were slightly adherent to the cornea at the site of the wound. The pupil reacted well to light, and tension of the eye was normal; the lens was clear. The piece of glass could be seen lying behind the outer part of the lens. The glass, as measured roughly through the cornea, appeared to be about 7 to 8 mm. in length and about 4 mm. in width, and roughly triangular in shape. It was immobile during movements of the eye and had some pigment spots on it. The fundus was normal.

The condition on June 5th was: R.V. 6/5 without glass; L.V. 6/5. Apart from slight improvement of vision, the right eye was as on April 17th.

The condition on July 10th was: R.V. with and without glass=6/5 and J 1; L.V. 6/5 and J 1. The piece of glass appeared to be a little further away from the lens than it was at the last examination, otherwise the condition of the right eye was the same. The *x*-ray examination was negative.

My reasons for showing the case are:

(1) The happy result, in that the vision is normal, 6/5 and J 1, the cosmetic effect is good, and the patient suffers no trouble or inconvenience.

(2) The fact that the piece of glass can be seen behind the lens quite easily.

(3) It adds one more case to a long list showing that serious injuries to the eye due to glass are often followed by good results. The reasons suggested for this are: Glass appears to be fairly aseptic—probably owing to the smooth and polished surface, as mentioned in respect to spectacle glass by D. V. Giri in the *British Journal of Ophthalmology*, 1919, vol. 3, p. 159, where he quotes Haab, who states that a well polished surgical instrument can be rendered germ free or nearly so by simple mechanical rubbing. An ordinary windscreen, however, does not suggest asepsis, but possibly the piece of glass came from the deep layers of the windscreen. Being sharp, often no great force is necessary for glass to penetrate, and thus the eye is not disorganized. Glass is chemically inert.

(4) The prognosis seems good, for the following reasons: Apart from the first few days the eye has never shown any irritation and remained quiet ever since accident. The glass appears to be quite immobile during the movements of the eye, to be in practically the same position as it was originally, and not to be pressing on any important structure. Judging from the literature on the subject, I think one is justified in giving a fairly good prognosis in this case.

Numerous cases have been reported in which a piece of glass has remained in the eye for years. In the *Transactions* of the Ophthalmological Society of the United Kingdom, vol. xxv, p. 290, Mr. J. H. Fisher reports two cases of removal of glass from the eyeball. In the discussion which followed, the late Mr. Devereux Marshall referred to a case which had been under the late Sir J. Tweedy in which a large amount of glass was left in the eye, and the vision was 6/6 and J 1 twelve to thirteen years later, but by this time the lens appeared to be becoming opaque. Also on the same occasion the late Mr. Hartridge mentioned a case of a piece of glass projecting above the optic disc of five years' standing, and the vision was 6/5.

In the *American Journal of Surgery*, vol. xxxvi, 1922, p. 228, the late Mr. J. H. Claiborne reported a case of removal of a piece of glass from the interior of the eye—the anterior chamber—after thirteen years. The glass was originally in the lens, which became opaque after some years, and was absorbed.

In the BRITISH MEDICAL JOURNAL of 1888, vol. i, pp. 896 and 1215, Mr. T. H. Bickerton reported two cases of removal of pieces of glass from the eye—in the first from the anterior chamber where the glass had been for ten years, and in the second also from the anterior chamber; the lens had been injured and absorbed. In this case the glass had been in the eye for seven years.

Thus, from the few cases I have mentioned, it seems that the eye can tolerate glass for long periods if the glass is not pressing on important structures; though in the first case mentioned by Mr. Bickerton the glass was lying in the anterior chamber, and apparently only caused irritation when active exercise was taken.

In conclusion I should like to thank our President, Mr. Beaumont, who saw the patient with me at the time of the accident; Mr. Cyril Walker, who saw the patient on two occasions and examined him on the slit lamp; and Dr. Mackay for the *x*-ray examination.

DISCUSSION.

Dr. H. H. TYSON (New York) said that some twenty-five years ago he saw a case in the late Dr. Herman Knapp's hospital in New York in which a rectangular piece of glass had remained encapsulated in the retina for over ten years. As the eye was quiet and vision good no interference was attempted.

Dr. CHALMERS JAMESON (Brooklyn, New York) said he would like to discuss Mr. Colley's paper in which he obtained such an excellent result, not so much from the standpoint of a retained foreign body, but that of a perforating wound of the cornea with prolapsus or incarcerated iris. In the last ten or fifteen years he had many times adopted a method of replacement, which he had outlined in the *Archives of Ophthalmology* some years ago. It was adapted to selected cases of prolapsus, principally where the wound was small and circumscribed, and in which the period of incarceration had been of short duration. The examination of cases had ranged from seven to forty-eight hours after the injury. The method consisted in making a counter-opening in the periphery of the cornea, passing a delicate bent blunt hook around the neck of the incarceration within the chamber and by gentle pressure without, and still more careful traction on the hook from within, the prolapsus was reduced and the iris replaced uninjured. There was no danger of injuring the lens as the hook was introduced in front of the iris. He sterilized the prolapsed iris before replacement with a solution of silver nitrate. The method had several advantages: (1) It brought into use two forces for replacement instead of one—namely, slight pressure and replacement from without and moderate traction from within the chamber. (2) It equalized the flow of aqueous, diverting it in part from the wound to the counter-opening, thus lessening the danger of prolapse after replacement, as well as enabling the surfaces of the wound to approximate and heal. (3) It permitted free sterilization, as saline solution could be passed from wound to counter-opening. (4) It prevented mutilation of the iris, the leaving of an unsightly coloboma of the iris (in case of excision), and also the exposing of the vessel system to infection. In many cases the eye was restored to its normal appearance, with no detection of any evidence of injury.

Mr. THOMAS H. BICKERTON (Liverpool) said that in several cases of acute glaucoma the constant application of ice had, after some hours, reduced the tension to normal, which had remained permanent. In other cases, recurrence had occurred, and again been reduced to normal by ice. In other cases—and the majority—operation had become necessary.

Memoranda:

MEDICAL, SURGICAL, OBSTETRICAL.

SPHEROIDAL-CELLED CARCINOMA OF OVARY IN A CHILD OF EIGHT.

IN Mr. S. J. Cameron's paper on malignant disease of the ovaries and Fallopian tubes, read in the Section of Obstetrics and Gynaecology of the Annual Meeting,[1] the youngest case of carcinoma of the ovaries quoted was over 19 years of age. In view of this the following case may be of interest.

A girl, aged 8 years, was brought to the South Devon Hospital, Plymouth, in the spring of 1923. She had complained for four days of pain in the lower abdomen; it was constant and severe, increasing very much during defaecation. For two days the lower abdomen had been seen to be swollen. The bowels had been open once daily, and there had been no vomiting. Micturition had been normal. The child had been getting thin during the last month, otherwise nothing unusual had been noticed about her.

She was a well grown girl, normally developed, and fairly well covered. Her expression was anxious, but she did not look ill.

[1] BRITISH MEDICAL JOURNAL, August 15th, 1925.

The tongue was very furred; the temperature was 99° and the pulse 96. A tumour was visible rising above the pubes to just below the umbilicus. It was firm to the touch and slightly tender. On rectal examination a mass was palpable in the pouch of Douglas. A tentative diagnosis of appendix abscess was made.

At operation a solid tumour was found, growing from the left ovary but extending to and enveloping the right. It was all encapsulated except the right extremity, which was fungating and becoming adherent to coils of small intestine. The tumour, with both ovaries and tubes, was removed. No other focus of growth was seen. On microscopical examination the tumour proved to be a spheroidal-celled carcinoma.

Twelve days after the operation enlarged glands appeared in the right groin, and two days later in the left groin. The child then went home with a hopeless prognosis. A month later she was readmitted with a tumour similar to the original one and nodules, one of which was fungating through the wound in the abdominal wall. She was cachectic, and died ten days later. Permission could not be obtained for a *post-mortem* examination.

I am indebted to Mr. H. G. Pinker, who has kindly allowed me to publish this case.

OLIVE POTTER, M.B., B.S.,
Late House-Physician, South Devon Hospital, Plymouth.

THE RECOGNITION OF LATENT JAUNDICE DURING TREATMENT WITH ARSENOBENZOL COMPOUNDS.

[A PAPER on this subject, by Surgeon Lieutenant-Commander W. I. Gerrard, Royal Naval Hospital, Haslar, was published in the BRITISH MEDICAL JOURNAL last year (vol. ii, p. 224), and a little later (p. 542) Dr. A. M. Stuart wrote to suggest that the cause of the frequency of the occurrence at Haslar was the intensity of the course. We have since received the following note.]

During the past fifteen months at the Royal Naval Hospital, Hong-Kong, 346 cases have been treated with novarsenobillon; three only have developed jaundice—an incidence of 0.86 per cent.; two were undoubtedly toxic in origin, the third doubtful. The cases are divided into three groups.

	A.	B.	C.
Injection No. 1 ...	0.45 gram	0.45 gram	0.45 gram
,, No. 2 ...	0.6 ,,	0.6 ,,	0.6 ,,
,, No. 3 ...	0.9 ,,	0.6 ,,	0.6 ,,
,, No. 4 ...	0.9 ,,	0.9 ,,	0.6 ,,
,, No. 5 ...	0.9 ,,	0.9 ,,	0.9 ,,
,, No. 6 ...	0.9 ,,	0.9 ,,	0.9 ,,

Group A consisted of 123 cases, but as 14.6 per cent. general reactions were occurring, the dose was reduced to that under Group B. In this group we still got 15.4 per cent. reactions at the time, and the dosage was further reduced to that under Group C. In 186 cases in this Group C the reactions at the time were reduced to 6.4 per cent.

In batches A and B no cases of jaundice occurred, but in the last batch, C—that is, the batch given the smallest dose—all three recorded cases of jaundice occurred.

In every case the interval between the injections was the same (namely, three days) and the strength of the solutions used relatively the same—that is, 0.45 gram novarsenobillon in 0.45 c.cm. distilled water; 0.6 gram novarsenobillon in 0.6 c.cm. distilled water; and 0.9 gram novarsenobillon in 0.9 c.cm. distilled water. In every case the solution was filtered before injection through several thicknesses of gauze after being dissolved in distilled water.

From the above experience it would appear that the intensity of the course has no bearing on the subsequent incidence of jaundice; in fact, the smaller the total amount given the greater the incidence of jaundice.

Possibly the reason that Dr. Stuart has recorded no cases of jaundice is the difficulty in following up the after-history in civilian practice.

H. W. FITZROY WILLIAMS, M.B., D.P.H.,
Surgeon Lieutenant-Commander R.N.
Hong-Kong.

Reviews.

MEDICAL SOCIOLOGY.

A RECENT volume[1] of the *Traité de Pathologie Médicale et de Thérapeutique Appliquée*, edited by Professor EMILE SERGENT and Drs. RIBADEAU-DUMAS and BABONNEIX, is concerned with medicine in relation to social services (*Médecine sociale*), and is the work of twenty writers. An introductory chapter by Dr. Guinon reviews the history and purpose of social medicine, the various institutions and services engaged in advancing and developing it, and the need of co-ordinated effort by all employed in improving the social condition of the people. The volume is divided into two parts—preventive medicine in social services, and services auxiliary to social medicine. Maternity, child welfare, school hygiene and care of school children, safeguarding of adolescence, care of the aged, hygiene and social services in connexion with the working classes, workmen's compensation and public health insurance, organization and administration of hospitals, kindergartens, alcohol and narcotic drugs, prevention of mental disease and care of mental defectives are dealt with successively in the chapters of the first part. The second part consists of some seventy pages only and is not separated into chapters. It details the systems of training and organizing sick nurses for hospital and domiciliary work, and the methods of supervision of factories and factory girls by lady superintendents.

The immense importance of combating the decline of population in France gives special interest to the chapters on the social protection of the rising generation. In the chapter on maternity, Professor Couvelaire discusses the care of the mother from the time of conception to the time of weaning. He attributes the excess of deaths over births, in several years since 1890, solely to voluntary control of conception. The chapter on child welfare contains an exhaustive inquiry, amongst other matters, into the causes of infantile mortality in France and the influence of disease, season, sex, social condition of parents, environment, feeding, and illegitimacy. In the chapter on school life reference is made to the importance of determining the pupil's aptitude or inclination for any special work or profession and of directing his studies accordingly, a point in education that is more often honoured in the breach than in the observance. The contributors to the chapter on adolescence are a Roman Catholic, a Jewish, and a Protestant clergyman, who describe the facilities for physical and moral culture of the young adult afforded by their respective religious institutions and social services, such as hostels for young people, young men's and young women's Christian associations, and boy scout and girl guide movements. The care of the aged is considered from the point of view of old age pensions and asylums, of which there are good descriptions and illustrations.

The chapters on the hygiene and social conditions of the working classes and on workmen's compensation and public health insurance are of special interest, in view of the important place these subjects occupy in the politics of most civilized countries at the present time. They review industrial legislation in France, especially the system of medical arrangements in factories, provision of facilities for mothers nursing their infants while at work, and the organization and management of crèches. As regards workmen's compensation, the French system of making the employer liable and leaving him to cover himself by insurance is compared with the German system of a contributory payment by wage-earner and employer to a State fund. The German system is still in force and is preferred in Alsace-Lorraine, and legislation is now proposed to apply it to the whole of France, and to insure all persons employed in industry, commerce, and agriculture, under 60 years of age and earning less than £400 a year. They would be insured not only against accidents, but also against sickness, maternity, incapacity to earn a livelihood, unemployment, old age, and death. Although 10 per cent. of the wages, half by the wage-earner and half by the employer, would be contributed

[1] *Traité de Pathologie Médicale et de Thérapeutique Appliquée.* Publié sous la direction de E. Sergent, L. Ribadeau-Dumas, L. Babonneix. Tome XXXIII: *Médecine sociale.* Paris: A. Maloine et Fils. 1925. (Demy 8vo, pp. viii + 773; 10 figures. Fr. 45.)

Borough Fever Hospital. Dr. Wynne possessed considerable literary ability, and was for some time associated with the BRITISH MEDICAL JOURNAL as a reporter of Sections at the Annual Meetings. He contributed articles on tuberculosis in Ireland to the JOURNAL and other periodicals.

ALBERT JOHN OCHSNER, who died at Chicago on July 25th, was one of the leading surgeons in the United States. In 1900 he was appointed professor of clinical surgery in the University of Illinois, and held the chair until his death. In the same year he was elected chairman of the section of surgery of the American Medical Association. In 1910 he was president of the clinical congress of North America, in 1923 president of the American College of Surgeons, and in 1924 president of the American Surgical Association. He was an honorary Fellow of the Royal College of Surgeons in Ireland and of the Royal Microscopical Society. His numerous publications included a textbook of clinical surgery for practitioners and students (1905), a handbook on appendicitis (1906), and a treatise on surgical diagnosis and treatment (1918). He was the editor of the *Yearbook of Surgery* from 1917 to 1923.

Universities and Colleges.

UNIVERSITY OF DURHAM.

IN the list of those who received medical degrees on July 1st which was published in the BRITISH MEDICAL JOURNAL of July 11th (p. 94), it should have been indicated that Mr. C. C. Ungley had obtained the M.B., B.S. with second-class honours; he was also the recipient of the Philipson scholarship.

SOCIETY OF APOTHECARIES OF LONDON.

THE following candidates have passed in the subjects indicated:

SURGERY.—T. K. Clifford, C. D. Cogswell, V. G. Crowley, S. W. Cuff, A. L. Evans, W. O. H. Evans, T. H. Harrison, A. H. Henson, J. Herbert, E. P. Hyde, A. B. Osbourne, W. I. Pierce, F. Reynolds, H. A. Sack, G. H. Shanley, M. Schwartzman, I. Waynik.
MEDICINE.—C. D. Cogswell, W. Hinds, E. P. Hyde, M. V. Roberts.
FORENSIC MEDICINE.—O. Bastable, E. P. Hyde, E. J. Newman, M. V. Roberts, I. Waynik.
MIDWIFERY.—R. F. Ashkenny, A. L. Evans, W. Ivers, E. H. Rampling, M. V. Roberts, C. H. Spencer.

The diploma of the Society has been granted to Messrs. A. H. Henson, J. Herbert, W. I. Pierce, A. B. Osbourne, and I. Waynik.

Medical News.

IN consequence of representations made during the debate in the House of Commons on the Diseases of Animals Act, 1925, the Minister of Agriculture and Fisheries has issued a new order (Tuberculosis Order of 1925, No. 2). It has been made after communication with the Ministry of Health and the Scottish Office, and applies to Great Britain. It provides that in any case in which a carcass slaughtered under the previous Order is intended to be used for human consumption, a copy of the notice of intended slaughter sent to the owner shall also be sent to the appropriate officer of the sanitary authority of the district, together with a statement of the address of the premises on which and the time at which it is intended to carry out the slaughter. The Order further provides that in any such case the carcass shall not be removed from the premises or be disposed of for human consumption without the consent in writing of the medical officer of health or other competent officer of the sanitary authority, or, in the case of Scotland, the meat inspector. The Minister of Health has sent copies of the Order to all sanitary authorities in England and Wales.

DURING the year ending March 31st, 1925, the Central Council for Infant and Child Welfare organized a day nursery at Wembley, in conjunction with the British Red Cross Society, and reorganized and extended its own travelling exhibition. A permanent exhibition is being established at Carnegie House, 117, Piccadilly, the headquarters of the council, comprising model garments for infants and children, and the following sections: dental, clean milk, diet, rickets, tuberculosis, and cripples. An arrangement has been made with the College of Nursing whereby its library has been placed at the disposal of infant welfare workers and students. Various courses of lectures have been delivered, and £450 has been given in grants to constituent societies of the council.

THE KING has promoted Sir William Maurice Abbot Anderson, M.V.O., physician to H.R.H. Princess Royal and household, to be a Commander of the Royal Victorian Order.

DR. WALTER GRIPPER of Wallington, on the occasion of his retirement after forty years' practice in the district, has been presented by his friends and patients with an illuminated address and a writing desk as a mark of their esteem and appreciation of his services.

THE KING has given directions for the appointment of Dr. John Owen Shircore, Director of Medical and Sanitary Services, to be an official member of the Executive Council of the Tanganyika Territory.

THE Indian Government has selected Lieut.-Colonel F. P. Mackie, director of the Bombay bacteriological laboratory, and Drs. A. Souza and B. B. Brahmachari, assistant directors of public health in the United Provinces and Bengal respectively, to take part in the tour in Japan this autumn of public health officers of the Far East. The tour is under the auspices of the League of Nations.

ON the occasion of the centenary of its foundation the firm of D. Appleton and Co. of New York has published a small book containing an essay entitled *Portrait of a Publisher*, by Mr. Grant Overton, and a chronological record showing how the firm began, how it was the publisher in America of the books of Charles Darwin and Herbert Spencer, and of Osler's *Practice of Medicine*, and how it also published books of lighter kind such as *Alice in Wonderland*, *David Harum*, and *Uncle Remus*, and many novels. The firm is perhaps best known to medical readers in this country by its encyclopaedic works; it has published many of them, not a few in several editions.

MESSRS. H. K. LEWIS AND CO. will shortly issue a book on malignant disease of the testicle by H. R. Dew, and the second edition of *The Pathology of Tumours*, by Dr. E. H. Kettle.

THE Transactions of the Eleventh Annual Conference of the National Association for the Prevention of Tuberculosis, which was held on July 6th and 7th, have now been published, and may be obtained from the secretary, at 20, Hanover Square, London, W.1. On July 11th (p. 73) we gave an account of this conference, which considered in particular two subjects—tuberculosis in childhood and the sanocrysin treatment. It is probable that many interested in these subjects will be glad to avail themselves of the opportunity of obtaining a full report of the speeches and discussions.

The Rockefeller Foundation has decided to defray the expenses for ten years of a periodical entitled *International Biological Abstracts*, which will commence publication on January 1st, 1926. It has also presented 300,000 dollars to the Vaccine and Serum Institute of Copenhagen directed by Professor Madsen.

THE following have been nominated professors in Italian universities: in dermatology and syphiligraphy, Iader Capelli at Turin, Cosimo Lombardo at Pisa, and Alberto Sevra at Cagliari; in general pathology, Francesco Pentimalli at Cagliari and Alberto Marrassini at Sassari; in human anatomy, Emerico Luna at Palermo, Nello Beccari at Catania, and Giovanni Vitali at Cagliari; in histology and general embryology, Terni Tullio at Padua.

DR. LINA STERN, formerly assistant to the professor of physiological chemistry in the University of Geneva, has been appointed to the chair of physiological chemistry in the University of Moscow.

THE *Archivos de gastro-enterologia y nutrición*, the first issue of which appeared in May, is a quarterly journal devoted to gastro-intestinal disease. It is published at Havana under the editorship of Professors Solano Ramos y Delgado and Leonardo Garcia Fox. The first issue contains original articles by Professor Ramos on the nervous system in digestion, by Dr. C. Flandin on the treatment of amoebiasis by treparsol, by Professor Fox on the importance of dietotherapy, by Juan J. Delgado on vitamins and nutrition, and by Dr. Juan M. Pérez Boudet on the gastric symptoms of tuberculosis. These original articles are followed by abstracts from current literature and a bibliography.

THE Eleventh International Congress of Hydrology and Climatology will be held at Brussels from October 10th to 14th under the presidency of Professor Gilbert of Paris and Dr. Terwange of Brussels. The following subjects will be discussed: hydromineral and climatic treatment of cardiovascular affections, introduced by MM. Cottet-Mougeot and Piatot; hydromineral sulphur cure, introduced by MM. Flurin, Liacre, and Lamorgue. The subscription is 50 francs for members of the congress and 25 francs for ladies accompanying them. Further information can be obtained from Dr. Poirot-Delpech, 3, Rue de la Planche, Paris, VII^{e}.

AN Italian Society for the Scientific Study of Tuberculosis was founded at the Italian Antituberculosis Congress recently held at Naples.