

the night of June 17th, and again by defaecation on June 19th, played a part in the production of the spontaneous haemopneumothorax.

We wish to thank Dr. H. Campbell Ferguson for helpful suggestions in connexion with this case.

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Memoranda

MEDICAL, SURGICAL, OBSTETRICAL

ABDOMINAL MANIFESTATIONS IN RHEUMATISM

The article by Dr. K. H. Tallerman on abdominal manifestations in rheumatism (*British Medical Journal*, November 7th, p. 844) tempts me to report a case at present under my care.

On September 22nd a boy, aged 8, complained of severe headache, sore throat, and pain in the abdomen, left shoulder, and back of the legs. He was sick once, and his tongue was heavily furred. There was general abdominal tenderness, but no rigidity. The temperature was 102°; a few moist sounds were present in the chest, but disappeared after a few days.

He passed green stools once or twice a day during the first week, after which they became normal in colour, but constipated. The temperature remained between 101° and 102° until October 2nd, then fell by lysis. After the first week he ceased to complain of any pain except headache, which lasted a further week. There was no swelling of any joint; no rheumatic nodules or enlarged glands were noticed. The persistent headache, with slightly distended tender abdomen and a relatively slow pulse, suggested typhoid fever, but a Widal test on October 2nd was negative.

By October 21st the temperature was normal, and the child was eating and sleeping well. On October 29th he again complained of pain and stiffness in the left shoulder. The temperature was 100°, and there was no sore throat. The pain had disappeared and the temperature returned to normal by November 2nd. No abnormality has been found in the heart throughout. He has had diphtheria twice, once very severely; otherwise he has had no serious illness. He has occasionally complained of "growing pains" during the last three years. There is a strong family history of rheumatism.

Dr. Tallerman's cases strengthen my suspicion that this child's illness has been rheumatic in origin.

Leyton.

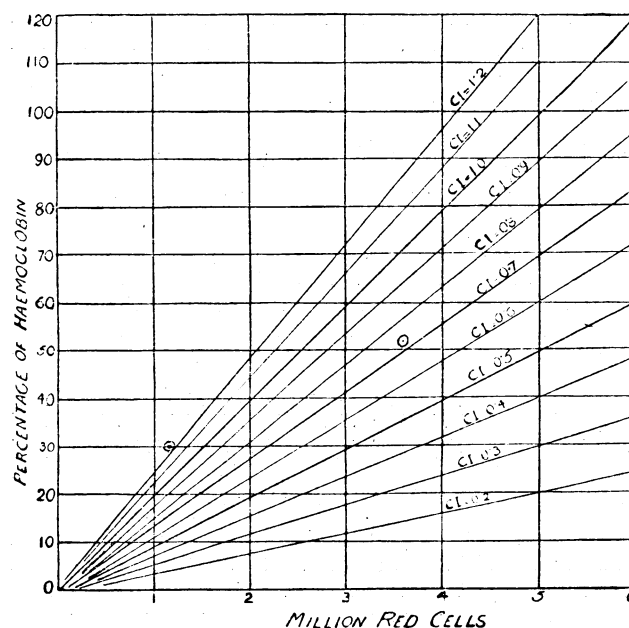
HELEN M. JARDINE, M.B., Ch.B.

RAPID METHOD OF WORKING OUT COLOUR INDEX

The present interest in microcytic anaemia prompts me to publish a chart which I made some years ago for determining the colour index, in order to avoid the usual calculation. Along the ordinate is marked the percentage of haemoglobin, and on the abscissa the number of red cells. A straight line is drawn from zero to the point of intersection of RC = 5 million with Hb = 100 per cent.; every point on this line represents CI = 1.0; thus, if there are 3.5 million red cells and 70 per cent. haemoglobin, a glance at the diagram shows the intersection of these lines to lie on the CI = 1.0 line. Another straight line is drawn from zero to the point RC = 5 millions, Hb = 50 per cent.; every point on this line represents CI = 0.5; for example — 2 million red cells and 20 per cent. haemoglobin lies on

this line, so the CI in this case is 0.5. Other lines are drawn from zero to points above the RC = 5 million mark, each line representing CI = 0.1, 0.2, 0.3, and so on.

As examples: if RC = 3.6 millions and Hb = 52 per cent., the point of intersection will be seen to be just



above the CI = 0.7 line; by calculation CI = 0.72. Again, if RC = 1.2 millions and Hb = 30 per cent., the intersection is just above the CI = 1.2 line; by calculation CI = 1.25.

For accuracy the diagram should be drawn six inches square.

Westgate-on-Sea.

FREWEN MOOR, M.A., M.D.

CARCINOMA IN A LONG BONE SECONDARY TO CARCINOMA OF RECTUM

This condition must, I think, be exceedingly rare, and I therefore report the following case.

The patient, a man aged 69, had a colostomy performed for carcinoma of the rectum in December, 1928, and in the following February the growth was excised. In August, 1930, a swelling commenced on the left tibia, about the junction of the upper and middle third. As the growth gradually enlarged the pain increased, and the skin over it became tense and discoloured. The growth was of firm consistency, but not bony hard. The Wassermann reaction was negative.

Diagnosis of secondary carcinoma was made, but in view of the extreme rarity of this condition the possibility of an osteosarcoma could not be overlooked.

Report of X-Ray Examination.—The compact bone of the tibia below the superficial swelling shows destruction without any defined outline. Extending beyond the surface of the tibia into the swelling, there is an irregular and ill-defined shadow of bony structure. The appearances indicate a secondary carcinoma involving the tibia.

In March, 1931, the leg was amputated, and the pathological report of the tumour was as follows: Sections show a mass of very fibrous tissue in which are areas of haemorrhage, and scattered throughout are areas of osseous tissue. Interspersed among the osseous tissue are masses of very definite columnar-celled glandular tissue resembling that seen in a columnar-cell carcinoma of the rectum. The condition is undoubtedly a secondary deposit of a columnar-cell carcinoma in the shaft of the tibia.

My thanks are due to Drs. Grellier and Barlow, radiologist and pathologist respectively, for the care and interest taken in their investigations, and for the above reports of this case.

STANLEY J. FIRTH, M.B., M.R.C.S.,
D.P.H.

Medical Officer, Hastings Municipal
Hospital.

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ROYAL SOCIETY OF MEDICINE

ANNUAL DINNER

The annual dinner of the Royal Society of Medicine took place at the May Fair Hotel, London, on November 12th, when Dr. T. WATTS EDEN presided over a company of about 150 Fellows and guests. The principal guests were: Sir William Bragg, Sir George Buchanan, Sir Farquhar Buzzard, Lord Dawson of Penn (President, Royal College of Physicians), Dr. F. E. Fremantle, M.P., Sir Henry Gauvain, Sir Ernest Graham-Little, M.P., Sir F. Gowland Hopkins (President, Royal Society), the Right Hon. Sir Donald Maclean, M.P. (President, Board of Education), Sir Ewen Maclean, Sir Milsom Rees, Mr. Herbert Tilley (President, Medical Society of London), and Dr. W. G. Willoughby (President, British Medical Association).

At the reception the President wore a new gown, maroon in colour, copied from the robe of a doctor of medicine of Padua of the eighteenth century, as illustrated in a volume in the library of the Royal College of Physicians. The gown is a gift to the Society by Lord and Lady Dawson, who have spent a great deal of time upon its selection and production. The fabric is of British manufacture, and the garment was made in Scotland.

Sir DONALD MACLEAN, in proposing the toast of "The Society," made a passing reference to his recent electoral struggle, mentioning the fact that one of the reasons for his success was the fact that his brother (Sir Ewen) spoke very often on his behalf, and nobody had any idea to which party he belonged! His own profession, that of the law, Sir Donald went on, owed a great deal to the Romans, while the medical profession owed much to the Greeks. Unfortunately, the Greeks had no method of centralizing medical education and science and of standard-

izing teaching. What might medical science have been to-day if in those far-off times there had been a Sir John Macalister to fuse into one great royal society the medical library at Alexandria, the school of Cnidus, the school of Cos, the Sicilian school, not to speak of Herophilus and Celsus! He proceeded to say a few words about the Board of Education and such efforts as it had made to promote the well-being of children in the schools. He found on taking office that he was responsible for 1,300 school medical officers, 3,000 school nurses, 1,000 specialists—"whatever that may mean"—and 750 dentists. Sir George Newman, for whose work in connexion with public health the nation owed a great debt of gratitude—in his recent report stated that since this national service was established in 1907 hundreds of thousands of defective or ailing children had been effectually treated and their physical disabilities remedied. In a word, there had been provided repair on a vast scale. "I am by no means unacquainted," Sir Donald Maclean went on, "with the difficulties which are obvious, and indeed unavoidable, as between the medical services attached to the various State departments and the great outside practising profession. Let me express the hope that I shall never live to see the day when the voluntary practice of medicine is in any degree lessened, but I am quite sure there is not only room, but ample opportunity, for a much larger measure of co-operation and co-ordination between the medical services of the departments of the State and your own great organization. I know that this is very difficult ground, but I will only say—and I say it officially—that if there is anything which the Board of Education can do by way of co-operation and co-ordination and friendly working together, it shall gladly be done. I am sure that is the best line of progress instead of endeavouring to drive unwilling units under the State umbrella." With regard to the Royal Society of Medicine, he said that its record showed what an immense amount of work could be done by skilled and friendly co-operation. It was a great federation of medical and surgical activities. Within it the physician could tell the surgeon what he thought of him, and the surgeon could equally tell the physician. It was a pity that there was not a department for eliciting the frank opinion of the patients. But the great work which had been accomplished was evident to all those who took the least care to see and read what had been done. "You have no difficulties about dumping at all; I welcome you all as free traders. You exclude no knowledge which is of the slightest use to the human race, come from where it will. But I am very conscious of the fact that there is nothing quite so good in the medical and surgical world as home products, and I am very proud of the fact that the great medical profession, as practised in Great Britain, stands at the highest point which the profession has ever reached in any country, not only scientifically, but ethically also. I know that some people talk about doctors' etiquette in terms of impatience, and occasionally it is possible that such impatience may be justified. But that etiquette is only a symptom of a profoundly vital fact in the realm of progress of general medicine, and in what you do among yourselves in your profession you set a splendid example to the whole world."

Dr. WATTS EDEN, in responding, said that the Society was really a great organization by means of which medical men and women were carrying on their own education, and the wise founders of the Society built upon the very broad foundation of "physick and surgery and the sciences connected with them." Its interests were therefore catholic and not sectarian, and although the Society carried on its work by means of a large number of Sections, each concerned with its own corner of the medical field, its real object was medicine as a whole. Medicine was now a highly specialized subject, and in consequence was in some danger of becoming split up into disconnected units, each having but a narrow and limited outlook—a keyhole view, as it were, of the whole field. This outlook was inimical to broad views of disease, of diagnosis, or of treatment, and if a specialist, no matter how distinguished he might be, strayed from his own

importation, and at once, was to give the Board of Trade power to issue an Order which would impose a duty, not exceeding 100 per cent., on the value of the articles. It was hoped that a Bill authorizing this would be passed through all its stages and receive the Royal assent on November 20th. The powers which were being asked for were emergency powers, and the Government's proposals must come up for consideration again in six months, or something else must take their place.

The motion for the Address was carried without a division.

Mr. HORE-BELISHA, replying to Sir H. Page-Croft on November 16th, said that for the ten working days ended November 10th last the value of imported chemicals, drugs, dyes, and colours was £895,399.

Highbury Pensions Hospital

Replying to Mr. CROOKE, on November 12th, Major TRYON (Minister of Pensions) said that, owing to the steady decline in the number of patients in the Highbury Hospital, Birmingham, it had been decided, in agreement with the hospital committee, that the maintenance of this institution as a Ministry of Pensions hospital could no longer be justified. It would be closed at the end of December. The number of men still requiring institutional treatment at the end of the year would be small, and treatment would be given them in a Ministry or in a civil hospital. They would enjoy the same privileges as other pensioners undergoing treatment in those institutions. Dr. FREMANTLE asked whether any use was to be made of Highbury Hospital, or whether it would be shut down and its value thrown away, when so many hospitals had to be built. Major TRYON asked for notice of this question.

Foot-and-Mouth Disease

On November 16th Sir J. GILMOUR, replying to Mr. Hurd, said that he had considered the latest report of the Foot-and-Mouth Disease Research Committee as affecting the risks involved in the importation of dried milk and other milk products from foreign countries where disease was prevalent. While it would appear from the laboratory experiments so far conducted that milk powder, in common with many other commodities, might be a potential carrier of foot-and-mouth disease, it had not been demonstrated that the virus survived in milk powder under trade conditions. The practicability of carrying out further tests under trade conditions was under consideration.

Unemployed Insured Persons.—In reply to Mr. Rhys Davies, on November 12th, the Minister of Health, Sir E. HILTON YOUNG, said he proposed to introduce immediate legislation to protect the health insurance and pension rights of those unemployed insured persons who would otherwise lose these rights at the end of the year.

Housing.—Sir E. HILTON YOUNG informed Dr. F. E. Fremantle, on November 12th, that 618,547 houses had been built in England and Wales by local authorities from 1919 to September 30th, 1931. Approximately 1,135,000 houses had been built by private enterprise during the same period.

The Services

DEATHS IN THE SERVICES

Deputy Inspector-General Henry Laurence Crocker, R.N. (ret.), died recently at Plymouth, aged 79. He was educated at University College Hospital, and took the M.R.C.S. in 1875 and the L.R.C.P.Ed. in 1876. Entering the Navy as surgeon on March 31st, 1876, he attained the rank of fleet surgeon on September 5th, 1893, and retired, with an honorary step in rank, on June 1st, 1906. He was granted a Greenwich Hospital pension in 1915.

Colonel William Mitchell Houston, I.M.S., died on October 30th in King Edward's Hospital for Officers, Osborne, Isle of Wight. He was born on November 2nd, 1875, and was educated at Trinity College, Dublin, where he graduated B.A. in 1897, and M.B., B.Ch., and B.A.O. in 1899. Entering the

I.M.S. as lieutenant on June 28th, 1900, he attained the rank of colonel on August 7th, 1929. He served in Somaliland, East Africa, in the campaign of 1903-4, receiving the medal with a clasp. On the outbreak of the great war he was appointed to the staff of the Indian hospital ship *Gurkha*, which was engaged in carrying Indian and Australian wounded from France and the Dardanelles to England. In 1915, when arrangements were being made in India to cope with the large contingents of wounded then arriving from Mesopotamia, he was recalled to India to serve as registrar of the Victoria War Hospital, Bombay; and the following year he was appointed officer commanding the Officers' Convalescent Home, Nasik. Thereafter he served as health officer of the Port of Bombay, until his appointment in 1929 as Inspector-General of Civil Hospitals, Bihar and Orissa, an appointment which he had to relinquish in December owing to ill-health. Colonel Houston had the honour of being appointed honorary surgeon to the Viceroy, in May, 1929.

Lieut.-Colonel Paul Knighton Gilroy, M.C., Indian Medical Service, died after a long illness on October 22nd, aged 46. He was born on June 7th, 1885, and was educated at Emmanuel College, Cambridge, and at St. George's Hospital. He took the M.R.C.S. and L.R.C.P.Lond. in 1909, and graduated as B.A. (with honours), M.B. and B.Chir.Cantab. in 1910, and as M.D. in 1913. After filling the post of house-physician at St. George's, he entered the I.M.S. as lieutenant on January 29th, 1910, and became lieutenant-colonel on July 29th, 1929. He served in the war of 1914-18 in Iraq, 1915-18, was mentioned in dispatches in the *London Gazette* of June 15th, 1916, and March 12th, 1918, and received the Military Cross on January 1st, 1918. At the time of his death he held the appointment of superintendent of St. George's Hospital, Bombay.

Lieut.-Colonel William Lapsley, O.B.E., of La Porte, St. Jacques, Jersey, died there suddenly on October 21st, aged 56. He was born on July 28th, 1875, educated at Queen's College, Cork, and graduated as M.B., Ch.B., and B.A.O. of the Royal University, Ireland, in 1899, and afterwards took the D.T.M., with distinction, at the London School of Tropical Medicine, in 1912. Entering the I.M.S. as lieutenant on June 28th, 1900, he became lieutenant-colonel on December 28th, 1919, and retired on July 24th, 1928. He served in the Waziristan campaign on the North-West Frontier of India in 1901-2, gaining the frontier medal with a clasp; and in the war of 1914-18; in Persia in 1918-19, when he was mentioned in dispatches in the *London Gazette* of February 3rd, 1920, and received the O.B.E. on June 3rd, 1919.

Universities and Colleges

VICTORIA UNIVERSITY OF MANCHESTER

Dr. E. H. Walker has been appointed Lecturer in Public Health Administration.

ROYAL COLLEGE OF SURGEONS OF ENGLAND

An ordinary meeting of the Council of the Royal College of Surgeons of England was held on November 12th, when Lord Moynihan, the President, was in the chair.

Diplomas of Membership were granted to 122 candidates who had passed the examination in medicine, surgery, and midwifery of the Examining Board in England.

Diplomas in Public Health were granted jointly with the Royal College of Physicians to nineteen successful candidates.

The lists of successful candidates for the diplomas of Membership of the College and in Public Health were printed in the report of the meeting of the Royal College of Physicians published in our issue of November 7th (p. 876), with the exception of H. K. G. Nash and Marie W. E. H. Schuyt van Castricum, who were granted the diploma of Membership.

It was reported that two candidates had been successful at the Primary Examination for the Fellowship held at Toronto in October.

ROYAL COLLEGE OF PHYSICIANS OF IRELAND

At the meeting of the President and Fellows held on November 6th, the following Members of the College were admitted to the Fellowship: Daniel Moriarty, Robert Henry Joseph Mulhall Corbet, Gerald Spence Smyth, Henry Francis Moore. Yang Lin was admitted as a Member and Licentiate of the College.

much as, if not more than, aptitude. He was a Yorkshireman; and to the attentive ear his native county lingered faintly and pleasantly in his speech. His figure was sturdy and comfortable, his expression was mild and benevolent, but with a straight look that showed he could be resolute and formidably direct. When reproof was necessary he had the admirable art of giving it weight without anger, so that it did its work and left no by-product of bitterness and discouragement. His mind was shrewd and realistic rather than actively intellectual, and he had an implacable good sense that no ingenuity could delude. His strongest personal characteristic was his rock-like placidity. This was no mere inertia, but an inward calm in which the perplexities of diagnosis were surprisingly often resolved, and which made him as an operator extraordinarily independent of his audience, and unruffled by complications. His serene temperament was undoubtedly the very substance of his being, and in the last analysis the quality that put him among the very small band of the soundest, the most uniformly successful, and, above all, the most trusted surgeons of his time.

ROBERT ALEXANDER MURRAY, M.D., C.M.

Consulting Surgeon, Stockport Infirmary

We regret to announce the death, on October 4th, of Dr. R. A. Murray, who for the last fifty years had been one of the most prominent personalities in Stockport.

Robert Alexander Murray was born in 1858, and received his medical education in Edinburgh and Paris. He graduated M.B., C.M.Ed. in 1879, and proceeded M.D. in 1893. He was appointed house-surgeon to the Stockport Infirmary at the age of 22, and six years later was elected honorary surgeon. For twenty-five years he served the institution in this capacity, and when he retired as senior surgeon in 1912 he continued to act as vice-president of the board of management, and was appointed honorary consulting surgeon. He conducted a large private practice without specializing in any one direction. With the outbreak of war he devoted his energies to the treatment of the wounded, and it was largely due to his influence that several of the fine new schools which had recently been erected in Stockport were placed at the disposal of the military authorities for use as hospitals. He was in a great measure the author of the scheme whereby these schools, together with the town hall and other buildings, could be most advantageously employed. He became the principal medical officer of the local military hospitals, and in recognition of his services received the O.B.E. When Brinnington Manor was taken over by the British Red Cross Society as a neurological hospital for shell shock cases Dr. Murray was appointed its consulting surgeon; he also acted as medical referee for the War Pensions Committee.

For twenty-seven years Dr. Murray had been a member of the Stockport Town Council, and in 1920 was appointed alderman; he was chairman of several committees, and associated himself particularly with the improvement of sanitation in the erection of public buildings. He was a senior magistrate in the town, having been appointed in 1892. He was the governor of several educational institutions, and a member of the court of governors of the University of Manchester. For nearly fifty years he played a leading part in electoral campaigns as a prominent Conservative, being chairman of the Stockport Conservative and Constitutional Association from 1910 to 1926; on relinquishing that position he became president. He was a member of the British Medical Association, and of the Chester, Lancashire, and Stockport Panel Committees.

America has recently lost another eminent obstetrician in Professor JOHN WHITRIDGE WILLIAMS of Johns Hopkins University, Baltimore. He died on October 23rd, the very day on which, had his health allowed him to travel to England, he was to have received the Honorary Fellowship of the British College of Obstetricians and Gynaecologists. Through his classic textbook Professor Whitridge Williams was probably better known than any other English-speaking obstetrician, and his death, coming so soon after that of Professor Polak, is a heavy loss to obstetrics and gynaecology in America, and indeed throughout the world.

The death of EDWIN MORTON, M.D., at the age of 68, leaves a gap in the medical life of Oxford which it will be hard to fill. A graduate in medicine of Edinburgh, he took his M.A. at Oxford and the D.P.H. of the R.C.P.S.I. After some years of general practice in Redditch and Woodstock he became assistant school medical officer for Oxfordshire in 1908, and medical officer of health for North Oxfordshire combined districts in 1912. After taking this public appointment his interest in the clinical side of medicine remained as keen as ever. He was a regular attendant at meetings of the Oxford Medical Society, and was always ready to discuss modern ideas and methods. As an M.O.H. he was always intensely alive to the position of the general practitioner, and showed much kindness to newcomers to his area. Dr. Morton's interest in Oxford, and particularly in his old college, Christ Church, was one of the marked features of his life, as were his sense of humour and his unfailing tact and courtesy the keynotes of his association with his fellow practitioners.

Medical News

The Purvis Oration before the West Kent Medico-Chirurgical Society will be given by Sir William H. Wilcox at the Miller General Hospital, Greenwich, on Friday, December 11th, at 8.45 p.m.; the subject will be recent researches into the causation of chronic rheumatism.

At the meeting of the Medico-Legal Society to be held at 11, Chandos Street, W.1, on Thursday, November 26th, at 8.30 p.m., Dr. Emanuel Miller will read a paper on the social aspects of juvenile delinquency, to be followed by a discussion. The annual dinner of the society has been indefinitely postponed.

At the next meeting of the Society for the Study of Inebriety, to be held in the rooms of the Medical Society of London, 11, Chandos Street, Cavendish Square, W., on Tuesday, January 12th, at 4 p.m., Dr. W. Norwood East, H.M. Commissioner of Prisons, will open a discussion on mental defectiveness and alcohol and drug addiction.

The autumn dinner of the Irish Medical Schools' and Graduates' Association will be held in the Georgian Suite, Piccadilly Hotel, on Thursday, November 26th, at 7.45 p.m., with the president, Mr. Andrew Fullerton, F.R.C.S.I., in the chair. The High Commissioner for the Irish Free State and Dr. W. G. Willoughby, President of the British Medical Association, will be the official guests. Dinner tickets, for members and guests, ladies and gentlemen, 15s. 6d. (exclusive of wines). Application, accompanied by remittance, together with names of guests, should be forwarded as early as possible to Mr. James Carver, F.R.C.S., St. George-in-the-East Hospital, E.1.

The annual dinner and dance of the British Serbian Units Branch of the British Legion will be held at the Lysbeth Hall, Soho Square, W.1, on Saturday, December 5th, at 7 for 7.20 p.m. The president, Miss Marx, will be in the chair.

At the scientific evening to be held at St. Mary's Hospital, London, W., on Tuesday next, November 24th, demonstrations will be given of a number of new appliances and new processes used in medical practice and research work at the hospital. Among these will be an explanation by Sir Almroth Wright of the process known as "intertraction," a toxicology demonstration, a film illustrating the St. Mary's method of treating varicose ulcers, and the diminutive camera used for taking a number of pictures at once of the interior of the stomach.

The Fellowship of Medicine and Post-Graduate Medical Association announces that a whole-day course in proctology will be given at St. Mark's Hospital, from November 23rd to 28th (fee £3 3s.). An afternoon course in infants' diseases will be given at the Infants Hospital, Vincent Square, from November 30th to December 12th (fee £3 3s.). A course in dermatology will be held at the Blackfriars Skin Hospital from November 30th to December 12th (fee £1 1s.). Free lectures will be given at the Medical Society of London, 11, Chandos Street, W., on Wednesdays at 4 p.m. as follows: November 25th, Sir Henry Gauvain, on "Bone and joint tuberculosis"; December 2nd, Mr. Tudor Edwards, on "Surgical chest diseases"; December 9th, Mr. Cecil Joll, on "Goitre, with special reference to thyrotoxicosis." A lecture for the M.R.C.P. will be given by Dr. W. J. Adie on November 23rd, at the same place, at 8.30 p.m., on "Diseases of the nervous system," and by Dr. Knyvett Gordon at 10, Bedford Square, on November 25th, at 8.30 p.m., on "Anaemia," and on November 27th on "Leukaemia" (fee 10s. 6d. for each lecture). Free clinical demonstrations will be given as follows: December 1st, Victoria Park Hospital, by Mr. W. H. C. Romanis, at 9.15 a.m.; December 3rd, National Heart Hospital, by Dr. F. W. Price, at 3 p.m. (admission by ticket, obtainable from the Fellowship); December 7th, St. John's Hospital, Dr. S. E. Dore, at 6 p.m.; December 8th, Royal Northern Hospital, Mr. Hamilton Bailey, at 3.30 p.m.; December 15th, Royal Waterloo Hospital, Dr. Bernard Myers, at 2 p.m.; December 17th, Miller General Hospital, Mr. Reginald Ledlie, at 11 a.m. Copies of syllabuses of all courses may be obtained from the Fellowship of Medicine, 1, Wimpole Street, W.1.

The fourth extra-metropolitan dinner of the University of London Medical Graduates Society was held in Bristol on November 13th. The president of the society, Sir John Rose Bradford, Bt., took the chair, and was supported by the past-president, Sir StClair Thomson. Thirty members attended. The next meeting of the society will be held on Thursday, January 21st, from 4 to 6 p.m., at the London School of Hygiene and Tropical Medicine, by invitation of the council of the School. The programme will include demonstrations and films. Applications for membership of the society may be sent to the honorary secretaries, 11, Chandos Street, W.1.

At the first meeting of the Southwark Medical Society, held in the Evelina Hospital, with Dr. Ellis Stungo in the chair, Dr. William Stott, medical officer of health for Southwark, gave an address on co-operation between the M.O.H. and the practitioner. He surveyed the field of public health work, and dealt with such problems as housing, encroachment, and notification. An interesting discussion followed, in which Dr. Crowe, tuberculosis officer for Southwark, Dr. R. Larkin, surgeon M Division Metropolitan Police, and Dr. F. Porter-Smith participated.

The Ministry of Health has issued copies of the forms to be used by local authorities in making returns for the year 1931 in respect of maternity and child welfare, tuberculosis, venereal diseases, and hospital treatment. Mention has previously been made in the *Journal* of the alterations regarding reports on the treatment of tuberculosis, and full instructions are printed on the back of the appropriate form.

The decline in the consumption of beer in Germany is shown by the fact that in 1930 this was only 72 per cent. of what it was in 1913. In the period 1924-29 the consumption began to rise again, but in 1930 a milliard litres less beer was drunk than in 1929.

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, Drumshough Gardens, Edinburgh** (telegrams: *Associate, Edinburgh*; telephone 24361 Edinburgh).

QUERIES AND ANSWERS

Cobalt

"J. A. R. T." writes: Could anyone tell me if cobalt has ever been used internally, and for what purpose? A patient of mine, a varnish expert, claims that it could be used in profound anaemia, like manganese.

Anal Neuralgia

Sir ROBERT WOODS (Dublin) writes: Although it does not pertain to the end of the alimentary canal in which I am most interested, I am happy to think myself in a position to enlighten "Neuralgia" on the cause of the distressing malady which he describes, and to tell him of a simple and effective remedy. The cause is a cramp or tetanus of a few fibres of the internal sphincter: the remedy, inflation of the rectum. A pump or two of air from an enema syringe is enough to stretch the cramped muscle and give immediate relief. In the commonest case, where the pain comes on in the middle of the night, it can be cured in this way without the patient being at the trouble of waking up properly.

Preserved Foods

"HACKNEY" inquires about the food value of (1) preserved, chilled, or dried eggs; (2) preserved or frozen meat; (3) tinned fruit and dried fruit; (4) tinned milk and cream; (5) frozen butter.

* The calorie value of all the preserved foodstuffs mentioned (except, perhaps, dried eggs and dried fruit) can be taken as being the same as that of fresh material—that is, there is just as much protein, fat, and carbohydrate as there would be in the fresh stuff. In the case of dried fruit there is, of course, bulk for bulk, a good deal more food value. Preserved foods are, in general, less desirable than fresh, because (a) there may be a diminution in vitamin content, or (b) there may be some interference with palatability. In dried eggs there is probably loss of vitamin content and denaturation of proteins, and possibly oxidation of lipoids. Preserved or chilled eggs are only less desirable than fresh because rather less palatable. Chilled or frozen meat is apt to be tough, for reasons which are now being investigated but are not yet fully understood. Tinned or salted meat contains little or no vitamin. The same probably applies to tinned milk, cream, and fruit. Frozen butter ought to be quite as good as fresh butter.

Income Tax

Succession to Partner's Share

"X Z" acquired a share in a practice as from July 1st, 1931. How should the tax payable for 1931-32 be dealt with as between himself and Dr. S., from whom he bought his share?

* If all persons concerned—that is, the present partners and Dr. S.—express the desire to do so they can have the