

Memoranda:

MEDICAL, SURGICAL, OBSTETRICAL.

EXTRADURAL SPINAL MENINGEAL HAEMORRHAGE WITHOUT GROSS INJURY TO SPINAL COLUMN.

WE venture to place on record the following instance of death occurring after an apparently trivial accident, as we think such cases must be extremely rare.

Whilst cycling to her work about 2 p.m. on September 6th, 1924, a shop assistant came into collision with a motor car, and fell off her bicycle on to her left side, bruising her left arm. The accident was most trivial, as the car was only going about five miles an hour at the time of contact, and never touched the cyclist, whose front wheel struck obliquely the running board of the car.

She went to work by bus immediately after the accident, and on the following day, Sunday, felt quite well, except for a little stiffness in her arm and slight pain in her back. On September 8th she did not feel quite so well, and remained at home; on the next day, September 9th, as she felt much worse, she came to see us about 7.30 p.m. Her expression was anxious, the face flushed, and she complained of pain in her back, which was most apparent when she attempted to rise to her feet after sitting down; the temperature was 101°, the pulse 110; she was menstruating; the pupils were normal, and there was no trouble with bowels or bladder. The knee-jerks were present but not brisk. She walked across the study perfectly well; and had come from her house, a distance of about a mile, apparently without much difficulty. We sent her home to bed at once, and the next morning examined her thoroughly; the temperature then was 100°, pulse 110, she was quite conscious, pupils normal, there was flaccid paralysis of the right leg and partial of the left leg, no vomiting; the bowels had not acted since September 9th. There were no bladder symptoms, no signs of bruising in the lumbar region or spinal damage of any sort; zones of ovarian hyperaesthesia were well marked. She had been previously attended by us for dysmenorrhoea and its attendant neurosis. We saw her again on September 11th, when her condition was much worse—temperature 100°, pulse 115, flaccid paralysis of both legs, loss of all reflexes and sensation, and paralysis beginning in arms. She was very anxious, but conscious, with jerking respirations. The bowels acted in the morning; there were no bladder symptoms. She was seen again at 3 p.m., when she had become much worse and the respiratory centre began to fail. She was still conscious, and paralysis of arms and legs was complete. Spinal puncture was considered, but deemed inadvisable owing to her condition. At 5 p.m. she was in a moribund state, and died at 8.30 p.m.

The *post-mortem* examination revealed extensive extradural meningeal haemorrhage, extending the whole length of the cord up as far as the level of the third cervical vertebra, tuberculous foci in both tubes, lungs, and an area about the size of half a crown on the meninges in the occipital region; there was no sign of tuberculous foci in meninges of cord, no fracture or dislocation of column, and the actual vessel from which haemorrhage originated was not discovered.

The haemorrhage in this case undoubtedly started in the lumbar region, and must, to begin with, have been extremely slight, possibly stopping altogether for some time, when it began to recur and continued until it reached the level of the third cervical vertebra, and paralysis of the phrenic ensued. We suppose that a wrench or twist of the spinal column at the time of the accident caused the rupture of a small vessel.

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J. KENNEDY, M.B., F.R.C.S.I.

FULL-TERM MULTIPLE PREGNANCY IN A UTERUS BICORNIS BICOLLIS.

THE condition found in the case here recorded is sufficiently rare to merit publication.

A woman, aged 25, 6-para, who in August, 1917, and February and December, 1918, had had miscarriages, and in 1920 and 1924 had full-term deliveries of live children, was admitted to the Lady Reading Hospital, Simla, on September 17th, 1925, in the ninth month of pregnancy, complaining of great abdominal discomfort and difficulty in breathing. The abdomen was greatly distended. Two foetuses could be palpated, and there was some excess of liquor amnii. Early the next day the membranes ruptured. A few hours later a healthy female child was born. Immediately after the birth of the child there was very severe haemorrhage. On vaginal examination the placenta was found protruding through a cervix lying on the left of the vagina. It was removed. The uterus at once contracted down and the haemorrhage ceased. On further examination the second child was found to be lying transversely in a second uterus on the right of the abdomen. By vaginal examination a second cervix was found very high up on the right and separated from the first by a thick fleshy mass. This cervix felt very hard and resistant, and was dilated about one-third. There were no apparent con-

tractions in this uterus. After waiting about two hours, as no pains came on and the child was lying transversely, the membranes were ruptured and a foot brought down. After fifteen hours there were still no pains in the right uterus, although there were severe after-pains in the uterus on the left; the cervix, however, was found almost fully dilated and the buttocks in the vagina. As the child's condition was becoming serious, it was decided to extract. This was done with considerable difficulty and the child was stillborn. There was no haemorrhage after the delivery, and the placenta was expelled after a few minutes. On abdominal examination the two uteri could be felt as two separate hard balls, quite distinct from one another. Convalescence was uneventful, except that after-pains were severe for three days, first in one uterus and then in the other.

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RENAL DECAPSULATION IN ACUTE NEPHRITIS WITH ANURIA.

I HAVE seen little or nothing in recent British literature dealing with renal decapsulation in acute nephritis, and it appears to me that all cases in which this operation is done should be recorded, whether the result be failure or success. I was much encouraged in giving my patient what seemed to be his only hope by an article by Sir Thomas Horder in the BRITISH MEDICAL JOURNAL of November 13th, 1920, entitled "Treatment of subacute nephritis by kidney decapsulation," in the course of which he said, "One other clinical type of nephritis requires brief mention, and that is acute nephritis . . . puncture or incision of acutely inflamed kidneys is, in my opinion, quite justified whenever anuria and uraemia persist despite energetic general measures."

While I feel convinced that the operation saved the patient's life in the following case, I, of course, do not mean to suggest that every patient with nephritis should be operated on. I suggest, however, that a patient suffering from acute nephritis should not be allowed to die from anuria without renal decapsulation having been tried. The operation may prove to be without value, but it should not be condemned without a trial in a reasonable number of cases. Would it not be logical to go a step further and try the effect of renal decapsulation (or nephrotomy) on patients suffering from blackwater fever with anuria? With the usual treatment the mortality in these cases is so very high that the experiment would seem to be quite justifiable.

The operation is not difficult and does not demand much skilled assistance or special instruments. Chloroform, I imagine, would not be safe in these cases, and gas and oxygen would not be available in remote places in the tropics, but a spinal syringe and a few ampoules of stovaine can easily be included in the medical officer's equipment.

R. F. K., aged 37, had blackwater fever some years before the war. While a prisoner of war in Germany he had a feverish attack and passed little or no urine for a day or two.

History of Present Illness.

On September 27th, 1924, he felt feverish (temperature 102.8°). He complained of no particular symptoms, and examination was negative. The following day the temperature was normal. No urine was passed; there were no symptoms. On September 29th and 30th the temperature continued normal. About 3 drachms of urine was passed; it contained much albumin, some blood, some pus, and an enormous number of casts. The patient was given plenty of bland liquid, diuretic, laxatives, etc.

On October 1st the temperature was 97.6°, pulse 52. Two drachms of urine was withdrawn by catheter. A skigram of the kidneys and ureters revealed nothing abnormal. The following day no urine was passed. The passage of a catheter showed the bladder to be empty. The patient exhibited well marked signs of uraemia and was clearly becoming rapidly worse.

Operation.

Dr. A. Morrison and Dr. S. Forrest, who saw him in consultation, agreed with me that the condition was desperate, and that it was justifiable to try a renal decapsulation in what we all regarded as a forlorn hope.

Under spinal anaesthesia (stovaine) the left kidney was decapsulated at 6 p.m. The capsule was adherent to the renal tissue and its separation caused free oozing. The wound was completely closed and healed by first intention. The patient improved rapidly and caused little further anxiety.

The excretion of urine after operation was as follows: October 3rd, $4\frac{1}{2}$ oz.; October 4th, 6 oz.; October 5th, $9\frac{1}{2}$ oz.; October 6th, 24 oz. (traces of albumin, a few red cells, urea 9.5 grams per litre); October 7th, 51 oz.; October 8th, 75 oz. The urine rapidly returned to normal and has remained so since. The patient is in excellent health.

Schutz, Alexandria, Egypt.

E. N. RUSSELL, M.D.

STRANGULATION BY UMBILICAL CORD.

ON August 1st I was called to Mrs. C., a 2-para. The unruptured membranes were bulging at the vulva. The presentation could not be made out, the skull bones feeling loose and plate-like. During a pain the membranes ruptured, allowing the escape of dark brown fluid. The head was delivered, and the shoulders followed with some difficulty. The cord was tightly encircling the neck once, and was so tight that it was necessary to cut it. The child had been dead some days, being macerated. The head and neck were deeply congested, and there was a distinct groove round the neck. The appearance of the eyes, partly opened, was characteristic.

This case is of interest from a medico-legal point of view.

P. HENDERSON, M.D., L.R.C.P. and S.
Seghill, Northumberland

British Medical Association.

CLINICAL AND SCIENTIFIC PROCEEDINGS.

OXFORD DIVISION.

THE fifth meeting of the year of the Oxford Division of the British Medical Association was held in the Radcliffe Infirmary on October 28th, when Dr. A. W. NEILL was in the chair.

Dr. W. COLLIER, sen., read notes of a case in which the diagnosis between gall-stone colic and abdominal angina was difficult.

A woman, aged 48, had had two previous attacks of gall-stone colic twenty-four and four years respectively before her last (fatal) illness, which commenced one week before death with repeated attacks of severe abdominal pain and vomiting of bile. The pain was not quite typical of gall-stone colic, and in view of the cardiac enlargement and the irregularity of the heart's action the possibility of angina was at first considered. Later the gall bladder was found enlarged and hard, and it appeared to contain a stone. The patient died suddenly two days after admission to hospital. At the necropsy the pericardial sac was found full of fluid and clotted blood; the heart was hypertrophied, mainly on the left side; and, on the posterior aspect of the apex there was a rupture three-quarters of an inch long, surrounded by a rough haemorrhagic clot. The tip of the left ventricle was much thinned and infiltrated with clot; extending up the wall as far as the posterior capillary muscle, and also up the anterior wall, was an area of ischaemic necrosis, apparently in the distribution of the descending septal branch of the right coronary artery, where this became too small for naked-eye dissection. The main coronary arteries were patent and contained no clot or embolus. The valves were healthy and the pulmonary artery contained liquid blood. In the gall bladder a large stone was present.

There was nothing in the patient's history to suggest syphilis, but a fairly pronounced history of alcohol was obtained.

Dr. J. RICKARDS showed a woman, aged 69, with chronic intestinal obstruction. She was suffering from emaciation and abdominal pain, and the abdomen showed peristalsis and a ladder pattern.

Dr. A. G. GIBSON showed a boy, aged 7, with sequels of an attack of encephalitis lethargica in the early part of the year. The boy was duller than normal and was subject to attacks of vomiting. The eyes were rather staring, and there was overaction of the levator muscles of the eyelids, with feeble accommodation reflexes and slight nystagmus. In walking he tended to keep the left arm still, while swinging the right arm.

Professor R. A. PETERS gave a lantern demonstration on recent researches in rickets. He showed how the rival and apparently contradictory dietetic and hygienic theories of the causation of rickets had been harmonized by another factor—namely, the action of light on the body. Radiation could confer curative properties on foods which were otherwise useless.

The unfavourable verdict on oatmeal which had been pronounced by Professor Mellanby called forth vigorous protests from the Scottish members present, and it was suggested that any alleged rickets-producing factor in oatmeal might be more than compensated by judicious use of the national beverage and by the free radiation treatment of kilned lower limbs!

Reports of Societies.

INFLUENCE OF THE OVARY IN PARTURITION.

At a meeting of the Section of Therapeutics and Pharmacology of the Royal Society of Medicine on November 10th, with Dr. GEORGE GRAHAM in the chair, a brief account was given by Mr. F. H. A. MARSHALL, Sc.D., F.R.S. (Reader in Agricultural Physiology, Cambridge), and Professor W. E. DIXON, M.D., F.R.S. (Reader in Pharmacology, Cambridge), on some recent work to determine the influence of the ovary in parturition.

Dr. Marshall said that it was certain experiments in pseudo-pregnancy produced in rabbits which led up to the theory he was about to expound. Pseudo-pregnancy was a condition—depending upon the employment of sterilized males—in which the corpus luteum was present and acting in the same kind of way as in true pregnancy. From these experiments it appeared that when the corpus luteum reached a certain stage in its evolution changes took place similar to those at the advent of parturition, and extending even to the animal's habits and instincts—the rabbit, for example, beginning to make her nest. No evidence was forthcoming in this work that the ovary acted directly upon the uterus in promoting contraction; extracts of ovary had no specific effect at all, but, on the other hand, pituitary extract was found to have a specific effect upon the uterine muscle, thereby suggesting that the pituitary gland might be a factor in parturition. The experiments were then extended to some pregnant sows; in these also it was found invariably that the extract obtained from the ovaries was negative except at the very end of the 115 days' pregnancy, when it gave a markedly positive result. In the non-pregnant sow at about the time of oestrus the effects also were positive, but in the middle of the cycle, when the corpus luteum was fully developed in the ovaries, the effects were negative, as they were during the whole period of pregnancy except at the very end. This suggested an interesting interaction of the ovary and the pituitary and an interference of the corpus luteum. The theory seemed to follow—though it might be wrong—that the ovary worked through the pituitary, but that when there was an active corpus luteum present in the ovaries it so dominated the ovarian metabolism as to neutralize any ovarian effect. It was only at particular times when there was no corpus luteum in the ovaries, or only a non-active corpus luteum, that the ovarian secretion acted upon the pituitrin, and this in turn upon the uterine muscle. This was the state of affairs obtained at about the time of parturition, and also at the time of oestrus, which explained why uterine contractions were to be observed in the menstrual cycle. The main objection to this theory was based on those cases in which the ovaries had been removed during pregnancy and the pregnancy had gone on. But very little was known as yet about the compensatory mechanism of the endocrine system, which might be of considerable importance. Ordinarily, for example, parturition was regulated by nervous mechanism, and yet it was known that nervous mechanism in parturition might be entirely dispensed with. Nobody disputed, again, that the thyroid gland had a definite function, and a belief in the function of the thyroid in respect to internal secretion was in no way upset by the fact that the thyroid could be removed in some cases without very much happening. Therefore he did not think that too much stress should be laid on this objection.

Professor Dixon added that not only had Dr. Marshall, in the course of his experiments, made it clear that by removing the corpora lutea the animal was made to abort every time, but it was also evident from the experimental work of numerous observers that if extract of corpora lutea were injected into animals over a prolonged period ovulation was inhibited. Professor Dixon showed some graphs illustrating experiments of his own bearing out the conclusions already put forward by Dr. Marshall and demonstrating the effect of pituitrin, or of something which acted in the same way, in the cerebro-spinal fluid. He recounted some observations of Meyer, who, in the case of ten women on whom Caesarean section

Universities and Colleges.

UNIVERSITY OF OXFORD.

AT a congregation held on November 14th the following medical degrees were conferred:

M.D.—E. F. Chapman, N. A. Sprott.

UNIVERSITY OF CAMBRIDGE.

AT a congregation held on November 14th the following medical degrees were conferred:

M.D.—E. Donaldson, L. P. Costobadie.
M.B.—P. T. Ling, admitted by proxy.

The managers of the Pinsent-Darwin studentship have made a grant to Miss M. F. Bridie of Birmingham, in order to facilitate her investigations into the effect of education among the mentally deficient.

UNIVERSITY OF GLASGOW.

THE following degrees were conferred on November 14th:

M.D.—H. S. D. Garven (with honours), C. M. Smith (with high commendation).

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

AN ordinary council meeting was held on November 12th, when the President, Sir John Bland-Sutton, was in the chair.

Diplomas of Membership were granted to 204 candidates. (The names were included in the report of the comitia of the Royal College of Physicians of London, printed in our issue of November 7th, p. 871.)

Mr. James Sherren was appointed a member of the committee of management, in the vacancy occasioned by the retirement of Sir Charles Ballance.

Mr. Norman Leslie Capener, F.R.C.S., was appointed the third Stretefeld Scholar, the subject of his research being "The comparative anatomy and function of the prostate gland."

The vacancies on the Court of Examiners occasioned by the expiration of the term of office of Mr. C. H. Fagge and by the resignation of Mr. Hugh Lett will be filled up at the ordinary council meeting on December 10th.

Medical News.

MR. G. R. GIRDLESTONE will lecture for the Fellowship of Medicine on tuberculosis of the spine on November 23rd, at 5.30 p.m., in the lecture hall of the Medical Society of London, 11, Chandos Street; all members of the medical profession are welcome. Courses begin on November 23rd in medicine, surgery, and gynaecology at the Royal Waterloo Hospital; in nervous diseases in the out-patient department of the West End Hospital, 73, Welbeck Street, and a late afternoon course (4.30 to 6) for general practitioners at the London Temperance Hospital. From November 30th to December 13th the Infants Hospital will hold a special afternoon course; on the Sunday a morning visit will be paid to the Thavies Inn Clinic. Afternoon lectures and demonstrations will be given by Dr. Eric Pritchard and other members of the staff, and visits will be made to the Nursery Training School, Hampstead Garden Suburb, and the Home for Blind Babies, Chorley Wood. The Hampstead General Hospital has also arranged a late afternoon course for general practitioners from December 7th to 19th covering medicine, surgery, and the special departments. There will be a course in dermatology at the Blackfriars Hospital for Diseases of the Skin from December 7th to 19th; instruction will be given in the out-patient department, and venereal clinics twice weekly. A copy of each syllabus and the Fellowship general course programme will be forwarded on application to the Secretary to the Fellowship, 1, Wimpole Street, W.1.

THE American Medical Association has called into being a "Council on Physiotherapy" to define the scope of physical methods in diagnosis and treatment, including the various electrical and mechanical contrivances. The council consists of two experts in physics, four clinicians, two physiologists, and two pathologists, together with the secretary of the association, and the editor of the journal. At the first meeting of the council a committee was appointed to prepare a series of reports on therapeutical methods and the apparatus used, while other committees are taking up questions of organization and education. Many manufacturers of apparatus have promised to co-operate. The inquiries undertaken by the new committee will be extended to the therapeutic methods of massage, manipulation, hydrotherapy, and physical exercises.

PROFESSOR F. G. PARSONS, F.R.C.S., F.S.A., will give a lecture on the earlier inhabitants of London, in the Governors' Hall, St. Thomas's Hospital, Westminster Bridge, S.E.1. at 5 p.m. on Friday, December 4th. The

lecture will be illustrated by lantern slides, and skulls of the various peoples mentioned will be shown. Admission is free, without ticket.

AT the meeting of the Zoological Society of London on November 3rd Dr. H. H. Scott, pathologist to the society, communicated a paper on some congenital malformations of the kidney in reptiles, birds, and mammals.

AN institute of the history of science has recently been opened at the Florence Faculty of Medicine under the direction of Professor A. Corsini, the well known medical historian. The institute contains collections of ancient surgical instruments, mortars, pictures, busts, journals, and the like.

THE autumn dinner of the Irish Medical Schools' and Graduates' Association will take place at Pagani's Restaurant, Great Portland Street, W.1, on Wednesday, November 25th, at 7.30. Tickets (price 10s.) may be obtained from Dr. Peart, 5, Harley Street, W.1. The guest of the evening will be the Right Hon. Charles Andrew O'Connor.

THE annual dinner of the Medico-Legal Society will be held at the Holborn Restaurant, London, on Friday, December 11th, at 7.15. The chair will be taken by the President, the Right Hon. Lord Justice Atkin.

THE Golden Square Hospital for Diseases of the Throat will, with its new extension, be reopened on Thursday, November 26th, by Mr. Lionel de Rothschild, O.B.E. The hospital was founded by Sir Morell Mackenzie in 1863; it has grown until it now occupies a considerable portion of the square whose name it has made familiar throughout the medical profession. The extension includes an enlarged special department with a new operating theatre and a ward to which children are admitted for minor operations.

THE League of Mercy has this year awarded £9,820 to extra metropolitan hospitals. In the last twenty years the League has contributed through the King's Fund £368,034 to the London hospitals and £74,739 to hospitals outside London.

DR. FINDLAY MURCHIE and Dr. Theodore W. Stallybrass, of the Middle Temple, were called to the Bar on November 17th.

THE College of Physicians of Philadelphia announces that the next award of the Alvarenga prize, amounting to about 300 dollars, will be made on July 14th, 1926, and essays intended for competition must be received by the secretary of the College by May 1st. These essays may deal with any subject in medicine, but must not have been previously published; they must represent some addition to knowledge and be based upon original or literary research. The prize for 1925 has been awarded to Dr. Raphael Isaacs of Boston, Massachusetts, for an essay on the nature of the action of α rays on living tissue. Further information may be obtained from the secretary of the College, 19, South 22nd Street, Philadelphia, Pa., U.S.A.

THE seventeenth Congress of the Italian Phreniatric Society was held at Trieste from September 24th to 27th, when papers were read by Drs. Kobylinsky and Vidoni on the constitution in psychiatry, by Dr. Weiss on psychiatry and psycho-analysis, and by Drs. Modena, Do Paoli, and Mondini on the treatment of general paralysis. Trent was chosen as the place for the next congress.

THE thirtieth Congress of French-speaking Alienists and Neurologists will be held at Geneva and Lausanne from August 2nd to 7th, 1926, under the presidency of Professor Long of Geneva and Dr. R. Semelaigne of Paris, at the same time as the celebration of the centenary of Pinel's death. The following subjects will be discussed: Schizophrenia, introduced by Professor Bleuler of Zürich and Professor H. Claude of Paris; Babinski's sign, introduced by Dr. Tourney of Paris; Treatment of mental disease by work, introduced by Professor Ladame of Geneva and Dr. Demay of Clermont (Oise).

PROFESSOR ROGER, who had hitherto occupied the chair of experimental pathology in the Paris Faculty of Medicine, has succeeded Professor Richez in the chair of physiology, and Dr. Bezançon, previously professor of bacteriology in the same faculty, has succeeded Professor Chauffard in the chair of clinical medicine.

THE twenty-fifth anniversary of the foundation of the Hamburg Institute for Marine and Tropical Diseases was celebrated on October 16th.

ACCORDING to a recent census Vienna possesses 4,051 medical practitioners (1 doctor to 461 inhabitants), Graz 461 (1 to 331), and Innsbruck 189 (1 to 298).

A SMALL-POX epidemic at Milwaukee has recently come to an end after lasting for four months. Of the 500,000 inhabitants 376 contracted the disease and 86 died. Of the latter 82 had never been vaccinated, and the remaining 4 had not been vaccinated within the last twenty years.

THE well known zoologist, Professor Ehlers of Göttingen, recently celebrated his 90th birthday.