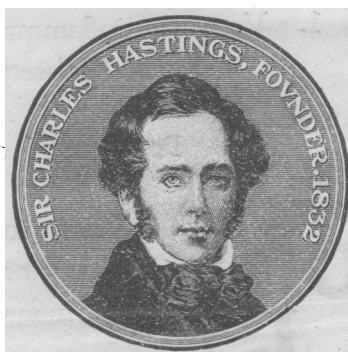


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# British Medical Journal

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*Including an Epitome of Current Medical Literature.*  
**WITH SUPPLEMENT.**

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Advertisements and Communications for our issues of December 20th and 27th, 1930: see Notice on Page 2 (adverts.).

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[REGISTERED AS A NEWSPAPER

*Ulcer with Periostitis of Tibia.*

In all cases where the ulcer is large, and lies over the tibia, an x ray examination should be made for periostitis. Deep thrombosis may or may not be present. These ulcers are, as a rule, more painful and more resistant to treatment. Rest, the injection of quinine or urethane into the base of the ulcer, the sclerosis of the veins, and the application of an elastoplast are the main lines of treatment, and give good results where deep thrombosis is not present. Scarification of the edges, scraping of the floor of the ulcer, Leriche's sympathectomy, and shin grafts have been recommended. Ultra-violet light, from a mercury arc lamp, on alternate days, directly to the ulcer, does not seem to be of great value. Finally, in severe and extensive cases, with deep thrombosis, when all other treatment has failed, amputation should be performed.

*Multiple Ulcers.*

In a case of varicose veins with multiple ulcers the Wassermann reaction should be investigated, and, indeed, the ideal to aim at is the carrying out of this test in every case presenting ulcers on the leg. It is well to bear in mind that, although the typical varicose and syphilitic ulcer have fairly well defined characteristics, there occur cases which clinically seem to belong to the varicose group, yet are resistant to the treatment for the latter, have a positive Wassermann reaction, and clear up remarkably quickly when antisyphilitic treatment is instituted.

I desire to express my thanks to Mr. Rodney Maingot, F.R.C.S., for permission to publish this article.

**Memoranda:****MEDICAL, SURGICAL, OBSTETRICAL.****DIFFERENTIAL DIAGNOSIS OF ENCEPHALITIS  
EPIDEMICA IN NIGERIA.**

IN view of the observations of Pfister on the prevalence of encephalitis epidemica in China (*British Medical Journal*, June 29th, 1929, p. 1156), the following notes may be of interest.

A powerfully built Pagan man, aged about 32, presented himself for treatment on July 20th, 1929, complaining of shaking of the limbs for nine years. He had an upright carriage, and stood like a statue, with the knees slightly flexed. His face was expressionless, but the eyes looked intelligent. The speech was slurring and almost unintelligible, while the lips remained motionless. He had difficulty with mastication and deglutition, and traces of food soiled the chin and chest. His intelligence was above the average, as was evident during the subsequent examination. All his movements were slow and deliberate. The elbow-joints were slightly flexed, the right more than the left, and the hands were held in front of him. The upper limbs showed small, involuntary, myoclonic movements at the elbow-joints, the left greater than the right. These movements were absent during rest, but when he was agitated they were augmented, and involved both knee-joints also. The hands were in the interosseal position, but there was no involuntary movement of the fingers. The history began nine years ago with headache, fever, and shaking of the limbs, together with transient diplopia and lethargy; the shaking of the limbs continued up to the time of examination.

Tests of the facial muscles showed a slight but definite and slow response. There was a faint tremor of the tongue, which was protruded a little to the right. The eyesight appeared normal, and both pupils reacted to light. The fundus and media were healthy in both eyes; the eye movements were normal, and there was no nystagmus. There was no wasting. The knee-jerks were brisk; the test for Romberg's sign was negative, and co-ordination of the limbs was unimpaired. The carriage was upright, but the gait was slow, with short, careful steps. There was always some degree of flexion of the knee-joints, and the feet were lifted well clear of the ground. No areas anaesthetic to pin-pricks were discovered. The lungs and heart were normal, and the blood pressure was 128/88, which is customary for a hill Pagan. There was no albumin in the urine, and micturition and defaecation were normal. The temperature on admission was 96.8° F., and the pulse rate 60.

A fresh blood film showed a very slight degree of auto-agglutination of the red blood corpuscles. The serum-formalin reaction was negative after twenty-four hours. The cerebro-spinal fluid was under normal pressure, and an average of three counts with the Fuchs-Rosenthal counting chamber gave three white cells per cubic millimetre. The acetic-anhydride reaction of the cerebro-spinal fluid was negative.

*Differential Diagnosis.*—The following points are against a diagnosis of trypanosomiasis, which is prevalent in many parts of Nigeria. (1) The patient's home was in country free from the tsetse fly, and he had never travelled out of his district, owing to head-hunting traditions. (2) The absence of palpable cervical and other glands. (3) The length of history, high degree of intelligence, normal white cell count in the cerebro-spinal fluid, and the serum-formalin reaction negative after twenty-four hours, are all unusual in an advanced case of sleeping sickness. (4) In the only three cases of advanced trypanosomiasis in which the acetic-anhydride test was applied by me to the cerebro-spinal fluid the reaction was positive; I have also found that auto-agglutination of the red cells in trypanosomiasis is usually marked. (5) True somnolence has not been observed.

The white count and negative acetic-anhydride reaction in the cerebro-spinal fluid are against cerebral syphilis. In this connexion Melkersson (*Acta Medica Scandinavica*, 1928) found that this reaction gave 100 per cent. positive results in general paralysis of the insane, and the great majority positive in other syphilitic lesions of the central nervous system.

Against paralysis agitans are the age at onset, the absence of pill-rolling movements of the fingers, the upright carriage, and the slow, careful gait.

C. W. HOPE GILL, B.A., B.M.,  
Azare, Northern Nigeria. B.Ch.Oxon.

**CARCINOMA OF THE LARGE INTESTINE IN  
EARLY LIFE.**

CARCINOMA of the large intestine, fairly common between 20 and 30 years of age, not infrequently occurs in much younger patients. Ewing<sup>1</sup> refers to records of cases at 12 years (caecum), 12 years (sigmoid), 11 to 17 years (rectum), and 3 years of age (colon). Phifer (1923) collected twenty-three cases of carcinoma of the sigmoid or rectum in children under 16 years, and Wainwright (1927) seven cases above the sigmoid. In the practice of an individual, however, and even of a hospital, the disease at such an early age is sufficiently rare to be noteworthy.

The case recorded here, that of a girl aged 15 years, was seen on August 25th, 1930, with acute intestinal obstruction, the culmination of a chronic obstruction of about three months' duration, and of unknown origin. Exploration undertaken immediately showed the cause to be a hard, ring-like infiltration of the descending colon. The tumour was not adherent, and there were no signs of secondary deposit. In spite of a caecostomy, the patient died eight days later.

A post-mortem examination was made by Dr. G. D. Dawson, pathologist to the hospital, who reported as follows:

"Below the splenic flexure the canal is much narrowed by a greyish, raised, ulcerated, firm annular growth, gelatinous-looking on section. Microscopically the muscular wall is honey-combed with spaces containing epithelial cells in an advanced state of mucous degeneration. Deeper, in newly formed scar tissue, is a diffuse carcinomatous infiltration."

No evidence of metastasis was found. Apart from the statement that the maternal grandfather died of a cancer of the kidney, there were no points of interest in either the previous medical or the family history.

I have to thank Dr. G. D. Dawson for the pathological details, and the medical superintendent, Dr. J. D'Ewart, for permission to record the case.

Booth Hall Hospital, Manchester, E. S. W. DRINKWATER, M.B., Ch.B.,  
F.R.C.S.

<sup>1</sup>Ewing: *Neoplastic Diseases*, third edition, 1928, p. 710.

engaged in promoting the teaching of pathology in Oxford. So, too, his intimacy with Professor Dreyer, who was at that time working at Oxford, gave a bias to his inclination toward the scientific side, with the result that he made this field of research the dominant influence in his early career. He soon made for himself the reputation of being one of the younger men marked out for distinction in this particular branch of study. Considerations of another kind, however, arose which compelled the transference of his activities and responsibilities in other directions, and so his promising scientific career was cut short, though, as I know, his interests in medicine were paramount till the day of his death.

The one incident in his life which has endeared his memory to all of us in Oxford who are concerned with the interests of the medical school is the fact that it is to his bounteous generosity that we owe the erection of the first pathological department in 1901. While still an undergraduate he handed over to me a cheque for £5,000, to use as a lever, to enable us to stimulate the University, at that time sadly in need of funds, to provide for the necessities of our growing medical school. In those days there were many who were opposed in one way or another to the development of such a school. Experience had taught us that the antivivisectionists were active, but happily, by the practice of judicious methods, the opposition was disarmed. The University found ways and means to supplement Frazer's benefaction, with the result that pathology was equipped with a laboratory worthy of Oxford. Therein Ritchie, then appointed professor, continued his teaching until he became professor of bacteriology in Edinburgh. Thereafter Professor Dreyer, his successor, worked there until recent times, when through the benefaction of the Sir William Dunn Trustees he was enabled to avail himself of the larger and more commodious department, opened in 1927, the original pathological buildings being taken over by the professor of pharmacology, Dr. Gunn.

Frazer's gift proved invaluable at a very critical period in the history of the school, for without his generous aid our progress might have been long delayed. We owe much of our success to the generous impulse of an undergraduate who recognized so clearly what the pressing needs of the school were.

Of Frazer himself little need be said. He was of the type that does not make friends readily, but after the barriers of mere acquaintance had been broken down his friendship proved itself to be loyal, steadfast, and generous. He was a man of action rather than words. He took a broad view of things, and his interests were wide. Very sympathetic, he was ever helpful to those in need, and his hand was as generous as his heart. His latter years were clouded by the death of his eldest son, who was killed before his eyes by an accident in the Alps. The lad had a brilliant career before him, and the stricken parents endowed a scholarship at Balliol in his memory. Dr. Frazer leaves a widow and two children.

Dr. RALPH WILLIAM WILSON, who died in a London nursing home on November 21st, was born at Holy Island, Northumberland, in 1853. He graduated M.B., C.M. at Edinburgh in 1877, and proceeded M.D. ten years later. He came of seafaring stock, and one of his first appointments after graduation was that of medical attendant to a nobleman on a voyage round the world. For some time he assisted the late Sir William Gowers, and, indeed, whilst abroad on another voyage, was recommended by him for a court appointment. Dr. Wilson began practice as an assistant in Surbiton, but after several years there his friend Sir W. Thiselton-Dyer, director of Kew Gardens, persuaded him to transfer to Kew, where he remained in practice for forty years. It was a source of great delight to him that he had so much scope in the Gardens for his botanical researches. He was a Justice of the Peace, and was twice president of the Richmond Athenaeum. His connexion with the British Medical Association went back to the days of the old Richmond Division. He resigned in 1913 because of his disagreement with the terms of the National Health Insurance Act; but he was very

enthusiastic over the new Richmond Division, and spoke at the inaugural meeting last January in favour of forming a Division of great strength. Unfortunately, illness prevented his attendance at any further meetings. The loss of his keen intellect and long experience is a severe one to the district in which he resided. He was buried at Holy Island on November 26th, and a memorial service was held at St. Luke's Church, Kew Gardens, which was attended by a large congregation, consisting of his medical colleagues in Kew, his old patients, and numerous friends.

## Universities and Colleges.

### UNIVERSITY OF OXFORD.

DR. FREDERICK AUGUSTUS DIXON, Emeritus Fellow of Wadham, has been elected to an honorary Fellowship in the College.

### UNIVERSITY OF CAMBRIDGE.

THE Raymond Horton Smith prize for the best M.D. thesis submitted during the academic year 1929-30 has been awarded to P. M. D'A. Hart, M.A., M.B., of Gonville and Caius College.

Dr. E. G. Holmes (Christ's) has been elected Fellow and tutor of Downing, the latter appointment to take effect from March 25th, 1931.

At a congregation held on December 5th the following medical degrees were conferred:

M.D.—W. H. Craib.  
M.B., B.CHIR.—R. W. L. May, A. R. Banham, R. M. Bolam, S. McDonald.

### UNIVERSITY OF BRISTOL.

THE following candidates have been approved at the examinations indicated:

M.D.—T. A. Brand.  
FINAL M.B., CH.B. (Part I, including *Forensic Medicine and Toxicology*)—G. T. Hevir, R. N. O'D. Burns, E. G. C. G. Carlson, A. McD. Davies, G. M. Evans, A. L. Eyre-Brook, E. E. Fletcher, J. D. Hughes, H. James, J. Ridgway, Frances N. Salisbury, O. E. L. Sampson, J. P. P. Stock; (Part I only), J. R. Gibbs.  
Section II (in Group I only): Eveline M. D. M. Collinson, Rowena M. Hickman.

\* With distinction in materia medica, pharmacy, pharmacology and therapeutics, pathology, and forensic medicine and toxicology.

† With distinction in materia medica, pharmacy, pharmacology and therapeutics, and forensic medicine and toxicology.

‡ With distinction in forensic medicine and toxicology.

§ With distinction in pathology.

### UNIVERSITY OF LIVERPOOL.

DR. H. E. ANNETT has been appointed to the Samuel Turner Research Fellowship for three years from January 1st, 1931.

### NATIONAL UNIVERSITY OF IRELAND.

At a meeting of the Senate held on December 4th Dr. Denis J. Coffey, President of University College, Dublin, was elected Vice-Chancellor of the University from January 1st, 1931, to December 31st, 1932. The degree of M.D. was awarded to Professor E. N. McDermott. A report from Dr. Coffey, as representative of the University, on the November session, 1930, of the General Medical Council was considered. Professor J. O. Saunders, University College, Cork, was appointed to represent the University at the Royal Sanitary Institute Congress at Glasgow in 1931. Dr. James R. Hackett was reappointed lecturer in dental surgery at University College, Cork.

### ROYAL COLLEGE OF PHYSICIANS OF EDINBURGH.

At the annual meeting of the College, held on December 4th, Sir Norman Walker, who presided, was re-elected President for the ensuing year. Drs. Robert A. Fleming, Robert Thin, Wm. Fordyce, Edwin Bramwell, Edwin Matthew, and A. Fergus Hewat were elected members of Council, and Dr. Robert Thin was nominated Vice-President.

At an extraordinary meeting held at the close of the annual meeting Drs. John Orr and William Fordyce were elected representatives on the Board of Management of the Royal Infirmary.

The College voted a sum of 1,000 guineas to the Royal Infirmary, Edinburgh, in response to its Bicentenary Appeal.

### ROYAL COLLEGE OF PHYSICIANS OF IRELAND.

At the monthly business meeting on December 5th Dr. Victor M. Synge was appointed Professor of Medicine in the schools of surgery of the Royal College of Surgeons in Ireland. It was decided to appoint from among the Fellows voluntary delegates to the Congresses of the Royal Sanitary Institute and of the Royal Institute of Public Health to be held in 1931. The representative of the College reported on the proceedings of the recent session of the General Medical Council.

## The Services.

### HONORARY SURGEON TO THE KING.

SURGEON CAPTAIN R. J. WILLAN, M.V.O., O.B.E., R.N.V.R., has been appointed honorary surgeon to the King, in succession to the late Surgeon Captain A. R. Brailey, R.N.V.R., from December 1st.

### DEATHS IN THE SERVICES.

Lieut.-Colonel George Elliott Cathcart, O.B.E., R.A.M.C., died in London on September 10th, aged 53. He was born on March 5th, 1877, the son of the late Major H. D. Cathcart, was educated at Bart's, and took the M.R.C.S. and L.R.C.P. Lond. in 1901. After serving as a civil surgeon in the R.A.M.C. for nearly a year, he entered that corps as a lieutenant on January 30th, 1904, became major on July 1st, 1915, and lieutenant-colonel on September 15th, 1926. He served in the war of 1914-18, was mentioned in dispatches in the *London Gazette* of July 4th, 1916, and March 12th, 1918, and received the O.B.E.

Lieutenant John Anthony Timoney, R.A.M.C., died in Egypt on September 8th. He was educated in the National University of Ireland, graduating as M.B., B.Ch., and B.A.O. in 1927, and entered the R.A.M.C. as lieutenant on October 26th, 1928.

## Medical News.

THE Sections of Electro-therapeutics and Comparative Medicine of the Royal Society of Medicine will hold a joint discussion on radiological problems in man and animals, on Friday, December 13th, at 8.30 p.m.

A MEETING of the Royal Microscopical Society will be held in the Hastings Hall, British Medical Association House, Tavistock Square, W.C., on Wednesday, December 17th, at 5.30 p.m. Mr. S. C. Akehurst and Mr. J. M. Preston will read papers. At the annual general meeting of the society on January 21st, 1931, Professor R. Ruggles Gates will deliver his presidential address.

A COURSE of twelve lectures on "The Life of the Past" is being given by Dr. T. M. Finlay in the Lecture Theatre of the Imperial College of Science (Royal College of Science, Old Building), Exhibition Road, South Kensington. The course opened on December 8th, and the remaining lectures will be delivered on December 15th, 17th, and 19th, and on January 5th, 7th, 9th, 12th, 14th, and 16th, at 5.30 p.m. Admission is free.

A THREE months' course of lectures and demonstrations on clinical practice and in hospital administration will be given at the North-Eastern Hospital, Tottenham, by the medical superintendent, Dr. F. H. Thomson, on Mondays and Wednesdays at 4.45 p.m., and alternate Saturdays at 11 a.m., commencing on Monday, January 5th, 1931. The fee for the course, which complies with the requirements of the revised regulations of the General Medical Council, is £4 4s. A course may, however, be taken under the old regulations at £3 3s. Practitioners desiring to attend the course of instruction are required, before attending the hospital, to pay the requisite fee 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.

PARTICULARS of the lectures and demonstrations arranged for next week by the Fellowship of Medicine will be found in our Diary of Post-graduate Courses, published in the *Supplement* at page 260. Copies of syllabuses and tickets of admission can be obtained from the Fellowship, 1, Wimpole Street, W.1. The list of special courses arranged for 1931 is now available.

ON December 4th the autumn dinner of the Irish Medical Schools' and Graduates' Association was held at the Piccadilly Hotel, with the president, Dr. W. P. Kennedy, in the chair. After the usual loyal and patriotic toasts had been honoured, Dr. J. Howard Humphris, in proposing the health of the guests, said that they wished to offer them a whole-hearted welcome—indeed, all that was meant by the term "Irish hospitality." Speaking especially of the guest of the evening, Sir Frederick O'Connor, Dr. Humphris said that he was soldier, diplomat, explorer, and even "film star," and wherever he had been he had always upheld the tradition of his native country. Sir Frederick O'Connor said that although he was a gunner he had had much experience of doctors, and he admired the profession of medicine for its universality and its humanity. He gave instances of two occasions, in Tibet and in Persia, when the prestige of the British nation had been unmistakably established in a hostile

atmosphere by the good work and sympathetic attitude of his medical officers. In reply to Dr. William Doolin, who proposed the toast of "The President and Association" with enviable brilliancy and wit, Dr. W. P. Kennedy said that the association stood for unity and guidance of Irish doctors who, settling in England, might have initial difficulties in their new environment; he urged all new graduates to get in touch with it as soon as they reached England. Helped by the friendship and experience of more sophisticated exiles, they were assured that their problems would meet with a speedy solution. An enjoyable programme of music was provided by Miss Alice Lilley, Miss Kathleen O'Hagen, and Mr. Ernest Bertram, whose songs brought the air and the verdure and the romance of the green isle very near to their audience. Later in the evening two of the guests further entertained the company with songs and stories, after which the company went downstairs to "chase the glowing hours with flying feet."

IN and after 1930 one or more scholarships of the value of £300 a year for five years may be awarded annually by the Government to suitable candidates of African birth for the purpose of studying medicine in the United Kingdom. The candidate must undertake to return to practise in British West Africa immediately on the successful completion of his studies, but he may be allowed to postpone his return, at his own expense, for a maximum period of three years in order to acquire additional professional qualifications, and on the expiration of the permitted period he will be granted a first-class passage to British West Africa.

WITH the approval of the chairman of the London County Council, Mr. R. L. Guthrie, coroner for the eastern district, has appointed Dr. Percy Bernard Skeels, solicitor, Mr. W. B. Purchase, coroner for the northern district, has appointed Mr. Francis Danford Thomas, barrister-at-law, and Mr. S. I. Oddie, coroner for the central district, has appointed Dr. Francis Temple Grey, barrister-at-law, to act as their respective deputies.

IN response to its appeal, first launched five years ago, the Middlesex Hospital has received £374,000. A further sum of £249,000 will be required to complete the enlarged scheme of rebuilding.

THE Leprosy Commission set up by the League of Nations will work in close contact with the Congress of the Association for Tropical Medicine in the Far East, which is now meeting also at Bangkok. At this session the Commission will endeavour to lay down the principles for combating leprosy just as the Malaria Commission did for malaria. It is hoped that it may be possible to evolve certain principles of action in harmony with the experience of clinicians, hygienists, and laboratory workers. The work of the Commission has been prepared by its secretary, Dr. Burnet, who, in the course of visits to leper colonies and interviews with leprologists in London, the Scandinavian and Baltic countries, France, the Mediterranean countries, the South American Republics, India, the Malay States, the Philippines, and China, has noted a series of observations.

THE annual report of Livingstone College for the year 1929-30 contains fresh evidence as to the value of the educational work which is being carried on in that institution. More than 1,100 missionaries have received training there, and some return later for further study. An appeal is being made for £800 to replace worn-out equipment, and to renovate the structure of the house. The full session, from October to June, comprises three terms; those who are unable to undertake this can be admitted for a six months' or a three months' course. An intensive course, consisting of lectures on the care of health in the Tropics, is given three times a year—in March, September, and December—lasting three days. These lectures are open to any who are expecting to work in tropical countries. Further particulars may be obtained from the principal, Dr. Tom Jays, Livingstone College, Leyton, E.10.

THE centenary of the birth of Jules Émile Péan, the celebrated surgeon to the Hôpital St. Louis, Paris, who died in 1898, was celebrated at the Académie de Médecine on November 25th, when his eulogium was pronounced by Dr. Jean Louis Faure, professor of clinical gynaecology in the Paris faculty.

PROFESSOR HANS FISCHER of Munich has been awarded the Nobel prize for chemistry.

THE title of doctor *honoris causa* has recently been conferred by the University of Liège, on Professor Calmette, of the Institut Pasteur, and on Dr. Louis Lapicque, professor of physiology at the Sorbonne.

THE centenary of the foundation by Lucas-Championnière of the *Journal de Médecine et de Chirurgie Pratiques* was recently celebrated in Paris.