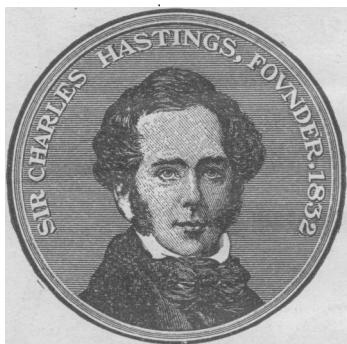


The

British Medical Journal

THE JOURNAL OF THE BRITISH MEDICAL ASSOCIATION.



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is greatly increased, and the immediate results of treatment are placed in proper perspective, I foresee a general resumption of treatment by operative surgery.

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Memoranda:

MEDICAL, SURGICAL, OBSTETRICAL.

NODULAR SPLENIC TUBERCULOSIS WITH GROSS ENLARGEMENT.

THE fortuitous discovery of a case of tuberculous nodules of the spleen, with gross enlargement of the organ, seems to be worthy of record, in view of the rarity of such an occurrence in an otherwise healthy subject.

A youth, aged 22, met with sudden death in a motor collision in May. He had had no previous illness, and the family history was good.

At the post-mortem examination fracture of the skull was found, but there was no disease of the organs other than the spleen, which was full of nodules; these on microscopical examination



Section of Spleen.

were reported to be tuberculous in origin. They were whitish yellow, ranging in size from that of a pinhead to at least $1\frac{1}{4}$ inch in diameter. They projected slightly beneath the capsule, and also from the cut surface. On section conglomerate tubercles were revealed, with scattered giant cells and numerous epithelial cells. The larger nodules showed commencing caseation.

The case is interesting because it is rare for tuberculous infection of the spleen to occur apart from similar manifestations elsewhere. Moreover, it is unusual for such great enlargement to be caused by numerous nodules; the organ measured $6\frac{1}{2}$ by $4\frac{1}{2}$ by 3 inches, and weighed 9 ounces. This occurrence must be extremely rare in a youth otherwise perfectly healthy at the time of death.

I am indebted to Dr. J. A. D. Radcliffe (pathologist to the Royal Portsmouth Hospital) for the pathological report.

Southsea.

R. HAMER HODGES, M.B.Lond.

REMOVAL OF SAFETY-PIN FROM DUODENUM.

CERTAIN interesting features of the case here described justify, in my opinion, its publication.

On May 26th a male infant, aged 6 months, was brought to me by the mother, who stated the child had just swallowed a small safety-pin. The child appeared quite at ease, but an x-ray examination revealed the pin lying open to the right of the second and third lumbar vertebrae, probably in the pyloric end of the stomach. Examination of the abdomen showed no sign of peritoneal irritation, but the child was admitted to the Great Western Hospital for observation, and x-ray photographs were taken on four consecutive days. Since the pin, however, remained in the same anatomical position and continued to lie vertically, suggesting that it had become fixed in the stomach wall, I decided to remove it.

On May 29th a general anaesthetic was administered, and the abdomen was opened by an upper right paramedian incision. To my surprise I was unable to feel the pin in the stomach, but eventually it was located in the duodenum at the junction of the second and third portions. It is rather surprising that an open safety-pin can proceed as far as the third part of the duodenum before it becomes anchored. I refrained from opening the duodenum, since it is difficult to manipulate this part of the organ, especially in an infant, and also one hesitates to open it because of its liability to leakage. I therefore incised the stomach about one inch proximal to the pylorus, and attempted to coax the pin up from the duodenum into the stomach. It appears that the pylorus of an infant will just admit the little finger, but it was impossible to pull the pin up—even with the aid of forceps—owing to its being fixed to the duodenal wall. The stomach was therefore closed.

It appears that the pin was caught in the wall of the duodenum; I succeeded in completing the perforation, and in forcing out the pin as far as the head. It would have been almost impossible to incise the third part of the duodena and to suture it successfully without fear of leakage. A purse-string suture was passed around the pin, and by means of a sharp pull the head was torn through the bowel wall; the purse-string suture was immediately tightened and tied, and the abdomen was then closed.

The child made an uninterrupted recovery and was discharged from hospital thirteen days later.

Should I ever be called upon to perform this operation again, I should make the incision at least $1\frac{1}{2}$ to 2 inches proximal to the pylorus, because in suturing the wound of the stomach the pyloric sphincter was encroached upon, tending to occlude the lumen. Nevertheless, it has been my experience that in cases of perforated pyloric ulcer treated simply by purse-string suture and invagination, however much is taken up in the suture and invaginated, pyloric obstruction does not occur, and gastro-enterostomy is quite an unnecessary procedure.

J. EWART SCHOFIELD, F.R.C.S.Eng.,
Assistant Surgeon, Great Western Railway Hospital,
Swindon.

PASSAGE OF GALL-STONES THROUGH THE ABDOMINAL WALL.

THE case described by Mr. F. H. McCay in the *Journal* of July 26th (p. 142), of the natural passage of gall-stones through an external sinus, prompts me to record a somewhat similar, though perhaps even more uncommon, occurrence in a patient seen recently at the Manchester Royal Infirmary.

A woman, aged 60, gave a six months' history of gradually increasing jaundice and loss of weight, with clay-coloured stools, dark urine, anorexia, and occasional vomiting, preceded by repeated attacks of typical gall-stone colic, and extending over a period of twenty-four years. She stated that during this time she had passed through her abdominal wall at intervals thirty-four stones of varying dimensions, but usually of the size of small pebbles. They appeared singly, or in groups of two or three. Their passage was preceded by the formation of a small swelling under the skin, which, when foamed, discharged the stones externally, leaving the sinus exuding a thick yellow fluid.

Abdominal examination revealed the scars of three sinuses, one in the epigastrium and two in the right hypochondrium. A large mass present in the latter region was subsequently diagnosed at operation as an inoperable carcinoma of the gall-bladder, this finding being later verified histologically.

I am indebted to Mr. P. R. Wrigley for permission to record this case.

ALBERT A. DAVIS, M.B., Ch.B.,
Surgical Registrar, Manchester Royal Infirmary.

Bromsgrove in 1894, and soon built up a large practice, finding congenial surgical work at the local cottage hospital. Dr. Ball was twice married; after his second marriage in 1902 he took charge of his stepfather's practice at Stradbrooke, Suffolk. He retired in 1913, and went to live in Warwickshire, but on the outbreak of war resumed practice, acting as locumtenent for medical men engaged in military service. Soon after the end of the war he settled finally in Oxford. Dr. Ball was an outstanding figure in the medical and social life of every town in which he practised. He was a strong Churchman, a sympathetic and loyal colleague, and a skilled and devoted general practitioner.

Dr. G. W. R. SKENE, who died on September 2nd at the age of 54, was a prominent figure in Willesden. He received his medical education in Edinburgh, where he obtained the diplomas L.R.C.P., L.R.C.S.Ed., and L.R.F.P.S.Glas. in 1901, and graduated M.B., Ch.B. in 1903; he proceeded M.D. seven years later. After a short residence in Stoke Newington he went to Kensal Rise twenty-five years ago, and built up a considerable practice. He rendered great service as medical officer to Willesden General Hospital, and was for twelve years a member of the council of that institution; he had recently been elected vice-chairman. He latterly associated himself actively with the work of the Willesden Nursing Association. He became a member of the Willesden District Council in 1921, and five years later was appointed its chairman. He took a leading part in the erection of Brondesbury Park Congregational Church, and was for many years superintendent of the Sunday school. The Rotary movement received his support, and he was largely instrumental in founding the East Willesden Club, of which he was the first president. He was a member of the British Medical Association, and was chairman of the Willesden Division from 1922 to 1923. He married twice, and is survived by a widow, a daughter, and two sons, one of whom is in the medical profession.

Dr. JOHN COCKCROFT of Middleham, Yorks, died on September 7th at the great age of 92. He began his medical studies at Owens College, Manchester, and continued them at St. Andrews, obtaining the M.R.C.S.Eng. and L.S.A. diplomas in 1860, and graduating M.D. St. Andrews in the following year. Soon afterwards he began practice at Middleham in partnership with three other members of his family. The partners visited their patients on horseback, making long journeys to hamlets scattered among the moors and dales of North-west Yorkshire, and travelling as far afield as Garsdale, Kettlewell, and Pateley Bridge. The partnership was dissolved many years ago, and Dr. John Cockcroft thereafter continued the work single-handed. According to an obituary notice in the *Harrogate Advertiser*, to which we owe these particulars, there were few families in Wensleydale who had not called upon Dr. Cockcroft's services during his seventy years of active practice. Among his many reminiscences was a bad epidemic of typhoid fever at Thornton Steward in 1870, when he sent out medicine in clothes baskets to this little village. Dr. Cockcroft had a wonderful physique, and retained full possession of his faculties until two and a half years ago, when he had a stroke. His death removes one of those hardy, self-reliant Yorkshire doctors of the old school whom Sir Clifford Allbutt came to know so well and esteem so highly during the days of his consulting practice in the West Riding.

The death has taken place at the residence of his mother, 440, King Street, Aberdeen, of Dr. ALEXANDER HUTCHISON of Buckley, Chester. Dr. Hutchison graduated in arts at Aberdeen University in 1899, and in medicine in 1904. He was in practice at Grantown-on-Spey from 1906 to 1924, and was well known and highly esteemed on Speyside. Latterly he had been in practice at Buckley, near Chester. He had not been in good health for some time, and went to Aberdeen to recuperate.

The Services.

DEATHS IN THE SERVICES.

Lieut.-Colonel Sidney Browning Smith, C.M.G., Bengal Medical Service (ret.), died after a long illness at Otford, Kent, on July 13th, aged 63. He was born on November 12th, 1866, the son of Dr. Thomas Browning Smith of Sittingbourne, Kent, was educated at Epsom College and at St. Bartholomew's Hospital, and took the M.R.C.S. and L.R.C.P. Lond. in 1890, and subsequently the D.P.H. of the London Colleges in 1910. Entering the Indian Medical Service as surgeon on July 28th, 1891, one of the last term who entered Netley under that title, before the grant of compound titles, he became lieutenant-colonel after twenty years' service, was placed on the selected list for promotion on June 24th, 1918, and retired on November 12th, 1921. When at Netley he gained the Parkes Memorial Medal for Hygiene. He served in the Chitral campaign of 1895, in the actions of Chakalwat and Nisa Ghol, was mentioned in dispatch No. 8c of July 26th, 1895, and received the frontier medal with a clasp; he contributed some drawings to Younghusband's *Relief of Chitral*. He also served in the Waziristan campaign of 1901-2. He then entered civil employ in the Punjab, was posted as district plague medical officer at Amritsar in 1902-3, and was chief plague medical officer in the Punjab from 1903 to 1912. He was recalled to military duty on the outbreak of war in 1914, accompanied the Indian Expeditionary Force to Europe, and first served in charge of the Mont Doré Hospital for Indian troops at Bournemouth; and subsequently in Egypt, was mentioned in dispatches in the *London Gazette* of July 27th, 1917, and received the C.M.G. on June 4th, 1917. On his retirement he married Lady Edith Rattigan.

Medical News.

THE opening ceremony of the ninety-sixth winter session of the Middlesex Hospital Medical School will be held at the Queen's Hall, Langham Place, on Wednesday, October 1st, at 3 o'clock. Mr. Eric Pearce Gould will deliver the introductory address, and the Rt. Hon. Arthur Greenwood, M.P., Minister of Health, will preside and distribute the prizes gained during the past year. The wards of the new west wing, the new nurses' home, the medical school, and research departments will be open for inspection. The annual dinner will be held at the Savoy Hotel (Embankment entrance) on Wednesday, October 1st, at 7.30 p.m.

THE annual prize-giving at St. George's Hospital Medical School will take place in the board room of the hospital at 3 p.m. on Wednesday, October 1st, when an address will be given by Lord Riddell on "Some things that matter for doctors, from a layman's point of view." The annual dinner will be held the same evening at the Hyde Park Hotel at 7.30 o'clock, with Dr. James Collier in the chair.

AT the opening of the new session of the Pharmaceutical Society's School of Pharmacy on October 1st, at 3 p.m., the inaugural address will be given by Dr. Arthur W. Hill, F.R.S., Director of the Royal Botanic Gardens, Kew.

THE Harben Lectures for 1930 will be delivered at the Royal Institute of Public Health (37, Russell Square, W.C.1) by Professor William H. Park, director of the Bureau of Laboratories, Health Department, New York City. His subject is "Pneumonia," and the lectures will be given at 4 p.m. as follows: October 6th, "Types of pneumococci in adults and children and their significance"; October 7th, "Epidemiology. The refuelling of antipneumococcus serum"; October 8th, "Therapeutic use of vaccines and antibacterial sera." No ticket of admission is required.

A COURSE of nine lectures and demonstrations in tropical hygiene and nursing will be given on Wednesdays, at 8 p.m., at 27, Grosvenor Place, commencing on October 1st. The course, which will cover such questions as food, clothing, and the medical and sanitary precautions necessary for health in hot countries, will be conducted by a medical man and a nurse, both of whom have had practical experience of life in the Tropics. Inquiries should be addressed to the county secretary, County of London Branch, British Red Cross Society, 27, Grosvenor Place, S.W.1.

THE next course of lectures and demonstrations in tropical hygiene, for men and women outside the medical profession proceeding to the Tropics, will be given by Lieut.-Colonel G. E. F. Stammers, on October 8th-10th, and 13th-17th, from 11 a.m. to 12.30 p.m. The fee for the course is one guinea. The synopsis can be obtained on application to the secretary, London School of Hygiene and Tropical Medicine, Keppel Street, W.C.1.

A THREE months' course of lectures and demonstrations on clinical practice and in hospital administration for the D.P.H. will be given at the North-Eastern Hospital, St. Ann's Road, Tottenham, N.15, by Dr. F. H. Thomson, on Mondays and Wednesdays at 4.45 p.m., and alternate Saturdays at 11 a.m., beginning October 1st. Medical men desiring to attend the course are required to pay the requisite fee (£4 4s. under new regulations, or £3 3s. under old regulations) to the Medical Officer of Health, London County Council, Public Health Department (Special Hospitals), Victoria Embankment, E.C.4, giving their full name and address.

THE Fellowship of Medicine announces that from September 29th to October 11th there will be a special post-graduate course in medicine and surgery and the special departments at the Metropolitan Hospital, Kingsland Road, E.8, from 10.30 a.m. to 5.30 p.m. each day, with special demonstrations in the morning, attendance at the surgical, medical, or special departments in the afternoon, and ending with a formal lecture at 4.30 p.m. There will also be daily pathological demonstrations. Luncheon and tea are obtainable at the hospital at a small charge. Special courses in October will deal with the following subjects: diseases of the ear, nose, and throat, October 6th to November 1st; tropical medicine, October 6th to 25th (all-day); gynaecology, October 13th to 24th; diseases of children, October 27th to November 5th, and orthopaedics, October 27th to November 5th. There will also be evening courses in preparation for the M.R.C.P. examination (17 lectures on Tuesdays and Fridays), and for the F.R.C.S. (final) examination (6 demonstrations on Wednesdays). Further particulars and syllabuses of all courses may be obtained from the secretary of the Fellowship, 1, Wimpole Street, W.1.

A POST-GRADUATE course in genito-urinary diseases, free to medical practitioners and students, will be given at St. Paul's Hospital, Endell Street, W.C.2, on Wednesdays at 4.30 p.m., from October 1st to December 10th. Tea at 4 o'clock.

UNDER the auspices of the National Council for Mental Hygiene a series of lecture-discussions will be delivered on Thursdays at 5.15 p.m. from October 16th to November 27th, in the lecture room of the Medical Society of London, 11, Chandos Street, Cavendish Square, W.1. Dr. G. W. B. James will open the series with a lecture entitled "A physician looks at history." The second, on preventive treatment in childhood, will be given by Dr. Alice Hutchison; and the third, on alcoholism and drug addiction, by Dr. Edward Mapother. Mental conflict and the development of character will be subsequently discussed by Professor William Brown, and the psychology of adolescence by Dr. Doris S. Odium. The concluding lecture will be delivered by Dr. R. G. Gordon, and will deal with the importance of mental deficiency. Tickets (price 1s. 6d. each, or 7s. 6d. for the course) may be obtained from the secretary of the National Council, 78, Chandos House, Palmer Street, S.W.1, or at the door. It is also announced that the second Mental Health Conference, organized by the National Council, will be held in May, 1931.

THE British Science Guild announces that the sixth annual Norman Lockyer Lecture will be delivered by Professor Sir William Pope, F.R.S., on Thursday, November 13th, at 4.30 p.m., in the Goldsmiths' Hall, London; the President of the Guild, Sir Samuel Hoare, will take the chair at the lecture, the title of which will be announced later. The second annual Alexander Pedler Lecture will be given by Lieut.-Colonel Sir David Praun, F.R.S., in Liverpool, on Wednesday, October 22nd, at 5.30 p.m. The lecture will deal with "Science Discipline," and its delivery will be under the joint auspices of the University of Liverpool and the Guild.

A POST-GRADUATE course, open to all medical practitioners without fee, will be held in the library of the Medical School of St. Mary's Hospital on the three days October 3rd to 5th. Subjects to be dealt with include the after-treatment of some common operations; coronary thrombosis and cardiac pain; some minor common digestive disorders; nephritis; diagnosis of breast tumours; causes and treatment of vaginal discharge and irregular uterine haemorrhage; refusal of food by children; the management of septic infections, and the restoration of septic fingers and hands to normal function; the surgical uses of radium, and the treatment of diabetes. Further information may be obtained from Dr. C. M. Wilson, dean of the Medical School, St. Mary's Hospital, Paddington, W.2.

AT a meeting of the Royal Sanitary Institute, to be held on Friday, October 10th, in the Guildhall, Nottingham, discussions will take place on river pollution and on industrial medicine in relation to public health. The chair will be taken at 4.30 p.m. by Dr. Charles Porter.

THE thirty-sixth Congress of the Italian Society of Internal Medicine will be held in Rome from October 13th to 16th, when the following subjects will be discussed: pulmonary oedema, introduced by Professor C. Frugoni; differential diagnosis between visceral neuroses and organic disease, introduced by Professor P. Castellino; and the diagnosis and treatment of haematuria, introduced by Professor A. Ferrata. Further information can be obtained from the secretary, R. Clinica Medica, Rome.

THE Italian Society of Colonial Medicine and Hygiene will hold its third congress at Tripoli from October 3rd to 8th, when the subjects for discussion will be framboesia or pian, African relapsing fever, dengue, and animal trypanosomiasis.

THE first congress of the French Society of Plastic Surgery will be held in Paris on October 3rd and 4th, under the presidency of Professor Dartigues. There will be an exhibition of surgical instruments, models, skiagrams, and photographs. Further information can be obtained from the secretary, Rue d'Avian, 41, Bordeaux.

DR. M. I. FINUCANE, who since 1913 has been surgeon and medical officer to the A Division, Metropolitan Police, was presented on September 10th with a silver cigar and cigarette box, subscribed for by the officers and men of the division. The presentation was made by Chief Constable Brigadier James Whitehead in the presence of a very large gathering.

THE September issue of *Acta Rheumatologica*, the official journal of the International League against Rheumatism, contains an account of the recent congress of the league held at Liège. The principal subject for discussion was the disturbance in the skin circulation in rheumatic diseases, in which the following members took part: Jens Foyed of Copenhagen, J. van Breemen of Amsterdam, Gunnar Kuhlmeyer of Stockholm, Laignel-Lavastine of Paris, and Ralph Pemberton of Philadelphia.

THE Water Pollution Research Board of the Department of Scientific and Industrial Research has issued a further series of abstracts of current literature in 1928 to 1929 dealing with water supplies, the analysis and examination of water, sewage and trade waste waters, pollution of natural waters, and various miscellaneous subjects. This booklet may be consulted in the library of the British Medical Association.

DR. RUDOLF KRAUS of Vienna has been appointed director-general of public health in Chili.

Letters, Notes, and Answers.

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QUERIES AND ANSWERS.

INHERITANCE OF MENTAL DISORDER.

"AFFLECK" writes: A mother has been to see me recently with the following query: She has one child, 5 years old, who is mentally abnormal, but otherwise healthy. A paternal uncle is confined in a mental hospital, the paternal grandmother died there, and this grandmother's sister has been an inmate, but is now said to be recovered. All other relatives are normal. What are the chances of another child (which both parents are anxious to have) being normal in mind, and, if normal, what is the outlook for the generation to follow? I have, in the meantime, advised against pregnancy, but would like the opinion of other medical men about the inheritance of mental abnormality.