

Arceid. Phaeer also wrote two medical treatises: *A Goodly Brief Treatise of the Pestilence*, and *The Regimen of Health*, a popular manual of hygiene of the type of Elyot's *Castle of Health*.

The Welsh grammarians were many, and although some of them seem to have been Catholics, their work culminated in Wales, as in England, in translations of the Scriptures, which became not only theological canons, but canons also of literary style and diction. Several of these Welsh grammarians were physicians who sought relaxation from the cares of practice in the study of what one of them characteristically enough termed "the anatomy of language."

Sir Thomas ap Williams, curate and country physician, who was one of the many medical advisers of Sir John Wynn of Gwydir, compiled a Welsh-Latin dictionary. Henry Salesbury of Dolbelider, in Denbighshire, published a Latin grammar of the Welsh language in 1593. Salesbury was a graduate of Oxford and a physician of some eminence in North Wales. He also compiled a Latin-Welsh dictionary, but it was never published.

The most picturesque, the most typical, and the most learned of the Welsh grammarians of the Renaissance was, however, another physician—Doctor Rhys. John Dafydd Rhys was born at Llanfaethlu in Anglesey. He studied at Oxford, but did not graduate at that university. In 1555 he went abroad—perhaps as a recusant, for Wood stated that he lived and died a Catholic. However that may have been, his wanderings brought him at last to Italy, the homeland of the Renaissance, where he studied medicine at the ancient university of Siena in Tuscany. He graduated as doctor of physic and then became moderator of the school at Pistoia. While in Italy he acquired a profound knowledge of Italian, and wrote two grammatical treatises in that language which were published at Padua. One was an introduction to the study of Latin; the other was a guide to the pronunciation of Italian, which became a favourite textbook for Englishmen visiting Italy.

After many years, however, the exile felt again the call of his native hills. He left Italy, that land of light and warmth, and returned to Wales, where he practised as a physician amid the sombre environment of the Brecknock Beacons. He died in Brecknockshire in 1609.

During this last period of his life he wrote a scholarly Latin treatise on Welsh grammar and prosody, and it is by this work of massive learning that he is best remembered by his compatriots. He also published a Welsh translation of Aristotle's *Metaphysics*, but the manuscript of that work has been lost.

His eminence in two lands as a grammarian has overshadowed John Dafydd Rhys as a physician, but he described himself in the preface to his Welsh grammar as "a man of harassed years in the care of the sick and the worries of business."

In the introduction to the same work, too, Humphrey Prichard referred to him as having gained the title of doctor "for his eminent studies in medicine."

The annals of the Renaissance in Wales would be the poorer if time had not preserved for us, at least in silhouette, the likeness of this insatiable old scholar. He was just such a personality as Browning has portrayed so vividly in *The Grammarian's Funeral*. Hakluyt described his contemporaries as "men full of activity, stirrers abroad and searchers of the most remote parts of the earth." John Dafydd Rhys was just such a one, but adventuring for learning as others of his time and generation adventured for spices and gold moldores.

LITERATURE.

The MSS. of the Wynn Papers at the National Library of Wales. Records: *The Urinal of Physick*.

Llwyd: *The Treasures of Helth*.

Rhys: *Cambrobrytannicae Cymraecae Linguae Institutiones et Rudimenta*.

Lewis: *The Welsh Leech Book*.

Williams: *Eminent Welshmen*.

Phillips: *History of Cilgerran*.

The Dictionary of National Biography.

Information kindly supplied by the Librarian and the Assistant Librarian at the National Library of Wales.

Memoranda:

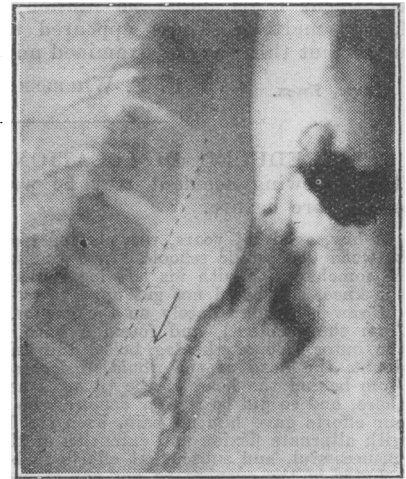
MEDICAL, SURGICAL, OBSTETRICAL.

RETROPHARYNGEAL ABSCESS SECONDARY TO FOREIGN BODY IN HYPOPHARYNX.

A RETROPHARYNGEAL abscess, the result of injury due to the swallowing of a foreign body, is rather unusual; the condition was found in the following case.

A man, aged 45, was admitted to the aural department of the Manchester Royal Infirmary with the history of having swallowed, two days previously, a piece of chicken bone. He was unable to swallow any solid food, and liquids only with pain and difficulty. There was some obstruction to free breathing.

The senior house-surgeon examined him with the mirror and also with Jackson's laryngoscope, but was unable to find any foreign body, although an x-ray report indicated a small elongated one at the level of the sixth cervical vertebra. Six hours later he was examined under general anaesthesia by Mr. F. W. Wrigley, no foreign body being seen. The dysphagia and pain now increased, with rise of temperature to 100.4° F., and two days later he was referred to me by my colleague. On examination with the mirror I found very marked bulging forward of the left posterior pharyngeal wall, partially hiding the left arytenoid from view; the left arytenoid and left aryteno-epiglottidean fold were very swollen and oedematous; much frothy saliva and mucus was collected about the swelling and larynx. The act of swallowing was very painful, and on pressing the larynx over from the right to the left towards the tender site, as indicated by the patient, a sharp pain was caused. This sign Dr. Gabriel Tucker regards as definitely indicating the presence of a foreign body. A radiogram taken that day showed a small spicule of bone embedded in the retropharyngeal wall at the level of the sixth cervical vertebra and marked bulging of the wall; the passage of barium paste had been seen obstructed at this point. As the patient was not ready for an endoscopic examination this was postponed until the following morning. During the night he brought up an ounce or more of pus and much mucus with a trace of blood. In the morning, after injection of morphine and atropine, under cocaine anaesthesia, I passed the short Jackson's oesophageal speculum. The larynx was still very inflamed and oedematous, but the pharyngeal swelling was much less. No foreign body was seen, but a tear on the posterior wall was found from which pus was expressed as the instrument moved near it. It was thought desirable not to open the abscess further, and the patient was given an adrenaline spray (1 in 10,000) and bismuth carbonate powders. His temperature remained at 100.2° F. for two more days, then the laryngeal oedema and post-pharyngeal swelling rapidly subsided, and in three days he was discharged, swallowing normally.



Arrow=chicken bone. Area between continuous and dotted line=swollen posterior pharyngeal wall. Very black shadows=bismuth.

A subsequent radiogram showed no sign of a foreign body, and it seems certain that this was either vomited or swallowed when the abscess broke during the night; after this, pressing the thyroid or cricoid cartilage over to the left no longer elicited any pain or increase in the tenderness at the site complained of by the patient. This sign must be regarded as a very valuable one in cases of suspected foreign bodies which are non-opaque to x rays.

D. LINDLEY SEWELL,

Honorary Aurist and Laryngologist to the Manchester Royal Infirmary.

LOCAL ASPHYXIA IN A YOUNG CHILD.

SUCH a case as the following seems to be sufficiently rare to merit recording.

A girl, aged 2, was wheeled several miles in a push-chair on a chilly evening. When she was taken out on reaching home it was found that she was unable to stand, and that her feet were blue, swollen, and painful. On the next morning (Thursday) the left foot was still affected, but the right foot had recovered. In the evening both feet were normal, and the child was able to trot

about as usual. On Friday morning the left was healthy and the right was affected; in the evening both were normal. On the mornings of the following Saturday, Sunday, and Monday both feet were affected; each evening they became normal again. After Monday there was no recurrence.

I was called to see the child on Saturday morning, when I found both feet deeply cyanosed (especially the plantar surfaces), swollen, and extremely painful, so that she screamed with apprehension if any attempt was made to handle them. I was informed that on the first evening the lower third of both legs had been blue and swollen, but that after this the trouble was confined to the feet and ankles.

Two bowls were filled, one with hot and the other with cold water. For ten minutes I plunged the feet first into one, then into the other, and the condition markedly improved. The cyanosis quickly disappeared, giving place to an appearance of hyperaemia. The mother continued this treatment every two hours, and reported considerable improvement.

On the Monday morning I exposed the legs and feet to irradiation by a mercury vapour lamp, but only five exposures were tried, the child being so well that her mother did not bring her to me again. This was four months ago, and there has been no recurrence.

The abrupt onset and paroxysmal nature of the attacks leaves little doubt as to the diagnosis. With regard to the treatment I am under no illusion, although it may have helped matters. There appeared to be no blood in the urine, but this was not examined microscopically.

Grays, Essex.

F. F. WHEELER, M.R.C.S., L.R.C.P.

SELF-REDUCED DISLOCATION OF THE FIBULA.

THE following accident may be worth recording, because of its rare nature.

A boy, aged 18½ years, was playing (forward) in a rugby match between two public schools. In a rough-and-tumble near the line he somehow fell with his left leg twisted, felt sudden pain below the knee, and could not get up.

I saw him immediately on the ground (being only a few yards from the accident), and found a hard, roughly oval swelling on the outer side of the leg below the knee-joint. It was, without doubt, the head of the fibula, dislocated forwards and outwards from behind the head of the tibia. I tried to reduce it then and there, and so did two other doctors who were present; but though our efforts gave him no pain, even the hardest pressure, together with alternate flexion and extension of the knee-joint, was entirely unsuccessful, and subsequent efforts in bed also failed.

Later in the evening he got out of bed and put his foot to the ground, with slight pressure, heard a click with slight pain, and found that the lump had vanished, and that his leg felt perfectly normal. X-ray pictures were taken before and after (unfortunately the exposures were very poor), and show quite clearly the difference in angle made by the heads of the tibia and fibula on the two sides.

Presumably the head of the fibula was forced through a narrow rent in the strong ligament binding it to the tibia, which became tight and rigid behind it, and any effort to reduce the head failed, and was bound to fail, unless the exact place of tearing was relaxed sufficiently to let the head slip back.

There was no fracture of the fibula, no involvement of the knee-joint, and no subsequent swelling of the surrounding tissues, and the patient was able to walk normally as soon as the self-accomplished reduction was effected.

L. R. LEMPRIERE,

Medical Officer, Haileybury College.

British Medical Association.

CLINICAL AND SCIENTIFIC PROCEEDINGS.

STAFFORDSHIRE BRANCH.

General Paralysis of the Insane.

A MEETING of the Staffordshire Branch was held at the North Staffordshire Royal Infirmary on December 6th, with Dr. G. H. SOWRY, the president, in the chair.

Dr. W. F. MENZIES, who opened the proceedings with some notes on general paralysis of the insane, stated that he would emphasize points which were not generally stressed in textbooks and current literature on the subject, and that his remarks would apply particularly to his experience in North Staffordshire. He discussed the place of lead as an etiological feature in the causation of dementia paralytica, and concluded that, while this metal had probably some causative significance, the manner of its action was entirely unknown. He next touched upon the thorny

question relating to the possibility of there being two strains of *Spirochaeta pallida*; in the event of there being only one strain, the possibility of that one having two stages was discussed. In this connexion the speaker mentioned the efficacy of the metals in the treatment of interstitial syphilis, in contradistinction to their comparative uselessness in parenchymatous syphilis. He pointed out that this relationship was reversed in the case of malaria therapy, this form of treatment being extremely useful in parenchymatous syphilis, but of no value in interstitial syphilis. Passing to the symptomatology of the disease, Dr. Menzies mentioned the almost constant presence of euphoria and the extreme diagnostic significance of this symptom. With regard to physical signs, the speaker emphasized the great reliability of double miosis as a sign, and the corresponding unreliability of a bilateral dilatation of the pupils. Referring to malaria therapy in dementia paralytica, Dr. Menzies pointed out that the foundation of this form of treatment lay in the observation, made a long time ago, that an acute disease occurring in a general paralytic usually improved the condition to a very marked degree. Much work on this subject had been done in Vienna, and malaria had been selected as being the most suitable acute infection to produce in a paralytic, for the reason that it was easily controlled by the exhibition of quinine; in this connexion it was interesting to note that induced malaria was more amenable to quinine than was natural malaria. The rationale of the treatment was unknown. Dr. Menzies stated that while, originally, twelve rigors had been allowed to occur before the disease was cut short by quinine, it was now considered the best practice to allow only one rigor with three days or so of fever. It appeared that this method retained all the good points of malaria therapy, but eliminated all the dangers inherent in allowing the patient to have a more or less prolonged series of rigors. The induced malaria having been cut short by quinine, tryparsamide was administered, and this, if necessary, was followed by a further induction of malaria.

The Sequels of Gastro-enterostomy.

Mr. F. NESFIELD COOKSON read notes upon an inquiry into the after-history of gastro-enterostomy, and recounted the results which he had obtained from this operation in twenty-four cases operated upon by him between 1920 and 1924. The cases were divided into the following groups:

Chronic gastric ulcer	...	...	...	5
Chronic pyloric ulcer with obstruction	...	...	...	4
" " without obstruction	...	...	...	2
Chronic duodenal ulcer with obstruction	...	...	...	1
" " without obstruction	...	...	...	6
Perforated ulcer (gastric and duodenal)	...	...	...	3
Malignant disease	...	...	...	3

Mr. Cookson discussed in detail the results which he had obtained in the cases of non-malignant ulceration. The results were extremely good in the majority of instances, being least favourable in the cases of perforated ulcer. The speaker explained his operative technique, and mentioned unusual anatomical relations which might be met with in the course of the operation. In the three instances of malignant disease the operation was undertaken for the relief of pain and vomiting, and in these cases the growth was not removable.

Routine Radiography.

Dr. BROMLEY read a paper on some questions and experiences in routine x-ray work. Dr. Bromley explained that the interpretation of x-ray photography was really an interpretation of relative densities, and that it was only by realizing this that x-ray photographs could be construed to the best advantage. He emphasized the great importance of routine in technique, and stated his belief that alterations in technical routine should be made only after the most careful consideration and in the light of accumulated experience. The speaker showed on the screen a large number of x-ray photographs. In those showing bones and joints he indicated the necessity of eliminating the possibility of unusual bony formations before arriving at a diagnosis of fracture. In this connexion he showed instances of the two small ossicles occasionally present, one near the base of the fifth metatarsal bone, and the other in the neighbourhood of the joint between the tarsal scaphoid

System of Gynaecology, and on "vaginal operations" to Cheyne and Burghard's *Operative Surgery*. His book, entitled *Outlines of the Diseases of Women*, reached its fourth edition in 1906. Among his contributions to medical journals may be mentioned papers on the management of the pregnant, parturient, and lying-in woman suffering from cardiac disease; on rupture of the vagina during labour; on hepatic toxæmias complicating pregnancy and labour; and on the therapeutic influence of x rays on female pelvic disorders. For some years he acted as joint editor of the *King's College Hospital Reports*.

As an obstetrician he was noted for thoroughness and remarkable dexterity, and these qualities, combined with dignity and charm of presence, brought him a large private practice. His method of handling a case from beginning to end was an object lesson to the young accoucheur. In the gynaecological theatre his technique was marked by scrupulous attention to detail and unhurried precision at every stage of the operation.

Sir John Phillips married in 1890, and leaves a son and three daughters; his first wife died in 1917. He married again in 1926. His later years were clouded by progressive failure of sight, leading to almost total blindness.

THE LATE DR. MICHAEL DAVITT.

WE have received from Dr. John Mills, honorary secretary of the Connaught Branch, the following appreciation.

The tragically sudden death of Dr. Michael Davitt has evoked the widest sympathy of his professional brethren and the general public, not alone in Galway, but throughout Ireland. As a student he had had a career of distinction rarely equalled in the annals of the National University of Ireland, of which he was a graduate, and he achieved a unique place in the affection and regard of his fellow students, being with them in the social and athletic life to the fullest extent. The son of one of the ablest and most disinterested men who has contributed in a very large degree to the making of recent history in Ireland Davitt was very thorough in anything he undertook, and especially made his mark in the devoted work he gave to the organization of the Central Hospital in Galway and its remodelling into a modern hospital from the form of a workhouse, an undertaking begun some few years ago, and entailing a vast amount of thought and care. For the accomplishment of this work Davitt was appointed physician to the Central Hospital, and fulfilled his task so fully and completely that the hospital which now replaces the old Union Hospital is a modern structure which can very favourably challenge comparison with similar ones in much larger areas. He was unremitting in the discharge of his duties, seeking only and always the good of his patients, by whom he was greatly esteemed. His professional colleagues regret a courteous, kindly gentleman, who was always helpful and considerate, and who took a real pleasure in assisting a professional colleague. With such a character, alert intellect, and keen interest in the profession he was frequently engaged in consultation.

Universities and Colleges.

UNIVERSITY OF OXFORD.

At a congregation held on December 17th the following medical degrees were conferred:

D.M.—A. Q. Wells.
B.M.—J. C. Neely, G. G. Hill, Joyce Wright, Margaret A. L. Herbertson.

UNIVERSITY OF LONDON.

THE following candidates have been approved at the examination indicated:

THIRD M.B., B.S.—*G. W. Ayres, *†Elizabeth Cooper, *†H. P. Hims-worth (University Medal), *†C. A. Keele, *†J. W. Rake, *†R. W. Reid, S. I. Abrahams, G. T. Allerton, Sophia Antonovitch, H. Avery, Oliver R. Binyon, G. W. Black, G. N. Box, Marjorie F. Brierley, Emily E. Cass, S. Craddock, W. P. M. Davidson, J. Davies, S. J. M. De Navasquez, Irene Dixon, Marjorie M. Dobson, C. P. Donnison, Elsie M. Douglas, D. Ellis, Alexandra G. H. English, M. R. Ernst, H. Evans, Geraldine W. Everett, A. P. Farmer, A. McK. Fleming, G. G. Gillam, Helen M. Herbert, Alice D. M. Hodge, Muriel S. Hulke, P. Inwald, I. J. Jones, R. M. Jones, D. F. Kaasar, E. M. Lourie, S. McGladdery, M. M. M. Jones, H. Mannington, W. H. Miller, M. B. Mody, C. F. Moore, G. E. B. Payne, Mary E. Pease, D. Preiskel, M. Rothkopf, Clarice A. Skidmore, C. F. J. Smith, Edith J. L. Smith, E. R. Smithard, Eileen R. B.

Snow, J. G. Thwaites, Phyllis D. Towell, Scott-Russell Trick, Gladys M. Tullidge, A. G. Watkins, A. R. N. Whitlow, P. C. Wickremesinghe, L. A. Willmott, Jessie Wiltshire, Elsie E. Wright, Winifred M. Wright. (Group D): Nancy M. Badeley, S. W. Barber, Annie G. Busher, Beatrice A. Butterworth, K. J. H. Davies, Hilda C. Dean, C. J. Donelan, M. Footerman, A. P. Gaston, H. N. W. Harley, Kathleen Horne, P. Kaplin, G. H. Livingstone, J. F. Mackenzie, K. W. Mackie, Hermia M. Mills, M. L. Mistri, Doreen G. C. Nixon, Joan M. Oldaker, S. A. Wickramasinghe. (Group I): Lucy E. Arthur, Julia C. H. Avery, E. C. B. Butler, E. O. Harris, Dorothy P. Heath, J. V. Macgregor, Joyce Morgan, D. T. R. Morris, C. B. Picken, H. W. A. Post, H. G. G. Robertson, Elizabeth H. Scutfield, E. J. J. Smith, P. A. M. Soutter, Frances J. Vinter, W. H. S. Wallace, A. J. Watson, J. W. Wigg, E. A. Wood, B. A. Young.

* Honours. † Distinguished in Surgery.
‡ Distinguished in Medicine. § Distinguished in Midwifery.
¶ Distinguished in Pathology.

UNIVERSITY OF BIRMINGHAM.

At a congregation held on December 14th the following medical degrees were conferred:

M.D.—H. P. Jameson.
M.B., Ch.B.—T. C. Dance, L. W. Downie, A. H. J. Jackson, T. W. Masters, M. K. Omar, Elizabeth S. Smith, K. A. Thomas.

UNIVERSITY OF LIVERPOOL.

DR. J. H. DIBLE, Professor of Pathology and Bacteriology, Welsh National School of Medicine, Cardiff, has been appointed to the George Holt Chair of Pathology.

Dr. Warrington Yorke, Professor of Parasitology in the University since 1914, is appointed to the Alfred Jones Chair of Tropical Medicine.

The following candidates have been approved at the examination indicated:

M.D.—T. A. Clarke, R. W. Eldridge, J. E. Howie, D. U. Owen, Helen Standring, A. G. Wilkinson.
FINAL M.B., Ch.B.—*Elizabeth B. Robson, *†E. L. Rubin. (Part I): A. E. Adams, N. J. Crawford, J. H. St. B. Crosby, A. Dala, J. E. Jones, L. de Jongh, Hilda M. C. MacMahon-Garry, *J. S. Mather, C. T. Mercer, G. W. Molyneux, E. E. Prebble, Ivy H. Rowlands, G. A. Talwrn-Jones, F. J. Welton. (Old Regulations, Part I): A. Gardner, Teresa Lightbound, R. G. Walker. (Part II): F. J. H. Crawford, A. M. Russell.

* With distinction in Surgery.
† With honours, Class II.

UNIVERSITY OF MANCHESTER.

THE following candidates have been approved at the examination indicated:

FINAL M.B., Ch.B.—Alice M. Butterworth, I. M. Hughes, E. P. Johnson, J. S. Miller, J. W. Murray, Evelyn I. M. Sheppard, R. F. Stubbs, R. Whitehead, R. T. Wimmer, F. Wraith. (Forensic Medicine): L. Bold, Christobel M. Hall, E. Z. Levy, A. S. McGowan, A. Taylor. (Hygiene and Preventive Medicine): L. Bold, Christobel M. Hall, E. Z. Levy, A. S. McGowan, J. H. Pattison, E. J. B. Sewell, A. Taylor. (Obstetrics and Surgery): Mary I. C. Mackintosh, Marian M. Reekie.

UNIVERSITY OF EDINBURGH.

A GRADUATION ceremony was held in the Upper Library Hall of the University on December 14th, when the following degrees were conferred:

M.D.—A. M. Affleck, H. Buist, A. H. Campbell, J. L. Chisholm, †E. C. Ellis, *A. M. M. Grierson, S. E. Kirk (in absentia), D. R. Lewis, †N. Macleod, Rosemary O. Morris, H. A. Murray (in absentia), †B. R. Nisbet, *D. H. Paterson, †A. Ritchie, A. Ronald, *Jessie C. B. Sym, †A. B. Walker, †J. Ware, Alexandra A. Warnock (in absentia).
M.B., Ch.B.—C. P. Beattie, L. Begleman, P. Beinart, G. M. Bell, R. H. E. Bell, D. Blatchley, Matilda F. Correa, R. Cumming, †I. A. G. L. Dick, P. K. S. Gupta, I. Karro, Anna M. M. Kerr, E. T. Low, C. MacGaffey, J. McLean, W. More, J. H. Paton, C. Bamdeholl, A. Ramsay, R. S. Ritson, I. R. W. Smith, C. J. S. O. Taylor, W. P. Wallace.
M.A.—Dr. R. T. G. Aickin.

* Highly commended for thesis.
† Commended for thesis.
‡ Passed with honours.

UNIVERSITY OF DUBLIN.

TRINITY COLLEGE.

At the first winter commencements, held on December 11th, the following degrees were conferred:

M.D.—A. E. A. O'Byrne.
M.A.O.—A. A. Shaik.
M.B., B.Ch., B.A.O.—G. C. Dockeray, Mollie Finegan, J. Horwich, W. J. E. Jessop, J. E. McMahon, C. M. O'Brien, J. W. Pigott, R. J. G. Reid, J. Sayers, Nora A. Stack, A. A. Thompson, D. F. Walsh, I. F. Rathaus (in absentia).
LICENCE IN MEDICINE, SURGERY, AND OBSTETRICS.—E. du P. Meiring.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.

At the recent primary examination for the Fellowship, when 168 candidates presented themselves, the following 45 candidates were approved:

A. Ali, R. M. Alderton, M. A. E. Anous, E. T. Bannister, J. H. B. Beal, F. Bicknell, G. H. H. Booth, G. N. Clark, A. C. Copley, D. Davidson, J. R. Dogra, L. P. J. Evans, F. G. Fenton, M. L. Forbury, R. L. Forsyth, F. Forty, A. C. Fraser, T. Giblin, A. J. B. Goldsmith, R. Grainger, J. I. Griffiths, H. E. Harding, C. H. S. Harris, A. Helmy, T. V. Jacob, E. F. King, R. J. C. Maxwell, S. J. Mehta, J. G. Milner, R. W. C. Murray, J. E. A. O'Connell, M. C. W. Oldfield, J. H. Peel, G. M. Phadke, A. S. Rajasingham, A. de W. Ranken, J. H. Saint, J. G. Sandrey, C. M. Smithies, G. V. Stephenson, N. C. Tanner, T. Thornton, J. B. Tracey, D. G. Wigley, J. W. Wilson.

Medico-Legal.

ACTION AGAINST MATERNITY HOME TRUSTEES AND COMMITTEE OF MANAGEMENT.

THE hearing of an action before Mr. Justice Avory and a special jury in the King's Bench Division, in which one of the three plaintiffs, David Ross, an infant suing by his father, claimed damages for personal injuries received through the alleged negligence of the defendants as trustees of the Crayford Maternity and Nursing Home, the committee of management of the home, and Nurse Campbell, a member of the staff, terminated, after proceedings extending over several days, on December 10th, when the members of the jury found themselves unable to agree, and were accordingly discharged without a verdict. The mother of the infant also claimed damages for personal injury and alleged breach of contract, and her husband claimed special damages by reason of the injuries to his wife and child. The defendants denied any breach of contract or negligence, or that the plaintiffs suffered any damages as alleged.

It appeared that the infant was born in the home on November 25th, 1926. Eight or nine days later, following the usual practice in the establishment, he was taken from his mother at 9 p.m. and placed in a cot in a basement kitchen. The cot, it was stated, was not protected or enclosed, and the kitchen floor was about 3 feet below the level of the ground. At about 1.30 a.m. Nurse Campbell, who was on night duty, heard the infant cry, and on going to the cot saw a rat emerge from it and disappear through the window. It was found that the child's face had been bitten. Mrs. Ross, giving evidence, said that she was awakened at 6 a.m. and taken down to the kitchen, having been told that her baby had met with an accident caused by a cat. She found that the baby's face was bleeding terribly, and this gave her so great a shock that her sleep was broken. She and her husband complained that the authorities at the home were negligent in not protecting the cot, it being well known that the place was infested by rats. In cross-examination, Mrs. Ross agreed that, but for the accident, she had no fault to find with the way in which the home was conducted. She stated that when her doctor visited her he told her she had had a severe shock to her nerves, but she did not tell the matron of the home. After she left the home she was under treatment for two months, and had to employ a daily help and a housekeeper.

Dr. W. R. Murison, Erith, said that his partner attended Mrs. Ross in her confinement. He visited the home on the day of the accident and saw the nurse, who told him of it, and said that they had told Mrs. Ross that a cat inflicted the injuries to save her feelings and prevent her being shocked. He saw the baby, whose wounds had been dressed with iodine. The right side of the face from the forehead down to the chin had been cut and scratched and bitten in many places. The worst wounds were just below the right eye and a little farther down the cheek. Those were bites; the other injuries were scratches. At present the worst deformity was that part of the right eyelid was pulled down by a scar. The scratches were now better, but the deformity was bound to be permanent unless something was done. The effect of the accident and the sight of the child on the mother was what it would be on any woman: it had upset her nervous system considerably. Mr. Ross, giving evidence, stated that, when motor-ing with his wife, she had twice fainted when rats ran across the road. A gardener formerly employed at the home averred that during 1923 and 1924 rats were often seen running along the banks of the River Cray, by the home, and across the lawns, and a rat-catcher said he had seen rats emerge from out-buildings and run across the lawn.

Dr. W. A. Rogerson, Bexley Heath, said that he was honorary medical superintendent of the home at the time of the occurrence. He had attended his own cases there for four or five years, and had sent his wife there for convalescence. The home was in every way a fit and proper place for nursing; it had a most efficient matron and staff. He had never seen a rat in the home. Answering Mr. Melville, for the plaintiffs, Dr. Rogerson said that he had no recollection of having read a letter sent to the home from the clerk of the local urban council complaining that a report of the occurrence had not been sent to the council. Miss C. E. M. Campbell, giving evidence, stated that she had been night nurse at the home for the last four years, and described the occurrence of the incident, after which, she stated, she at once picked up the baby and ran with him to the matron, who was in bed. The infant plaintiff's face was washed and dressed with sterile gauze. It was not true that when Mrs. Ross was taken to the kitchen the infant's face was covered with blood.

Dr. C. F. Knight, Dartford, who was medical superintendent of the home till September last, said that the babies were put into the kitchen with his approval; he did not think it was a dangerous thing to do. Dr. C. M. Ockwell, one of the defendants and the medical officer of health for Crayford, said that he and his co-trustees had nothing to do with the management of the home. He was medical superintendent for the first two years, and it was during that time that the practice was initiated of putting the newborn babies into the kitchen for the night. Evidence was given by a surveyor that he had examined the home in October last, and that there were no rat-holes in the kitchen, and by a sanitary inspector that he had seen no sign of rats in the house and grounds.

On December 10th the matron of the home, Miss Mina Walker, gave evidence to the effect that she had never seen or heard about any rats in the house before that occurrence. She afterwards

described the events which followed the accident, saying that there was no indication while the mother was in the home that she was suffering from shock.

Dr. H. W. Barber said that he examined the infant plaintiff on April 11th, 1927, when he was brought by his parents to the witness's consulting room. There was a scar over the bridge of the nose and one from the inner corner of the right eye; also two others beneath the eye and two punctate scars on the forehead. The chief ones were on the area of skin below the right eye. The healing of the scars appeared to be quite sound, and there was no pulling down of the lower eyelid.

His Lordship asked Mr. Melville how he made any case against the trustees. Mr. Melville replied that he and his friend had discussed the matter, and he did not think his lordship would be troubled with that point. Counsel addressed the jury, and his lordship summed up. The jury, after being absent about two hours, intimated that they were unable to agree, and, as already stated, were discharged.

Medical News.

THE Royal College of Physicians of London will be closed from Saturday, December 22nd, till Saturday, December 29th, both days inclusive.

THE Christmas lectures at the Royal Institution this year will be on "Sound Waves and their Uses," by Mr. Alexander Wood, lecturer in physics in the University of Cambridge; they will be given at the Institution of Electrical Engineers, Victoria Embankment. The general courses of lectures to be given before Easter at the house of the institution (21, Albemarle Street), include six lectures on "Evolution and the Problem of Species," by Professor Julian Huxley; and three lectures by Sir William Bragg on "The Early History of X Rays." The Friday evening discourse on March 1st will be by Sir Robert Robertson on the "Infra-red Spectra," and on March 22nd by Sir Ernest Rutherford on "Penetrating Radiations."

SESSIONAL meetings of the Royal Sanitary Institute will be held at 90, Buckingham Palace Road, S.W.1, on Tuesday, January 8th, 1929, at 5.30 p.m., and on Friday, February 1st, at 5 p.m. Professor Bostock Hill will open a discussion on cleanliness as the basis of health at the first meeting, and at the second there will be a discussion on the civilian population and chemical warfare, introduced by Dr. F. R. Humphreys.

THE nineteenth annual exhibition of the Physical and Optical Societies will be held from January 8th to 10th, 1929, at the Imperial College of Science, South Kensington. The exhibition will be open in the afternoon from 3 to 6 p.m., and in the evening from 7 to 10 p.m. Lectures will be given at 8 o'clock each evening. On January 8th Professor F. L. Hopwood will describe experiments with high-frequency sound waves; on January 9th Mr. Conrad Beck will deal with lenses; and on January 10th Mr. A. J. Bull will speak on some colour problems in photo-engraving. Tickets, which are required for the first two days, may be obtained from the secretary of the Physical and Optical Societies, 1, Lowther Gardens, S.W.7.

AT the annual meeting of the Metropolitan Hospital Sunday Fund at the Mansion House, London, on December 17th, it was reported that the amount collected last year was £85,414, showing a decrease on the previous year of £1,520. Collections in the churches amounted to £35,089, this being the smallest total since 1914. The distribution committee reported that 227 institutions, 4 more than in 1927, had applied to participate in the Fund, and recommended the distribution of £81,310.

THE fifty-first annual meeting and dinner of the Old Epsomian Club was held at the Trocadero Restaurant on December 13th, and attracted a "record" attendance. The new president, Dr. H. C. Pretty of Kettering, was in the chair, and proposed the toast of "Floreat Epsomia," commenting on the value of the influence of the masters at Epsom College on the character of the boys in the earlier years of the history of the school. In responding, the headmaster, Mr. A. C. Powell, mentioned the great services rendered to the club by the late president, Sir Cecil Armitage. He referred to the excellent progress made by the club in the last few years, and then related the more salient scholastic and athletic successes achieved by the school in the previous months. Mr. A. C. Parkinson proposed the health of "The Guests" in an entertaining speech, and, in replying to it, Dr. J. W. Carr told various witty stories. Mr. G. E. Waugh, in a highly amusing speech, waxed reminiscent over the earlier connexion of Dr. H. C. Pretty with the school, and proposed the toast of his health. The president suitably responded.

A THREE months' course of lectures and demonstrations on clinical practice and on hospital administration for the diploma in public health will be given at the North-Eastern Hospital, St. Ann's Road, Tottenham, N.15, by Dr. F. H. Thomson, medical superintendent, on Mondays and Wednesdays, at 4.45 p.m., and alternate Saturdays at 11 a.m., commencing on Monday, January 7th, 1929. The fee for the course, which complies with the requirements of the revised regulations of the General Medical Council, is £4 4s. A course under the old regulations may be taken for £3 3s. The fees should be sent to the Clerk of the Metropolitan Asylums Board, Victoria Embankment, E.C.4.

Letters, Notes, and Answers.

All communications in regard to editorial business should be addressed to **The EDITOR, British Medical Journal, British Medical Association House, Tavistock Square, W.C.1.**

ORIGINAL ARTICLES and LETTERS forwarded for publication are understood to be offered to the *British Medical Journal* alone unless the contrary be stated. Correspondents who wish notice to be taken of their communications should authenticate them with their names, not necessarily for publication.

Authors desiring REPRINTS of their articles published in the *British Medical Journal* must communicate with the Financial Secretary and Business Manager, British Medical Association House, Tavistock Square, W.C.1, on receipt of proofs.

All communications with reference to ADVERTISEMENTS, as well as orders for copies of the *Journal*, should be addressed to the Financial Secretary and Business Manager.

The TELEPHONE NUMBERS of the British Medical Association and the *British Medical Journal* are MUSEUM 9861, 9862, 9863, and 9864 (internal exchange, four lines).

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The address of the Irish Office of the British Medical Association is 16, South Frederick Street, Dublin (telegrams: *Bacillus, Dublin*; telephone: 62550 Dublin), and of the Scottish Office, 7, Drumsheugh Gardens, Edinburgh (telegrams: *Associate, Edinburgh*; telephone 24361 Edinburgh).

QUERIES AND ANSWERS.

INCOME TAX.

Replacement of Car.

"J. K." has been informed by the inspector of taxes that the allowance is "either the cost of the new car less the amount received for the old car, or the cost of the old car less the amount received for the old car, whichever is the less." Is this correct?

* * * Yes. There are, in effect, two different limits to the amount of the allowance; the first is that a taxpayer cannot claim to deduct more than the out-of-pocket cost—the former of the above alternatives—and the second limit is that the allowance must not extend to the provision of a better car; it must not include further capital outlay. We may perhaps add that the second alternative would not necessarily apply if the cost of cars generally were rising.

Payment under Superannuation Scheme.

"F. J. B." holds an appointment and pays £100 a year under a superannuation scheme. What is the appropriate allowance? Can he claim deductions in respect of subscriptions to medical societies?

* * * The question is dealt with in Section 32 (3) of the Income Tax Act, 1918, as amplified by Section 26 of the Finance Act of 1920. The result of a somewhat complicated provision is to give payments made in connexion with such a superannuation scheme an allowance equivalent to that given formerly for payments made to life assurance companies under policies to secure deferred annuities. Possibly the regulation which "F. J. B." has in mind is that relating to compulsory deductions by Act of Parliament. The appropriate allowance, therefore, is £100 at 2s., if "F. J. B.'s" total income does not exceed £1,000, and 3s. in the £ if it exceeds £1,000, but not £1,500. The subscriptions can be deducted if membership of the societies in question is a condition of the employment.

Allowance for Children during Education.

"W. M." has two sons undergoing medical and dental training as hospital students. The inspector of taxes demurs to the usual rebate, on the ground that they are receiving vocational, as distinct from educational, training.

* * * We assume that the students in question have not yet qualified—special post qualification training might raise difficult questions. On that assumption we are at a loss to understand

the inspector's attitude in this case, as it seems at variance with general practice elsewhere. If he adheres to his view we suggest that "W. M." might place the facts before the Board of Inland Revenue, sending his communication to their Secretary at Somerset House, W.C.2.

LETTERS, NOTES, ETC.

TREATMENT OF UTERINE SEPSIS.

DR. MURIEL KEYES (Harrogate), in the course of a letter on the treatment of septic uterine conditions (puerperal and non-puerperal), writes: By a slight modification of the Remington Hobbs method of preparing the patient and using a bivalve speculum, I have been able to treat these cases single-handed. The patient lies across the bed, on a mackintosh, with her buttocks well over the edge and towards the light, and keeps her knees on to her chest. The legs are covered from foot to groin with warmed towels or a sheet, and 1½ pints of antiseptic solution are poured over the vulva. The inner labial surfaces, etc., are cleansed by widely separating the labia, pouring on antiseptic lotion, and finally placing a sterile pad at the vaginal orifice in such a way that the labia, when released, will keep it in position. Three bowls (flamed) are required, one for swab forceps and swabs soaked in antiseptic (but squeezed fairly dry), another containing the bivalve speculum and Hobbs "introducing" forceps in antiseptic lotion, and the third containing a syringe (with a catheter attached) filled with warmed glycerine. The third bowl stands in a basin containing very hot water, to ensure that the syringe and glycerine shall remain warm. The operator, after preparing his hands, knocks down the vulval swab, introduces the speculum, and cleanses the cervix. He now lifts the syringe from the bowl, expresses air from the syringe and catheter, and by means of "introducing" forceps raises the free end of the catheter and passes it to the external os. The glycerine is expelled slowly to facilitate the passage of the catheter within the canal and to cleanse the canal from below upwards; a little to-and-fro play on the catheter allows for the return flow. While the patient is being irrigated she is asked to breathe deeply and regularly, with her mouth wide open. If she is in severe pain before the treatment her knees should not be drawn up to the chest, but her feet placed on two chairs widely separated. The operator then kneels between the chairs and needs a head light. I use monsol for sterilizing the vulva, etc., and for my own hands, swabs, and instruments.

INITIALS IN THE "MEDICAL REGISTER."

THE General Medical Council recently had an application from a medical man whose second Christian name is "Hannah" to have this name substituted in the *Medical Register* by the initial "H." Presumably he found a female name occasionally gave rise to confusion, although there have been many instances in history of distinguished men, who generally were godsons of queens or great ladies, bearing female Christian names. But it has never been the custom to allow initials to take the place of names in the *Medical Register*. There were a few such cases many years ago, and there is still on the *Register* one practitioner whose second name—not initial—is "C." This gentleman, on being written to by the Registrar, replied that "C" was his second name, so written on his birth certificate and on his diplomas, and in these circumstances the Council had no option but to enter it as such on the *Register*. The applicant who wanted to diminish the name "Hannah" to its first letter, however, was informed that the Council could not allow the initial to appear, but that on complying with the prescribed requirements the second name could be deleted.

AN APPOINTMENT BOOK.

WE have received from Messrs. John Bale, Sons, and Danielsson, Ltd., 83, Great Titchfield Street, W.1, a copy of their *Dental Surgeon's Daily Diary and Appointment Book* for 1929, which enables appointments to be booked for each half-hour during the day; every page opening shows one week. The diary also contains pages for cash entries and an almanack, etc. The price is 7s. 6d., or interleaved, 9s. 6d.

MIRROR-WRITING.

MISS M. L. SPACKMAN (Clitheroe, Lancashire) writes: Your readers may be interested to hear, apropos the article published on December 1st, that mirror or looking-glass writing is practised more commonly than is usually supposed. Occasionally the more harum scarum of schoolgirls learn it deliberately as a "secret society" method of communicating with each other; and I know a woman of 40 who learned it in this manner, and still uses it on postcards, even to friends who can read it only through a mirror.

CHRISTMAS MOTORING.

THE Automobile Association road patrols will not be on duty in England, Wales, and Ireland on Christmas Day. During the rest of the holiday season the A. A. patrols, road service outfits, and night service outfits will continue as usual.

VACANCIES.

NOTIFICATIONS of offices vacant in universities, medical colleges and of vacant resident and other appointments at hospitals, will be found at pages 37, 38, 39, and 42 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 40 and 41.

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 276.