. Campbell and H. Coppinger, C.A.M.C.

Commonwealth of Australia.

Lieut.-Colonel (temporary Colonel) J. M. Y. Stewart, D.S.O., A.A.M.C.

Lieut.-Colonels L. O. Betts, O.B.E., G. A. W. J. Knight, H. S. Newland, D.S.O., G. Raffan, C. G. Shaw, D.S.O., J. W. Springthorpe, and H. C. Taylor-Young, A.A.M.C.

Majors (temporary Lieut.-Colonels): E. J. Brown, C. J. Wiley, and H. J. Williams, D.S.O., A.A.M.C.

Majors: T. L. Anderson, J. B. Bell, J. P. Fogarty, M.C., A. C. Fraser, H. A. C. Irving, H. O. Lethbridge, M.B.E., P. A. Maplestone, D.S.O., J. C. Mayo, H. H. McWilliams, and E. H. M. Stephen, A.A.M.C.

Captain (temporary Major) K. Russell, A.A.M.C.

Captains: W. R. Bailey, S. M. Cordeau, G. Finlay, F. R. Forster, R. L. Forsyth, A. Goode, A. Juett, E. McKenzie, and S. B. Thomas, A.A.M.C.

Dominion of New Zealand.

Colonel P. C. Fenwick, C.M.G., N.Z.M.C.

Lieut.-Colonel B. E. Myers, C.M.G., N.Z.M.C.

Majors: A. Hosking, T. McKibbin, O.B.E., and T. R. Ritchie, N.Z.M.C.

Captains: S. Allen, P. Chisholm, and A. T. McCaw, N.Z.M.C.

Union of South Africa.

Lieut.-Colonel C. H. van Zyl, S.A.M.C. (died).

Temporary Lieut.-Colonel J. H. Whitehead, D.S.O., S.A.M.C.

Captain D. MacK. MacRae, S.A.M.C.

Dominion of Newfoundland.

Major C. Macpherson, C.M.G., Newfoundland R.

Ceylon.

Captain (acting Major) P. W. Mathew, R.A.M.C.(S.R.).

Egypt.

Lieut.-Colonel (acting Colonel) C. Garner, C.B.E., R.A.M.C. (R.P.).

Gibraltar.

Temporary Captain W. O. Roberts, R.A.M.C.

Hong Kong.

Lieut.-Colonel G. B. Crisp, R.A.M.C.

Jamaica.

Major R. S. Turton, R.A.M.C.

Malta.

Surgeon-Majors: A. E. Mifsud and R. Randon, Royal Malta Artillery.

Temporary Majors: T. Mackenzie, V.D., and C. R. Nicholson, R.A.M.C.

D.C.M.

The Distinguished Conduct Medal has been awarded to 4th Class Assistant Surgeon D. M. Mackay, Indian Medical Department.

For the display of great courage and presence of mind at Medo, East Africa, on April 12th, 1918, when he repeatedly went out to collect wounded under heavy rifle and machine-gun fire. His services on this occasion were admirable.

Scotland.

ANNUAL MEETING OF THE INCORPORATED SANITARY ASSOCIATION OF SCOTLAND.

THE forty-fifth annual congress of the Incorporated Sanitary Association was held at Perth from September 3rd to 6th. This association is one which, without being distinctively medical, yet plays, and has played, a not unimportant part as a sort of auxiliary to the regular professional societies, more especially in the education of the laity in the proper appreciation of the meaning of the problems of hygiene, national and personal. For instance, in the recently published volume of *Transactions* (for 1918), the subjects dealt with are "Individual responsibility in sanitation," "A Ministry of Health," "Future developments in sanitary administration," "The State and pre-natal care," "Maternity and child welfare schemes," "Employment of children," and "The State and the health of the child." Furthermore, many medical men are members of the association. During this year's congress the subjects discussed were again admirably practical and all more or less in the eye of the nation, so to say. The proceedings were opened on the evening of September 3rd by an attractive and suggestive address by Professor J. Arthur Thomson of Aberdeen on "Health hints from Nature," and on the 4th the president (Mr. W. E. Whyte) referred to the possibilities bound up with the passing of the new Scottish Board of Health Act and of its successors, the Housing and Town Planning (Scotland) Act and the Acquisition of Land Act, legislative enactments which marked a welcome break away from the ever unsuccessful attempt to apply English statutes to Scottish conditions. The standard of a house of three apartments which had been set up showed a better appreciation of the requirements of healthy living in the land. Ex-Baillie Robert Russell of Paisley opened a discussion on maternity and child welfare schemes, and stated that all infantile mortality over 50 per 1,000 births was excessive; at the same time, he thought that town improvement schemes would do more good than clinics, maternity hospitals, and other palliative measures. Drs. F. Dittmar of Edinburgh, and William Robertson of Leith, dealt with various aspects of the question of venereal diseases in Scotland, and the latter pleaded for a full exposure of the truth about these dire scourges. Dr. T. F. Dewar, of the Local Government Board, Edinburgh, discussed in a critical spirit the present methods of disinfection; and Mr. Francis Braid, Kirkcaldy, spoke on the issue of certificates in connexion with the production and sale of milk. On Friday, September 5th, the subjects introduced before the Congress were water and drainage provision for housing schemes, tuberculosis expenditure and results (by Dr. James Crockett, Dr. Brown, and Dr. Ebenezer Duncan), the salvage of town refuse, the care of young children's teeth (by Mr. Samuel Dunn, L.D.S.), and new houses, their rents, and their tenants. In the course of discussion, Dr. Clark Trotter, the M.O.H. for Paisley, referred to the establishment of a clinic in that town for the care of children's teeth; it was known as the "greetin' meeting." The annual dinner, a smoking concert, and excursions in the neighbourhood constituted the lighter side of the association's activities.

Correspondence.

THE CULT OF INDIVIDUALISM.

SIR,—In recent issues of the medical press there have appeared references to yet another endeavour of certain members of our profession to bring about greater "union" through the formation of another body, to be known as the British Federation of Medical and Allied Societies. I trust that the importance of the subject just now will be accepted as the excuse for this lengthy communication, and that you will be able to throw open your journal to correspondence on the subject.

The Formation of Separate Bodies.

In 1914 an attempt was made to form a medical federation in consequence of the distrust of the Insurance Acts as likely to be interpreted by the regulations. This was quickly followed by the birth of the National Medical Union, the Medico-Political Union, and the Association

contracted septic tonsillitis, followed by septicaemia, which proved fatal. An athlete in his youth, he had always enjoyed the best of health, and the news of his sudden death came as a great shock to his friends. He endeared himself to all with whom he came in contact. He was singularly quiet and unassuming, and abhorred anything that savoured of advertisement. His sound knowledge and painstaking work gained him the confidence of those he served, while his kindness, courtesy, and sense of justice and fair play gained him the respect of his subordinates.

A colleague writes: Our profession and the community generally are the poorer for the death of William Angus. A man of sterling and transparent honesty and high purpose, he combined in a remarkable degree the qualities of the idealist and the man of action. The possessor of great executive ability and sound common sense, he impressed all with whom he came in contact by his breadth of vision and power of grasping the essentials of a situation. He was a man of few words, but those well chosen, cogent, and to the point. His clarity of expression is well exemplified in his admirable report, just published, on malaria in the Egyptian Expeditionary Force during 1918, a document of high scientific and historical importance. Of the quality of Angus's professional work it is impossible to speak too highly. All of it was done with energy and enthusiasm, and he would tackle the biggest and most difficult problems with the keenest possible zest and determination. In the academic sphere—as professor of public health in the University of Leeds—he was equally successful. He enjoyed to the full the confidence of his colleagues, and one felt that, in these days of change and reconstruction, Angus, the steady, wise, and clear-visioned, was the right man in the right place. Personally, William Angus was a most lovable man and a delightful companion, and it was undoubtedly in his home life, as husband and father, that he showed at his best. His death leaves a gap in the circle of his friends which it will be impossible to fill. To his wife and two little daughters goes out at this time the heartfelt sympathy of all their friends.

M. J. S.

WILLIAM SOLTAN ECCLES, M.R.C.S. ENG.

At the age of 76 there died on September 9th, at Upper Norwood, another member of an old medical family, W. Soltan Eccles. He was the son of the late John Henry Eccles, M.R.C.S., of Plymouth. He entered St. Bartholomew's Hospital in the sixties, was house-surgeon to the late Sir James Paget, and afterwards surgeon to the G.I.P. Railway in Bombay. Retiring from this post, he settled in practice in Upper Norwood, where he was succeeded by his younger son Dr. Annesley Eccles, his elder son Lieut.-Colonel W. McAdam Eccles being now Surgeon to St. Bartholomew's Hospital. Mr. Soltan Eccles was the first to use *ipecaquanha* in the treatment of dysentery, and while professor of hygiene in the Grant Medical College, Bombay, he was much interested in the treatment of tetanus by oxygen.

H.M.S. *Glowworm* was blown up accidentally on the Dvina river, North Russia, on August 27th, when three officers and eighteen men were killed, and a large number wounded. Among the former was Surgeon Lieutenant RICHARD MORTIMER ROWLAND THURSFIELD, R.N. He was educated at St. Bartholomew's Hospital, and at Cambridge, where he graduated as M.B. and B.C. in 1911, having previously taken the M.R.C.S. and L.R.C.P. Lond. in 1909. After filling the post of house-physician of Chesterfield Hospital, he entered the navy as surgeon on April 3rd, 1912.

A CASUALTY list published on August 25th contained the name of Lieutenant GEORGE HILTON MIDDLETON, R.A.M.C. (S.R.), killed in action, presumably on the Indian frontier, as most of the names in the list were those of Indian officers. He was educated at Edinburgh University, where he graduated as M.B. and Ch.B. in 1918, and took a commission as lieutenant in the Special Reserve of the R.A.M.C. on October 24th, 1918.

Medical News.

THE annual general meeting of the Medical Defence Union will be held in the Board Room of the Public Medical Service, East Bond Street, Leicester, on Thursday, September 18th, at 4 p.m. Medical practitioners who are not members of the Union are cordially invited by the council to attend this meeting. Those who intend to be present are asked to send their names to Dr. E. Lewis Lilley, 86, New Walk, Leicester.

DR. IDRIS D. EVANS of Cardiff has been appointed a medical assessor on the Pensions Appeal Tribunal.

THE old students' dinner of St. Thomas's Hospital will be held on Wednesday, October 1st, at 7.30 p.m. in the Connaught Rooms, Great Queen Street, W.C.2, with Sir George Makins, G.C.M.G., in the chair.

THE honorary staff of the Manchester Royal Infirmary will give a series of post-graduation lectures and demonstrations each Tuesday throughout the coming educational year, beginning on October 7th.

THE old students' dinner of St. Bartholomew's Hospital will be held at Princes Restaurant on Tuesday, September 30th, at 7.30 p.m., with Dr. W. S. A. Griffith in the chair. The honorary secretary is Sir C. Gordon Watson, 82, Harley Street.

THE lecture advertised for Monday, September 15th, in connexion with Mr. A. J. Walton's course in surgical dyspepsia at the London Hospital Medical College, will be held on the following Wednesday, September 17th, at the usual hour—namely, 4.30 p.m.

A COURSE of lectures for prospective tuberculosis officers, general practitioners, and others, will be given in the Tuberculosis Department of the Royal Institute of Public Health during October, November, and December, on Thursdays at 5 p.m. Particulars can be obtained from the Secretaries, 37, Russell Square, W.C.1.

AS we were able to announce a fortnight ago, the Fellowship of Medicine has decided to continue the emergency course it instituted in London last spring. It has arranged with the medical schools in London and other hospitals for an emergency post-graduation course of three months for qualified medical officers from the R.N., R.A.M.C., and R.A.F., from the Dominions and the United States and Allies. The dates and details are published each week in the *Bulletin* of the Fellowship, and full particulars can be obtained on application to the Secretary to the Fellowship, 1, Wimpole Street, London, W.1. The special lectures at the house of the Royal Society of Medicine will be resumed on September 15th at noon.

THREE post-graduation courses in tuberculosis will be given in Paris during the coming academic year under the direction of Drs. Bernard, Bezançon, Calmette, Kuss, Letulle, Rist, Sergeant, and Teissier. The courses will be of six weeks' duration, commencing on October 20th, 1919, April 15th and June 15th, 1920. They will be essentially practical in nature and will include pathology, bacteriology, physical diagnosis, x ray, laryngology, social welfare and dispensary administration. An opportunity will be given to work each morning in a dispensary or hospital under the guidance of the physicians. The course will be open to graduates in medicine who are citizens of France, allied and neutral countries. The Commission for the Prevention of Tuberculosis in France will grant subventions to a limited number of French physicians. Further details of the course may be obtained from Dr. E. Rist, 5 rue de Magdebourg, Paris.

THE nineteenth congress of the French Urological Association will be held in Paris on October 8th and following days. The question proposed for discussion is the treatment of non-tuberculous pyelo-nephritis in men. The Secretary-General is M. O. Pasteau, 13 avenue de Villars, Paris vii^e.

THE International Conference of Women Physicians, which is due to open in New York on Monday next, September 15th, will be attended by Dr. Mary Gordon (London) and Dr. Frances Stores Johnston (Edinburgh) from the United Kingdom. The conference will continue until October 25th.

DR. CHARLES ARTHUR OWEN OWENS, V.D., of Long Stratton, and Dr. Legge Pauley, of Pulham Market, have been placed on the Commission of the Peace for the county of Norfolk.

THE legislature of New Jersey has passed a bill making a medical certificate compulsory before marriage can be contracted in the State.

THE Medical Research Committee during the war issued a *Medical Supplement* to the Review of the Foreign Press by the General Staff of the War Office. This Supplement, which was found to be of considerable service, especially to medical men serving abroad, was discontinued last April. It is now being revived in somewhat different form, under the title of *Medical Science, Abstracts and Reviews*, and will be published monthly, commencing in October, at the price of 2s. per volume. The subjects comprised will be surgery, medicine, pathology and bacteriology, neurology, and radiology.

THE third interallied conference for the study of questions relating to war invalids will be held in Rome in October (12th to 17th). The programme includes artificial apparatus for crippled men; physical and functional re-education; help for the blind, deaf, and tuberculous; international legislation for war invalids, material and economic organizations (benefit societies, co-operative production, etc.), and pensions. An exposition of prostheses will be held in connexion with the conference.

THE annual meeting of the British Association for the Advancement of Science, interrupted for two years by the war, began at Bournemouth on Tuesday of this week and ends on Saturday. The presidential address by Sir Charles Parsons, as well as several of the opening papers by the sectional presidents, dealt largely with the part played by scientific workers during the war. The evolution of sound-locating instruments for the detection of submarines and of the position of enemy guns, directional wireless apparatus, and the development of our imperial resources in the past as well as in the future, were subjects touched upon by Sir Charles Parsons. Professor D. Noël Paton in the Physiological Section, in introducing his paper on "An aspect of protein metabolism," said that the research worker must not only have the overpowering desire for knowledge and the keen zest in its pursuit, but he must also have that coldly critical spirit enabling him to know if he was pursuing a reality or a phantasy. Professor A. D. Waller in the same section demonstrated a method of measuring emotional response by the movements of a light spot on a scale. Professor Arthur Keith in the Section of Anthropology introduced the idea that the endocrine glands, especially the pituitary, are the principal agents in determining the various racial characteristics.

At a meeting of the executive committee of the Medical Sickness and Assurance Society held on August 15th, when Dr. F. J. Allan was in the chair, it was reported that influenza had practically disappeared from the claims made. The new business continued to be large, but it was reported, on the other hand, that an increasing number of medical men were retiring from practice at a comparatively early age, a feature that had not been met with before; if it continued it would be necessary to obtain increased new business to maintain the membership. The claims were under the expectation for the month, but signs were not wanting that the strain on the older members during the last few years was beginning to show in nervous breakdowns, etc., necessitating long rest from all work. The society's sickness contract provides for payment for years if necessary, whereas under many policies the benefits only last a certain time. Over £310,000 has been paid in sickness claims since 1884. All particulars may be had from the Secretary, Medical Sickness and Accident Society, 300, High Holborn, W.C.1.

DURING 1918, 1,805 cases underwent antirabic treatment at the Pasteur Institute in Paris. Of these 5 died of hydrophobia, a mortality of 0.27 per cent. One of these 5 showed signs of hydrophobia during treatment, whilst another failed to attend regularly; the remaining 3 developed symptoms after the course of treatment, in one case as long as four months afterwards. All cases treated at the institute are put into three categories according as the biting animal is experimentally proved to have been rabid, verified as rabid after veterinary examination, or only suspected of rabies. Only one of the fatal cases belonged to this last category. From England there came 18 cases for treatment; none of these developed hydrophobia. In the last thirty years, out of 32,817 cases treated, the total mortality has been 92, or 0.28 per cent.

THE Housing Department of the Ministry of Health has issued standard specifications for cottages drafted so as to cover various alternatives, and therefore adaptable to suit the particular circumstances of each scheme.

THE Medical School of Washington University has received a donation of £1,000 to be used in the investigation of hypertrichiasis. The research will be chiefly in the fields of anthropology and heredity.

A PERMANENT board for the control of venereal diseases has recently been established in Spain by royal decree. It will study all the measures proposed by the Spanish Antivenereal League and report to the Government on the steps to be taken for combating these diseases. Dr. Martin Salazar, director of public health, has stated that it is proposed to create institutions after the English model for prompt diagnosis and treatment. Among the members of the board are several of the leading members of the medical profession, besides representatives of all classes of society in Spain.

Letters, Notes, and Answers.

ORIGINAL ARTICLES and LETTERS forwarded for publication are understood to be offered to the BRITISH MEDICAL JOURNAL alone unless the contrary be stated.

CORRESPONDENTS who wish notice to be taken of their communications should authenticate them with their names—of course not necessarily for publication.

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.

In order to avoid delay, it is particularly requested that ALL letters on the editorial business of the JOURNAL be addressed to the Editor at the Office of the JOURNAL.

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1. EDITOR of the BRITISH MEDICAL JOURNAL, *Attilology, 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 AND ANSWERS.

J. M. W. asks for information as to literature dealing with advanced thought elaborated from the general tenets of Darwin's *Descent of Man*. Modern theories are sought after as to the place in evolution of such structures as the appendix and the mammary gland in man.

HYPERIDROSIS.

"SUDOR" asks if any reader can suggest treatment for a patient (male), 30 years, in apparently perfect health, who suffers from excessive sweating (bilateral) of face and scalp on the slightest exertion, and even when at rest. Our correspondent has tried all the usual remedies—belladonna in full doses, etc.—but nothing seems to do any good.

INCOME TAX.

"QUAIN" has, from August 1st, given up general practice work and has taken a research appointment at £450 per annum; what is his position with regard to the three years' average?

* * (a) As from August 1st he ceases to be liable on the average profits of past years—notwithstanding the fact that fees for past work may still be received—and is liable on the emoluments of his present work, according to the amount accruing for the year of assessment; for example, taking the average profits for 1916, 1917, and 1918 to be £1,100, his liability for the year to April 5th, 1920, would be four-twelfths of £1,100 = £367, plus eight-twelfths of £450 = £300; total, £667. (b) It would appear that "Quain" probably has a title to repayment of tax for 1918-19 owing to the fall in profits due to employment of a locum for six months. Under Sec. 29 of the Finance Act of 1916, where the total actual income of a taxpayer is less by more than 10 per cent. than his assessed income, he is entitled to such repayment as will reduce the total tax paid to the tax on the total actual income. We suggest that "Quain" should write to the surveyor of taxes and ask for a copy of the form of claim used in appeals under Sec. 29 of the Finance Act, 1916.

LETTERS, NOTES, ETC.

WAR HONOURS.

"PERMANENT R.N.V.R." writes: I wonder if the profession is aware of the scurvy way the permanent R.N.V.R. doctors have been treated by the Admiralty in the matter of war honours? As a pre-war organization we were mobilized at one hour's notice and taken right away from our practices without any chance of even arranging for locums, mostly to the ruin of such practices. And the great majority of us have served away from our homes until peace arrived. We were not among the many fortunate medical war workers who were able to combine private practice with war duties. At the beginning of the war we were hailed by the authorities with honeyed words as "having saved the situation for the