

be taken; by friendly advice to those who are hiding their sufferings, either from an exaggerated sense of modesty, or from fear that they may be informed that they are suffering from cancer; by the delivering of lectures on right living and hygienic surroundings; by the teaching of what is meant by bodily cleanliness, etc., lives can be saved.

Time will not permit of my discussing the many ways in which the problem may be faced; these must be obvious to those who have studied the question. I would, however, like to point out that in the carrying out of these suggestions it is not my intention to interfere in the slightest degree with the excellent work which is being done by the Cancer Research Committee. Indeed, I think it quite within the bounds of possibility that, were proper instructions issued to nurses and welfare workers, they might be found useful in obtaining knowledge on many vexed points which would be found to be of the greatest possible help to those engaged in research work.

In the brief discussion that followed Dr. Hall-Edwards's paper, Dr. WILLIAM MITCHELL (honorary radiologist, Bradford Royal Infirmary) referred to a number of possible causes of cancer which might be eliminated by education of the public, and at the same time offered promising fields for research; he cited as an example circumcision and its consequent cleanliness in relation to cancer of the cervix uteri. He believed that Jewesses suffered less in this respect than any other class of married women. He doubted if pipe smoking had much to do with cancer of the lip or tongue. At all events, watertight compartments in specialism should not be maintained. Preventive medicine was no new thing; it was at least as old as Moses.

Memoranda :

MEDICAL, SURGICAL, OBSTETRICAL.

ECHINOCOCCUS OF THE HEART.

ALONG with Dr. Donald Fraser I had the opportunity recently of examining a case in which death was due to echinococcus of the heart. A young healthy man, aged 24, a carter by occupation, was brought into hospital in a moribund condition. He had been attending to his horse in the yard and suddenly collapsed; when we saw him he was comatose and had marked dyspnoea. He died in a few minutes from respiratory failure.

I found *post mortem* a large infarction of the base of the right lung. On opening the right ventricle of the heart the cavity was found to be full of cysts varying in size from a small pea to a marble. On closer examination a cavity containing these cysts was found in the wall of the right ventricle just under the endocardium near the apex. The cavity was about the size of a hen's egg. Microscopical examination confirmed the diagnosis of echinococcus disease.

The wall of the cavity had ruptured, the cysts passed out into the right ventricle and were carried into the branches of the pulmonary arteries, where several cysts were found.

DAVID HYND, M.B., Ch.B.Glas.,
House-Surgeon, Beckett Hospital and Dispensary,
Barnsley.

AN OVERDOSE OF HYPNOTICS.

THE following account of the effects of an overdose of the proprietary hypnotic and sedative dial (ciba) and of paraldehyde may be of interest. A fellow practitioner was called at 8.45 a.m. on July 1st to a woman, aged 44, who was stated to have taken an overdose of dial tablets and of paraldehyde.

He found the patient unconscious, with pupils dilated three-quarters, no conjunctival reflex, and with slow shallow respirations, pulse 68 and slack, and slight cyanosis. All attempts to rouse her by mechanical stimulation failed. The stomach was washed out with warm water, and an enema of black coffee given after washing out the rectum.

The sister in charge of the home where the incident occurred stated that the patient had taken eleven dial tablets (each containing $1\frac{1}{2}$ grains) and the contents of a bottle of paraldehyde mixture, but she did not know when they were taken. When

found unconscious she must have swallowed 18 grains of dial and $5\frac{1}{2}$ drachms of paraldehyde. For she had been given one dial tablet and a dose of paraldehyde the previous evening.

I saw the patient at 11.30 the same morning. She was then profoundly unconscious, but was of normal colour and had the general appearance of a person in a peaceful sleep. Mechanical stimulation failed to rouse her. The pulse rate was 88 and respirations 24, both of normal rhythm and volume. The pupils were inactive, and dilated three-quarters; there was no conjunctival reflex. A pharyngeal reflex was elicited by rather strong stimulation. All the muscles were flaccid. The stomach was again washed out, with 10 pints of normal saline, which were returned almost clear. Half a pint of the saline was left in the stomach. The black coffee enema had not been retained, so I ordered half a pint of normal saline to be given by the rectum. Caffeine sodium-salicylate 1 grain was ordered to be given hypodermically every four hours.

I saw the patient again at 3.30 p.m.; she was still unconscious and could not be roused; pulse 86, respirations 22. A catheter drew off 12 ounces of urine. A continuous rectal saline was started and a pint retained. At 6 p.m., when she was seen again, there was no change. Another pint of saline was given by the rectum and retained.

At 7.30 p.m. on the same day she began to rouse. She made aimless movements, perhaps trying to get up. Her facial expression was quite blank, she did not appear to hear anything, nor to feel the painful stimuli applied to try and rouse her more thoroughly. She made purposeful movements to avoid a tickling on the soles of her feet. During this time she made no sound and showed no signs of recognition. Later she relapsed into unconsciousness again. At 8 p.m. she defaecated, and at 8.30 p.m. a catheter drew off 30 ounces of urine. At midnight a further 12 ounces of urine were drawn off, and another pint of saline given by the rectum.

At 1.15 a.m. on July 2nd she roused again and became very restless. At 2 a.m. she recognized the nurse in charge of her. At 3.15 a.m. she passed 30 ounces of urine, and drank a cup of black coffee. At 6.30 a.m. she passed 15 ounces of urine. She was then quite herself again, and told the nurse that she had taken the drugs at about 7 a.m. on July 1st. She stated that she felt perfectly well, and had no nausea or headache or other pains. During the afternoon of July 2nd she ate well and looked well and at ease, as if nothing out of the ordinary had occurred, and her recovery was uneventful.

The copious administration of normal saline was designed to facilitate the kidney excretion.

Margate.

R. W. NICHOL.

ACUTE OEDEMA OF THE CERVIX DURING THE PUERPERIUM.

THE condition observed in the case here described is so unusual in my experience, after twenty-five years of obstetric work in general practice, that I venture to record it.

I was asked by a colleague to see a lady, aged 34, a 4-para, in consultation, on November 16th, 1923. The child had been born at 3 a.m. No vaginal examination had been made during the labour and the membranes ruptured whilst the medical attendant was cleaning up. The child was born and the placenta expressed naturally in about one hour after his arrival. About 9 a.m., whilst performing her patient's toilet, the nurse noticed an unusual swelling in the vagina. The previous confinements had been normal, and there was no history of prolapse. The child weighed $7\frac{1}{2}$ lb. I found a dark blue mass, about the size of an orange, dilating the orifice of the vulva; when it was touched the patient winced and complained of pain. Vaginal examination showed that the tumour was continuous with the anterior lip of the cervix; it had no pedicle. The uterus felt normal, was well contracted, and there was no history of haemorrhage. Except when touched, the tumour was giving no trouble, and the patient seemed very well otherwise. I suggested giving calcium lactate and leaving well alone.

The medical attendant informed me that the mass had disappeared in about twelve hours, and the nurse (a most intelligent woman, trained at the Rotunda) alleged that it could be almost seen to shrink. Two days later the anterior lip of the cervix was found a little thickened, and the cervix could be described as no more patulous than if the case had been normal.

I have only seen such a condition once before; it was in a woman on whom my chief (Professor Jardine) had allowed me to do craniotomy for hydrocephalus, in the Royal Maternity Hospital, Glasgow. In this case the tumour cleared up in a few hours, and I attributed it (wrongly no doubt) to operative interference.

The only fact which might have any bearing on the case now reported is that the patient had a severe attack of urticaria during her pregnancy. Any mechanical cause could be excluded in a labour so natural, and of short duration.

Speaking from memory, the only reference in English textbooks is in Munro Kerr's *Operative Midwifery*.

Whitworth, Rochdale.

T. J. L. FORBES.

THE LATE DR. T. D. LISTER.

DR. S. VERE PEARSON writes:

I knew T. D. Lister for over twenty years and esteemed him as one of the wisest and most genial of my friends. His death removes from our midst one of the most clear-sighted physicians of the day. He was a sound and clever clinician, but more remarkable was his extraordinary grasp of the great problems of medicine. His outlook upon the larger aspects of tuberculosis, for example, as they affected social hygiene, politics, and industrialism, etc., was always broad and his vision far-seeing. He was one of the first to emphasize the value and importance of demography. Years before the war he was advocating "defining the plague spots of the disease" by working out rates of mortality and morbidity for tuberculosis in different industries, factories, areas, etc. He recommended that the whole force of our artillery should be first directed against the districts or groups of workers which showed an excess above a fixed standard figure, which was to count as the "tuberculosis index." He levelled incisive and telling criticism against any opinions, however widely accepted, which he considered ill supported by good evidence, and he had much ability in expounding his views. His profound knowledge of the problems of life assurance was well recognized in many medical circles in England; but it extended far beyond these shores, for some of his writings on these subjects have been translated into many languages. His manifold and useful labours in connexion with public institutions and other associations were always carried through with a maximum of amiability and a minimum of advertisement of himself. The recitation of these activities, already given in the *BRITISH MEDICAL JOURNAL* of August 9th, p. 256, are an indication of their extent. The arduous work he did in this direction was always cheerfully conducted. It often brought him into contact with the fussy ones and the busy-bodies. He generally showed a placid tolerance of such people, though he occasionally gave vent to very caustic criticisms on the foibles and failings of some of the bureaucrats. Dr. Lister was a man who never stooped to anything petty. He studiously held aloof from all intrigues, wire-pulling, or cliquism, though sometimes this characteristic was disadvantageous to his preferment and material interests. Our heartfelt sympathy goes out to his wife and children in their great loss.

DR. GEORGE DUPPA COLLINS died on August 6th at his home in Broseley, Shropshire. He was educated at King's College Hospital, and obtained the M.R.C.S.Eng. diploma and the L.S.A. in 1878. After serving as house-surgeon at Shrewsbury Infirmary he commenced practice in Broseley about forty years ago. A charming personality combined with considerable professional ability soon resulted in a most extensive practice. About twenty years ago his heavy work affected his heart and he retired from practice. After a long rest he regained his health and spent some time in British East Africa. Returning to his home he entered fully into local affairs, becoming a magistrate, a town councillor, and a guardian, his tact and sound common sense proving of considerable service. When the war came Dr. Collins joined the Medical Recruiting Board at Shrewsbury, and daily used to motor there in all weathers. After the war he continued working on the Pensions Board. A week before he died he was taken suddenly ill at a Pensions Board at Shrewsbury with anginal symptoms. His condition was so serious that he was removed to the infirmary. On the day of his death he returned home and passed away quietly the same evening. It is interesting to note that having completely retired twenty years ago he should have died in harness. He leaves a son, Captain Edward Duppa Collins. A colleague, N. F. E., to whom we are indebted for the foregoing particulars, adds: Dr. Collins was a keen sportsman, shooting and fishing occupying most of his spare time, and it is to the writer a real sorrow that he will never fish again with his old friend.

Universities and Colleges.

UNIVERSITY OF LONDON.

DR. CHARLES BOLTON, F.R.S., has been appointed Examiner in Medicine for the remainder of the year 1924, vice Dr. J. Fawcett, resigned, and Mr. C. H. S. Frankau as Associate Examiner in Surgery for the same period, vice Mr. W. H. Clayton-Greene, resigned.

The following grants have been made out of the Thomas Smythe Hughes Medical Research Fund for 1924-25: (1) £100 to Mary F. L. Keene, M.B., B.S., and Evelyn E. Hower, D.Sc., for the continuation of their investigation of the human foetus, and particularly

for the payment of a section cutter for six months; (2) £20 to Dr. Harold M. Woodcock for the continuation of his study of blood digestion by tissue cells along histological lines; (3) £20 to Dr. Gerald Slot for a research on the normal iodide secretion.

The subject of the essay or dissertation for the Rogers Prize for 1926 is "The value of the various methods of investigating diseases of the pancreas."

It has been decided to institute, in accordance with the regulations on university titles, a University chair of physics, tenable at St. Bartholomew's Hospital Medical College.

UNIVERSITY COLLEGE HOSPITAL MEDICAL SCHOOL.

The Goldsmid Entrance Exhibitions for 1924 have been awarded to C. L. Owen, Trinity College, Cambridge, and Miss F. C. Kelly, University College, London.

ST. MARY'S HOSPITAL MEDICAL SCHOOL.

The University Scholarships have been awarded to T. C. Hunt, Magdalen College, Oxford, and D. N. Roeyn-Jones, Downing College, Cambridge.

Medical News.

THE Fellowship of Medicine and Post-Graduate Medical Association announces that on August 18th a three weeks' course in the common diseases of the nervous system will begin at the West End Hospital for Nervous Diseases, 73, Welbeck Street. The following courses will be held in September: a fortnight's intensive course in medicine, surgery, and the special and other departments at the Westminster Hospital; in dermatology at the Hospital for Diseases of the Skin, Blackfriars; in diseases of infants at the Infants Hospital, Vincent Square; in ophthalmology at the Royal Westminster Ophthalmic Hospital; and in psychological medicine at Bethlem Royal Hospital. Copies of the syllabus of these courses, with the *Bulletin* giving information of the clinical opportunities of the other London hospitals in association with the Fellowship of Medicine, may be had on application to the Secretary at No. 1, Wimpole Street, W.1.

A MONUMENT in honour of the late Professor Grasset, the well known neurologist of Montpellier, was recently unveiled at Lamalou-les-Bains.

THE Kent County Council, at its meeting on August 6th, decided unanimously to increase the salary of the county medical officer, Dr. Alfred Greenwood, from £1,400 to £1,600, without any application having been made by that officer.

COURSES of instruction for sanitary officers will be held at the Royal Sanitary Institute, commencing on September 24th, for health visitors and child welfare workers on September 29th, and for meat and food inspectors on October 3rd. The introductory lecture to these autumn courses will be delivered by Professor H. R. Kenwood, on Monday, September 22nd, at 5.30 p.m. The date fixed for "health week" is October 5th to 11th, and copies of the statement of the objects, aims, and procedure can be obtained from the secretary at the Institute, 90, Buckingham Palace Road, S.W.1.

A COURSE of lectures and practical instruction for the diplomas in psychological medicine granted by the Universities of Cambridge, London, Durham, etc., will be given at the Bethlem Royal Hospital, Lambeth Road, S.E.1, commencing on September 15th. The syllabus and further particulars can be obtained on application to the physician-superintendent.

THE winter session of the Middlesex Hospital Medical School will open on Wednesday, October 1st; Dr. Charles Porter will deliver an introductory address at 3 p.m. at the Queen's Hall on some aspects of preventive medicine, and the prizes will be distributed by Lord Birkenhead. The annual dinner will be held the same evening at 7.30 at the Hotel Cecil, when Mr. G. Gordon-Taylor will preside. Those desiring to be present at the dinner are requested to communicate with the secretary-superintendent at the hospital.

SPECIAL courses in dermatology and venereal diseases have been arranged at the St. Louis Hospital, Paris; the fee for each course is 150 francs. The course in dermatology will begin on October 3rd, and that in venereal diseases on November 5th. Both courses will include clinical and laboratory work as well as lectures, and will be held each afternoon, the mornings being free for work in the museum and hospital wards. Further information can be obtained from the secretary of the Faculty of Medicine, Rue de l'Ecole de Médecine, Paris.

THE annual dinner for past students of the London Hospital will be held at the Trocadero Restaurant on Wednesday, October 1st, at 7.30 for 8 o'clock. Particulars may be obtained from the honorary secretaries, Mr. E. C. Lindsay, C.B.E., 33, Wimpole Street, W.1., and Dr. Ashley Daly, 5, Seaford Court, 64, Portland Street, W.1.

THE annual dinner of past and present students of St. Mary's Hospital Medical School will be held at the Connaught Rooms, Great Queen Street, W.C., on Monday, October 6th, at 7 p.m.

ON August 8th, in connexion with the sixteenth international Esperanto Congress in Vienna, medical men of various nationalities held their annual meeting, which was conducted entirely in the international language. Dr. Sós, Vienna, presided, and papers were read by Dr. Austerlitz (Czecho-Slovakia) on what is lacking in medical education; Dr. Blassberg (Poland) on insulin therapy; Dr. Primmer (Great Britain) on serum therapy; and Dr. Sós (Austria) on pyorrhoea. Amongst those present was Mrs. Zamenhof, widow of Dr. Zamenhof, ophthalmologist and author of the international language.

A COURSE of bacteriology will be held at the Pasteur Institute, from January 5th to the beginning of April, 1925. As the accommodation for practical work is limited early application should be made by those desiring to attend. The fee will be 500 francs, payable at the commencement of the course. Lectures will be given by Professors Calmette, Levaditi, Mesnil, Weinberg, and Vallée, amongst others. Further information may be obtained from the Pasteur Institute, 25, Rue Dutot, Paris (15^e).

W. HEFFER AND SONS, LTD., Cambridge, announce for early publication *Practical Physical and Colloid Chemistry for Students of Biology and Medicine*, by Professor L. Michaelis, Berlin, translated from the second German edition by T. R. Parsons, M.A., B.Sc.

THE head office of the British Petroleum Company, Ltd., distributors of "B.P." petrol, has been moved from 22, Fenchurch Street, London, to the new building of the Anglo-Persian Oil Company, Ltd., Britannic House, Moorgate, E.C.2.

A DESCRIPTION of the Kitchener school of medicine in Khartoum was contributed to our columns on September 29th, 1923 (p. 581), by Dr. O. F. H. Atkey, the director of the medical department. In the Wembley Exhibition four photographs of the school are displayed in the bilharzia part of the Tropical Health Section in the Government Pavilion. The photographs give a good idea of the impressive exterior of the building, and of the chemical, biological, and physiological laboratories with the students at work.

WE are informed that the annual report for 1923 of the Chief Medical Officer of the Ministry of Health is now in the press, and it is hoped that publication will be made early next week. The report is in form similar to that of previous years, and contains vital statistics showing that the year under review was the healthiest on record. The chapters are devoted to a number of subjects concerned with personal and public health, including tuberculosis, maternity and child welfare, the insurance medical service, the Poor Law medical service, etc. Particular reference is also made to the remarkable decline in the mortality from typhoid during the last fifty years, the small-pox outbreaks, and human nutrition. The report, including four short appendixes, is 211 pages in length, and may be obtained either direct from H.M. Stationery Office, or through any bookseller, price 3s.

THE city of Canton, China, has lately given a tract of twenty acres, within two miles of the centre of the city, to the Canton Hospital, in recognition of services rendered to the municipality. It is hoped to erect a modern medical school and hospital on the site.

THE *Cronica Médico-Quirúrgica de la Habana* has devoted a special number to the proceedings of the sixth Latin-American Medical Congress of the Republic of Cuba, held at Habana in November, 1922. The principal subjects discussed were: bacillary dysentery in Cuba, prophylaxis of venereal disease, treatment of sterility by diathermy, treatment of the pulmonary complications of hydatid disease, and renal tumours.

MESSRS. NEWTON AND WRIGHT, LTD., 471, Hornsey Road, N.19, have issued a new price list of apparatus for radiology.

OF the thirteen original members of the Société de Neurologie of Paris, which was founded in 1900, only four survive—namely, Babinski, Pierre Marie, Meige, and Souques. The others were Gilles de la Tourette, Raymond, Brissaud, Dejerine, Ballet, Dupré, Parinaud, Joffroy, and Gombault.

ARRANGEMENTS are being made to combine in one building in Prague the headquarters of the Union of Czecho-Slovak physicians, the Society of Czech physicians, which is concerned with post-graduate instruction, and the library of Czech physicians. There will also be accommodation for the Association of Czech Medical Students and its library.

THE sixth Congress of the French Society of Orthopaedics will be held in Paris, under the presidency of Professor A. Broca, on October 10th. The subjects to be discussed are: spina bifida occulta, introduced by Dr. Mutel of Nancy; dropped shoulder, introduced by Dr. Paul Hallopeau of Paris; and metatarsalgia, by Dr. Maffée of Brussels.

Letters, Notes, and Answers.

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

THE telephone number of the BRITISH MEDICAL ASSOCIATION and BRITISH MEDICAL JOURNAL is Gerrard 2630 (Internal Exchange). The telegraphic addresses are:

EDITOR of the BRITISH MEDICAL JOURNAL, *Aitiology Westrand, London.*

FINANCIAL SECRETARY AND BUSINESS MANAGER (Advertisements, etc.), *Articulate Westrand, London.*

MEDICAL SECRETARY, *Mediscera Westrand, London.*
The address of the Irish Office of the British Medical Association is 16, South Frederick Street, Dublin (telegrams: *Bacillus, Dublin*; telephone 4737, Dublin), and of the Scottish Office, 6 Rutland Square, Edinburgh (telegrams: *Associate, Edinburgh*; telephone, 4361, Central).

QUERIES AND ANSWERS.

BEE STINGS.

"F. W. L." writes: I was called in to see a lady stung by a bee on the ring finger. The local reaction was much as usual, but the general reaction was such as to endanger life. The pulse was rapid and small, face and neck swollen and cyanosed, breathing obstructed by similar swelling of glottis and bronchioles. This came on a few minutes after the sting, but on a previous occasion the heart was apparently most affected, for she was unconscious within a minute. Wasp stings do not affect her unduly. Is there any way of producing immunity? As beekeepers soon get a large measure of immunity by repeated stings, this is evidently one way. Is there any firm which supplies graduated doses of bee virus, or is there any other proved method of providing immunity?

PULMONARY TUBERCULOSIS IN LATER LIFE.

"NATAL" replies as follows to "B.'s" request for advice, published in this column on June 14th, 1924 (p. 1078), regarding a patient from Western Canada, aged 57, of moderate means, suffering from pulmonary tuberculosis:

"The patient may not wish to see snow again; but to go from the beautiful scenery of Canada, to the dreadfully dull, treeless, waterless Karoo, where very little English is spoken, would be madness, taking everything into due consideration. In the event of death the wife and daughter would be stranded. This would only add to the number of real tragedies of the Karoo. The Highlands of Natal would be more suitable, and perhaps, according to the case, just inland from the coast (say 500 feet up). One must consider the whole family concerned. In Natal the language question can be neglected. 'B.' must consider the mental buoyancy of his case, both now and hereafter, from its clinical aspect. South Africa is at present suffering from depression, and we have our hosts of unemployed also. Coming from Canada 'B.'s' patient, the wife, and daughter, are probably workers, and all would therefore make themselves useful on a farm in, say, the Mooi River district of Natal, some 4,000 feet up. This is a beautiful country, peopled by some well-to-do English farmers, and with a glorious climate. Put a black mark against the Karoo."

INCOME TAX.

"X. Y. N. B." retired from a partnership on October 31st, 1922, retaining an appointment until April, 1923; he accounted for his liability for 1922-23 by paying on seven-twelfths of the Schedule D assessment and on the whole of the Schedule E assessment on the appointments. He has been assessed for 1923-24 in respect of the cash received by him for pre-October, 1922, bookings.

* * The basis of settlement of liability for 1922-23 is correct, but the assessment for 1923-24 is bad and should be discharged. Our correspondent is chargeable to tax in respect of professional earnings only for periods during which he was exercising his profession. The fact that the assessments were based on the amounts of cash received—on the implied assumption that those amounts were equivalent to the value of the respective year's bookings—does not alter the position as regards periods subsequent to October, 1922, in any way. The cash received by "X. Y. N. B." after that date represented receipts of capital so far as he was concerned—that is, the payment to him of fees, the tax on which has already been accounted for in the Schedule D assessments. If the continuing partner, who now has the whole of the practice, wishes to be assessed for his earnings on the "cash basis," he should include in his returns for assessment the whole of the cash receipts, including those passed on to our correspondent; his alternative is to make his 1923-24 return on the basis of the value of the whole of the gross bookings of the firm to October, 1922.

Medical Literature.

"R. M." has claimed to deduct £10 as the expense incurred in keeping himself supplied with current medical literature—BRITISH MEDICAL JOURNAL, *Public Health*, etc. The inspector of taxes refuses to allow any such expenditure unless it is