Memoranda:

MEDICAL, SURGICAL, OBSTETRICAL.

TRANSVERSE PRESENTATION WITH NORMAL PELVIS AND NORMAL CHILD.

As transverse presentations are fairly rare the following case may prove of interest:

I was called to see an Assamese tea-picker, said to have been in difficult labour for the previous twelve hours; it is rare to be asked to attend these women because they resent, for caste reasons, a man's presence, and are also very mistrustful of the methods of Western medicine. I found the patient anxious, with a clammy skin, a temperature of 98.2°, pulse 120 and thready, and rapid respiration. Further examination showed an abnormally shaped abdomen, a distended bladder, the uterus hard and slightly tender, and the foetal head in the right iliac fossa. Other foetal parts were not well felt as the uterus was strongly contracted. The child was dead and its right hand was prolapsed outside the vulva.

Previous History.—The patient had had ten previous normal deliveries, seven of the children being still alive, while the other three lived for a few years each. There was no previous history of abnormality.

deliveries, seven of the children being still alive, while the other three lived for a few years each. There was no previous history of abnormality.

Present History.—Labour had commenced at 1 a.m.; one hour later the membranes ruptred and a hand prolapsed. Labour pains had been frequent and strong but ineffective in expelling the foctus. The patient had had retention of urine for five days. During pregnancy native midwives had several times attempted to procure an abortion as the child was not wanted; this had never been done in any of her previous pregnancies.

Treatmant.—The patient was removed to the Estate Hospital. The bladder was catheterized and emptied of 18 oz. of high-coloured acid urine. The os was three-quarters dilated. Attempts to replace the hand and to perform external version failed as the uterus was tightly cortracted round the child and all the liquor amnii had drained away several hours before. Uterine contractions were not frequent, but lasted long and were very strong when they did occur. The pulse rate was now increasing. The patient was anaesthetized lightly and I attempted to decapitate the dead child, but failed as the os was tightly contracted round the shoulder girdle, thus preventing the introduction of an instrument. I amputated the prolapsed right arm at the shoulder and was then able to push up the child and get my hand into the uterus, when I seized the child's right foot, performed internal version, and delivered the child as a breech. The os quickly closed round the child's neck, preventing birth of the head. After several methods of extraction had been tried without result I decapitated the child with scissors and proceeded to deliver the retained head. Owing to the small size of the os forceps could not be used, and an attempt at perforation or cephalotripsy would have been dangerous. The patient was deeply anaesthetized, and by prolonged and forcible manual pressure I managed to dilate the os a little more and so was able to place my finger in the child's mouth and pull; u

Interesting features of the case are that the patient had had ten previous normal deliveries and that the child was normal in size and not deformed in any way; the pelvic measurements of the mother were normal, and no tumours, placenta praevia, uterine obliquity, or hydramnios were present to account for the malposition. Doubtless the manipulations of the native abortionists were responsible for the transverse presentation.

EDMUND BURKE, L.R.C.P., L.R.C.S.Ed. Mangaldai Medical Association, Dimakusi, Assam.

ADRENALINE IN CARDIAC ARREST.

A MALE infant, aged 6 months, was being anaesthetized for an operation for inguiral hernia when respiration suddenly ceased. He became pale and flaccid, and the heart stopped; he was apparently dead. I injected 5 minims of 1 in 1,000 adrenaline solution into the heart, and in less than a minute the heart began again and the baby was carried out of the theatre crying loudly, much to the relief of all present.

This happened over a year ago, but it is interesting in connexion with the discussion on heart massage.

JOHN LIVINGSTON, M.D.Durh., F.R.C.S.Ed., Barrow. Honorary Surgeon, North Lonsdale Hospital

Reviews.

CAMERON'S "DISEASES OF CHILDREN."

Discases of Children, by Dr. H. C. CAMERON, forms one of the series of Oxford Medical Handbooks, and follows the plan of this series in giving a general survey of the subject, with emphasis on certain aspects. Dr. Cameron defines the object of his book in a neat sentence, as not "a set performance, but only to sound a few chords here and there sufficient to illustrate the astonishing range and tone of the instrument." The topics he has selected for discussion deal mainly with the period of infancy, and in an introductory chapter he shows their interrelation. are nearly all included in the four great factors of inheritance, environment, food, and infection. The working of these factors is followed out in such problems as difficult cases of breast-feeding, the influence of the infant mind upon general health and digestion, the frequency and significance of catarrhal processes in infancy, certain types of inherited diathesis and their manifestations in childhood, the reaction of infants and children to the mental tone of mothers and nurses, and the interaction of digestion, infection, and purely mental influences in the nutritive disorders of infants. These problems are important, indeed fundamental, and have given rise to much discussion and not a little confusion; they are handled in this little book in an admirably clear and sensible way. These qualities are well seen in the final and longest chapter, which is on diet. The difficult subject of artificial feeding is of set purpose kept to the last, and after the other factors of inherited constitution, of personal management, and of trivial or obscure infection have been discussed. This unusual but really rational order of treatment undoubtedly facilitates the understanding of the problems of dieting in the dyspepsias of infancy; and the British reader is almost unawares persuaded into the German classification of nutritional disorders, ex constitutione, ex infectione, et ex alimentatione, though little or nothing is heard of the horrid German vocabulary of special terms. The clinical features, even in dyspeptic infants, are admirably described, and the brief accounts of treatment are most helpful.

Dr. Cameron has some friendly criticisms to make on the methods and policy of child welfare centres; but pays a high tribute to the results already accomplished by them. He also makes an earnest appeal for more consideration and more teaching of the subject of diseases of children in the medical curriculum.

As a well informed, wise, and very pleasantly written discussion of the subject in some of its general and important aspects, Dr. Cameron's little book can be warmly recommended to those engaged in general practice or in special work among children. The matter of the book is so good that the publishers might have allowed a larger page and an ampler margin, but both in what is said and in the manner of saying it the book is multum in parvo.

PARASITIC PROTOZOA.

THE Manual of the Parasitic Protozoa of Man, published recently by Colonel Craig, M.D., of the Medical Corps of the United States Army, covers a field considerably wider than is indicated in the title, in that some free-living species and also closely related forms in the lower animals are dealt with. The author's experience enables him to speak authoritatively upon the subject, and his work, the embodied results of that experience, will doubtless be extensively read and appreciated, as it certainly deserves to be.

After an introductory chapter on the classification, structure, physiology, and reproduction of protozoa and

¹ Diseases of Children. By Hector Charles Cameron, M.A., M.D. Cantab., F.R.C.P.Lond. Oxford Medical Publications. Oxford Medical Handbooks. London: H. Milford, Oxford University Press. 1926. (Fcap. 8vo, pp. ix+199. 5s. net.)

² A Manual of the Parasitic Protozoa of Man. By Charles F. Craig, M.D., M.A.(Hon.), Lieutenant-Colonel, Medical Corps, U.S. Army, D.S.M. London: J. P. Lippincott Company. 1926. (Med. 8vo. pp. viii+569; 95 figures. 35s. net.)

Obituary.

D. EDGAR FLINN, F.R.C.S.I.,

Late Medical Member, General Prisons Board, Ireland. COLONEL D. EDGAR FLINN, F.R.C.S.I., M.R.C.P.I., died on August 18th at Dun Loaghaire, co. Dublin, aged 76. He was a son of Mr. D. E. Flinn of Buenos Aires. He received his early education at the Jesuits' School at Clongowes, and his medical courses were attended at the Royal College of Surgeons, Ireland. Colonel Flinn served for twenty years in the Territorial Forces, retiring with the rank of colonel. From 1875 to 1882 he was medical officer of health in East Staffordshire. From 1895 to 1910 he was a medical inspector of the Local Government Board in Ireland, and he was then appointed medical member of the Irish Prisons Board and chief inspector of reformatories and industrial schools; he retired in 1917, and was succeeded by Dr. C. J. MacCormack. He was a member of the Viceregal Commaccormack. He was a member of the Viceregal Commission to inquire into the high death rate in Belfast in 1907, and of the Dublin Typhoid Fever Committee of Inquiry; he edited the *Health Record* (1890-94), and was for ten years examiner for the D.P.H. of the Royal Colleges of Physicians and Surgeons, Ireland. He was a member of the council of the Royal College of Surgeons in Ireland, Fellow of the Royal Sanitary Institute, and was president of the State Medicine Section of the Academy of Medicine in Ireland 1894.95 He was Academy of Medicine in Ireland, 1894-95. He was well known in the west of Ireland, where he served through two periods for the relief of distress under the Poor Law Relief Acts in 1895-96, following a failure of the potato crop. He was the author of Wintering Stations in Ireland, Rural Water Supplies in Ireland, The Rural Water Supplies in Ireland, The Public Cleansing of Towns, Irish Health Resorts, The Administration of the Public Health Act in Ireland, and many contributions to medical journals.

Dr. Francis James McArdle, who died recently at Durham, aged 65, was educated at University College, Liverpool, and at Newcastle-upon-Tyne, where he obtained the diploma L.R.C.P.I. in 1887. After serving as an assistant to the late Dr. Slater of Newcastle he removed to Durham in 1888, when he succeeded the late Dr. Wild of Gilesgate, and built up a very large practice. Dr. McArdle took great interest in municipal affairs, and was for some years a member of the Durham City Council; he later became a school medical officer. He was a member of the Durham Division of the British Medical Association. Some four years ago his health became seriously impaired, and since last September he had been almost bedridden.

The death occurred on August 16th, at his residence at Burntisland, of Dr. George Wight; he had been in bad health for some months. Dr. Wight graduated at Edinburgh University in 1903, and took the diploma in public health in 1905. He was for over twenty years in general practice in Burntisland, and had been medical officer of health for the burgh since 1910. During the war Dr. Wight served as a captain in the R.A.M.C., and saw a considerable amount of service on the eastern front. He was 45 years of age, and is survived by a wife and two sons.

The following well known foreign medical men have recently died: Dr. C. Oddo, professor of clinical medicine at the medical school of Marseilles; Dr. A. Col., professor of materia medica at the medical school of Nantes; Dr. HENSEVAL, professor of hygiene and bacteriology at Ghent University; Dr. Georges Porjet of Paris, one of the pioneers of French laryngology and a founder of the Bulletin Médical; Dr. Nigay of Vichy, director of the Journal de médecine de Paris; and Dr. Wilhelm Auten-RIETH, inventor of a colorimeter and professor of medical and pharmaceutical chemistry at Freiburg University.

The Services.

DEATHS IN THE SERVICES.

DEATHS IN THE SERVICES.

WITH regret we record the death, suddenly, on July 26th, of Lieut.-Colonel Rochford Noel Hunt, D.S.O., R.A.M.C., at the age of 53. He was born on December 7th, 1872, and was educated at the University of Dublin, where he took the degrees of M.B. and B.Ch. in 1900. He was commissioned lieutenant in November, 1900, became captain in 1903, major in 1912, and lieutenant-colonel in 1923. During the war he commanded the hospital ship Nevassa, No. 135 Field Ambulance, No. 7 and No. 42 Casualty Clearing Stations, and No. 35 General Hospital, the latter for over four years. He saw service in Egypt and France. He was twice mentioned in dispatches in 1917, was awarded the D.S.O. in 1918, and in 1919 was the recipient of the Médaille des épidémies (Vermeil), France. Heart trouble caused him to be placed on the half-pay list and ultimately to retire on retired pay on November 23rd, 1925.

Fleet Surgeon John Black Nicoll, R.N.(ret.), died in Edinburgh

Fleet Surgeon John Black Nicoll, R.N.(ret.), died in Edinburgh on July 11th, aged 87. He was educated at the University in that city, where he graduated M.D. as long ago as 1860; he took the L.R.C.S.Ed. in the same year. He entered the navy soon after, and attained the rank of fleet surgeon in July, 1882.

Universities and Colleges.

SOCIETY OF APOTHECARIES OF LONDON. THE following candidates have passed in the subjects indicated:

SURGERY.—A. K. A. Carter, M. E. M. Carter, C. E. Nicholas, J. Pattis, A. Purvis, M. Stinnesbeck, N. W. Wood. MEDICINE.—J. Dywien, R. C. Glover, K. G. B. McMahon, T. C. Pain, P. H. Bow, L. Schapera, R. S. S. Smith, J. A. H. Sykes, L. D.

P. H. Bow, L. Schapera, R. S. S. Smith, J. A. H. Sykes, L. D. Williams.

FORENSIG MEDICINE.—N. H. Allen, F. W. Barton, S. B. Browning, M. E. M. Carter, F. G. Hardaker, C. E. Nicholas, K. Roberts, L. D. Williams, N. W. Wood.

MIDWIFERY.—C. B. Ball, A. Heukamp, W. Hinds, S. Jenkinson, H. S. Littlepage, J. B. Lurie, A. Purvis, B. I. Richards, T. W. Riseley, J. M. F. Whitby.

The diploma of the Society has been granted to Messrs. N. H. Allen, C. B. Ball, A. K. A. Carter, W. Hinds, J. B. Lurie, K. G. B. McMahon, T. C. Pain, A. Purvis, P. H. Row, L. Schapers, M. Stinnesbeck, J. A. H. Sykes, and J. M. F. Whitby.

Medical Aelus.

DR. L. R. YEALLAND will open a discussion on seizures, on Wednesday, September 1st, at 9 p.m., at the Post-Graduate Hostel (Imperial Hotel, Russell Square, W.C.1), and on Friday, September 3rd, at the same hour, Dr. A. L. Gregg will deal with the sigmoidoscope in diagnosis; medical practitioners are cordially invited. On August 17th, with Dr. Long of Oklahoma in the chair, Dr. Donald Armour, introducing a discussion on head injuries, recommended an ipsolateral decompression in all cases of compression due to injuries; trenthe symptoms following contractory of the symptoms following contractory under violed to it. even the symptoms following contrecoup often yielded to it. Lumbar puncture was valuable in treating traumation neuroses, but was dangerous in the presence of high intracranial pressure due to the possible formation of a "pressure" cone." Trephining for decompression should be large. On August 19th Dr. Harold Scott, pathologist to the London Zoological Society, opened a discussion on tuberculosis among wild animals in captivity, with Dr. Simpson Wells of Capetown in the chair. The symptoms of the disease varied in animals, birds, and reptiles, but was nevertheless intercommunicable.

THE Fellowship of Medicine announces that each week THE Fellowship of Medicine announces that each week at the City of London Maternity Hospital there will be a course in obstetrics, including ante- and post-natal clinics and children's welfare clinics; application to attend should be addressed to the Fellowship. During September courses will be arranged as follows: a daily afternoon course at the Central London Ophthalmic Hospital from September 6th to October 2nd; lecture demonstrations at the Bethlem Royal Hospital on Tuesdays and Saturdays, at 11 a.m., from September 7th to October 2nd; an afternoon course at the Infants Hospital, from September 13th to 25th; 11 a.m., from September 7th to October 2nd; an atternoon course at the Infants Hospital, from September 13th to 25th; four lecture demonstrations by Dr. Heald at the Royal Free Hospital, on treatment by electrotherapy, on successive Wednesdays, at 5.15 p.m., beginning on September 22nd; a comprehensive course in orthopaedics at the Royal National Orthopaedic Hospital, from September 20th to October 2nd; and an all-day intensive course in medicine, surgery, and the specialties at the Westminster Hospital, from September 20th to October 2nd. Conjes of all syllabuses the general course to October 2nd. Copies of all syllabuses, the general course programme, and the Fellowship journal may be obtained from the Secretary of the Fellowship of Medicine, 1, Wimpole Street, W.1.

THE annual dinner of the past and present students of the Westminster Hospital Medical School will take place at Gatti's Restaurant, Strand, W.C., on Friday, October 1st; the chair will be taken by Mr. William Turner, M.S., F.R.C.S., at 7 p.m.

UNDER the auspices of the Smoke Abatement League of Great Britain an exhibition will be held at Bingley Hall, Birmingham, from September 6th to 18th, to demonstrate recent scientific advances towards the elimination of the recent scientific advances towards the elimination of the polluting substances emitted from the chimneys of factories and houses. The Public Health (Smoke Abatement) Bill introduced by the Ministry of Health has already passed through the House of Lords, and has been read a second time in the House of Commons. The exhibits will include a large industrial boiler-house believed to be almost perfect from the point of view of efficiency, fuel economy, laboursaving, and the elimination of smoke; an electric furnace for bardening and annealing near piles: a domestic section with hardening and annealing pen nibs; a domestic section, with demonstrations of coal grates which consume their own smoke; smokeless fuel; central heating; panel heating; and the latest improvements in the application of gas, electricity, and oil for producing power.

THE President of the Board of Trade has appointed a standing committee to consider questions connected with the economic use of fuels and their conversion into various forms of energy. It seems reasonable to hope that the inquiries of this committee, of which Sir Alfred Mond, M.P., is chairman, may eventually result in recommendations which will diminish the smoke nuisance.

THE KING has granted authority to Dr. Clermont Grantham-Hill, Medical Inspector to the Sudan Government, to wear the decoration of the insignia of the Fourth Class of the Order of the Nile conferred upon him by the King of Egypt in recognition of valuable services rendered.

THE second general report of the People's League of Health covers the years 1922 to 1925. The object of the league is stated to be "the raising of the standard of health of the British Empire," and in its pursuit the league is involved in many activities. It endeavours to create an enlightened public opinion to support legislation which medical and other scientific men regard as necessary to the national health. It publishes statistics relating to the low standard of health in this country. It sends deputations to the Minister of Health to urge the adoption of health measures. In May, 1924, it held a conference at the British Empire Exhibition on "the latest knowledge regarding the causes, treatment, and prevention of disease." Lectures have been given at various vention of disease." Lectures have been given at various centres and in prisons and Borstal institutions. The league has also awarded six travelling scholarships to enable the winners to visit for a short period foreign countries and to observe the health work done in those countries. The outstanding feature of the People's League of Health is the large and comprehensive Medical Council which supports and

THE American Medical Association has issued the thirtyseventh edition of its abstract of laws and rulings regulating the practice of medicine in the several States and territories of the United States. The new edition had become necessary owing to the many changes made recently in the medical practice Acts, and the information now given is correct, so far as can be learned, down to June, 1926. In the latter half of the volume information is given about foreign medical schools, and about medical registration and practice in foreign countries. To judge from the two pages devoted to medical education in Great Britain, the information collected by the Council on Medical Education and Hospitals of the Association is reliable and correct.

DR. WALDO, coroner for the City of London and Southwark, in his report for 1925 states that 512 inquiries were held and that post-mortem examinations were ordered and carried out in all inquests of death with the exception of 18. Among in all inquests of death with the exception of 18. Among the cases were 27 of suicide, 158 due to accident, and 94 to natural causes. Of the deaths due to accident 63 were caused by road vehicles—namely, 23 by motor vans, 14 by motor omnibuses, 3 by trams, 3 by charabancs, 5 by taxicabs, and 6 by motor cars and horsed vehicles; 11 pedal cyclists were killed by collisions with vehicles of various kinds. Dr. Waldo considers it a defect in the Coroners (Amendment) Bill that it does not contain a provision for the appointment of deputy coroners in districts where this cannot now be done. The worst blot in the bill, however, he thinks is that Clause 21 gives power to a coroner to order a medical practitioner to make a post-mortem examination and to dispense with a public inquest in certain cases. He considers that if a post-mortem examination is necessary an inquest also is necessary.

AT an inquest held at Nuneaton last week with regard to the death of a man, aged 52, after taking a dose of "Indian brandy," the druggist's wife informed the coroner that this was a well known preparation consisting of one part tincture

of capsicum, three parts tincture of rhubarb, and four parts spirits of nitre, and that there was no recognized dose. A post-mortem examination was performed and medical evidence was to the effect that death was due to perforation of a gastric ulcer after swallowing a mixture containing capsicum. A verdict of death from misadventure was returned.

MESSRS. LIPPINCOTT have in the press a new edition of the United States Dispensatory, edited by Dr. H. C. Wood, professor of pharmacology and therapeutics in the University of Pennsylvania, Dr. C. H. Lewall, dean of the Philadelphia College of Pharmacy, and Dr. H. H. Youngken, professor of botany in the Massachusetts College of Pharmacy. This is the twenty-first edition and will contain about 2,000 pages. It purports to deal with all drugs and preparations of the latest United States and British Pharmaconneins and contains latest United States and British Pnarmacopoeias, and contains particulars about a large number of unofficial drugs.

THE late Dr. Ernest Septimus Reynolds, Emeritus Professor of Clinical Medicine in the University of Manchester, has left estate of the gross value of £30,183 with net personalty £28,180. He has bequeathed £1,000 to the Manchester Royal Infirmary to endow a bed in memory of his work in that institution.

THE seventh annual report of the Ministry of Health (1925-26) has been published by H.M. Stationery Office, and can be obtained from it, or through any of its branches, or from any bookseller (price 3s. 6d.). The subjects dealt with in it fall under the main heads of public health, local govern-ment and local finance, poor law, national health insurance, and contributory pensions. There is a separate section on the work of the Welsh Board of Health. Most of the matters treated in it have been dealt with in official publications noticed by us on various occasions during the year.

Ketters, Aotes, and Answers.

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he address of the Irish Office of the British Medical Association is 16, South Frederick Street, Dublin (telegrams: Bacillus, Bublin; telephone: 4737 Dublin), and of the Scottish Office, 6, Drumsheugh Gardens, Edinburgh (telegrams: Associate, Edinburgh; telephone: 4361 Central).

QUERIES AND ANSWERS.

CHRONIC ULCERS OF MUCOUS MEMBRANES.

A. F." writes: A female patient, debilitated by frequent preg-nancies, suffers from ulcers in the mouth and (she states) similar ulcers on the vulval labia. Extraction of teeth, the substitution of artificial teeth, tonics, and mouth-washes of potassium permanganate have failed to cure the patient. "A. F." thinks the condition must be systemic, and would be glad to hear of some effective treatment.

ASTHMA AND BRONCHITIS.

ASTHMA AND BRONCHITIS.

DR. WILLIAM CORBET (London, E.C.) suggests that "P." would be well advised to give his patient the benefit of inhalation therapy. This treatment has been in practice at the big Continental spas for many years, and has given splendil results in my own and others' hands in this country in many stubborn cases of bronchial asthma. The treatment consists in giving daily inhalations by means of a special apparatus of suitable inhalants reduced to a dry cloud. Asthmatic cases do very well on an aqueous solution of adrenaline with 1 per cent. anaesthesin, followed or combined with an oily solution of camphor, menthol, and phenol. Severe paroxysms are often instantly stopped, and the attacks tend to diminish in intensity and duration, and finally cease altogether. The apparatus can be hired or bought in London.