

Water-borne Outbreak of Paratyphoid B

SIR,—There has recently occurred in this district a small localized outbreak of paratyphoid B fever due to the consumption of a contaminated water supply.

The evidence collected has proved fairly conclusively that the outbreak—twenty cases out of a “population-at-risk” of twenty-eight—was due to the consumption of water from a pump situated in the old type of court and supplying seven houses only. *Bact. paratyphosum* B has been isolated from the water supply during the course of the investigations by three members of the Emergency Public Health Laboratory Service—namely, Prof. Wilson, Oxford, Dr. Knox, Leicester, Dr. Gell, Northampton; and, furthermore, the organism isolated has been shown to be similar culturally and serologically to the organism isolated from specimens of faeces and urine from the patients concerned. This small outbreak is of particular significance, as there is no evidence in the medical literature of an outbreak of paratyphoid fever being caused through the consumption of a contaminated water supply.

I hope very soon to be able to publish a detailed report of the investigations carried out in this very interesting and unique outbreak.—I am, etc.,

Northampton, Aug. 1.

DAVID J. JONES, M.B., B.Ch., D.P.H.

Protecting Eye Shields

SIR,—May I support Mr. Harrison Butler's plea (July 19, p. 101) for issue of the Cruise vizor? As a practical rifle shot there is no question that there is no difficulty in using the rifle when the vizor is down; in fact it acts as an aperture sight and would help the myope. I cannot understand what there is to experiment on in it. It does protect, it does not obstruct, and it is cheap.—I am, etc.,

London, E.C.4, July 30.

C. WYNN WIRGMAN.

** We understand that as a result of careful and exhaustive tests it was decided not to recommend the issue of the vizor to the Forces.—Ed., *B.M.J.*

Notification of Deficiency Diseases

SIR,—The two Ministries responsible for the maintenance of adequate nutrition of the population under war conditions are at present largely guided by theoretical considerations and lack the means whereby the success or failure of their work can be subjected to any but the roughest of practical tests. The only checks on the adequacy of the national dietary now available are, first, the schools' medical reports; secondly, the incidence of notifiable infectious diseases; and, thirdly, reports of death from starvation collected by way of the coroners' courts. Of these, only the incidence of actual starvation is directly linked to the question of nutrition.

The net is of too wide a mesh to discover a dangerous prevalence of a deficiency disease or subclinical avitaminosis of far wider extent. I believe that owing to the lateness of the spring vegetable season and the scarcity of imported citrus fruits there has been a considerable increase in the incidence of scurvy during last spring and the early summer, and that this could have been avoided had the authorities been aware in good time of the danger.

May I therefore use your columns to make the suggestion that, for the duration of the war at least, deficiency diseases should be made compulsorily notifiable to the Ministry of Health or to the local authority, as are certain infectious diseases? By this means the signals of danger could be received in time enough to prevent a possible outbreak of a deficiency disease by suitable publicity and the distribution of concentrated vitamins.—I am, etc.,

London, N.19, July 27.

HUBERT PEARSON.

The National Loaf

SIR,—If Dr. I. Harris wrote only to the *British Medical Journal* his letter could remain unanswered, it is so barren of real argument. But someone of the same name is both disparaging the national loaf in public meetings and gaining local Press publicity for his views, and that is a very different matter.

Dr. Harris's letter is full of half-truths which are unlikely to deceive the medical reader, but I tremble to think of their effect

on the layman. He says the loaf is to be fortified by calcium alone—he must know that the national wholemeal loaf has five times as much iron, twice as much fat, many times as much vitamins, and the unknown remainder present in natural whole grain but absent in the 73% extractions. He calls the calcium “chalk.” Is it not a fact that calcium is added in the form of phosphate? He wants us to have our necessary calcium in milk. Is he unaware that the pre-war consumption of milk was one-fifth of a pint per day per head, and that even then two and a half million more milking cows were necessary to provide the optimum daily pint per head?

Of course we know calcium is ineffective without vitamin D, but is not this supplied with the margarine? A layman could only think that Dr. Harris says the calcium in the national loaf is ineffective. Again, he says there is not a scintilla of evidence that there is a calcium deficiency. Has calcium nothing to do with teeth? Can he produce twelve adults in working-class Liverpool with sound teeth? They have not come to North Wales as evacuees, and if white bread is not responsible for their languid pallor then it is up to Dr. Harris and his colleagues with the advantage of local knowledge to tell us what is.—I am, etc.,

Caernarvon, July 26.

GRIFFITH EVANS.

Suture of Cauda Equina

SIR,—I should be very glad to know of any successful case of suture of the cauda equina. In the official history of the last war it is stated that not a single example was met with, yet most textbooks comment on its feasibility. If, therefore, through the medium of your *Journal* you are able to put me in touch with anyone who has sutured one or more elements of the cauda equina with success I shall be much obliged to you.—I am, etc.,

LAMBERT ROGERS.

c/o Medical Department, Admiralty, S.W.1, July 30.

Sydenham and the Royal College of Physicians

SIR,—Your reviewer of Prof. McDowall's *Biological Introduction to Psychology* (July 26, p. 121) states that Sydenham never became a Fellow of the Royal College of Physicians “probably owing to professional jealousies.” This is not correct, as demonstrated by the documents of the College and as stated in the *Life of Thomas Sydenham* by J. F. Payne, a late Harveian librarian of the College and one of our greatest scholar physicians. Sydenham did not become a Fellow of the College because up to an advanced age he had not a doctor's degree and thus, according to the by-laws of the College at that time, was not eligible for the Fellowship. Sydenham obtained a doctor's degree only in 1676, thirteen years before his death, but even then did not apply for admission, as there is no record of any such application in the archives of the College. It is quite possible that at his age he did not feel inclined to present himself at an examination, or possibly the necessities of his practice prevented him from taking an active part in the affairs of the College, which all Fellows at that time were under obligation to do.

There is no question of professional jealousy in all this. On the contrary, according to contemporary documents Sydenham was often praised and given honour by the College.—I am, etc.,

London, W.1, July 28.

A. P. CAWADIAS.

The Services

NAVAL AWARD AND MENTION IN DISPATCHES

Surgeon Lieut. G. L. Ward, R.N.V.R., has been awarded the D.S.C. for courage, skill, and devotion to duty in operations off the Libyan coast, and Temporary Surgeon Lieut. I. B. Hopkins, R.N.V.R., has been mentioned in dispatches for seamanship, resource, and devotion to duty in rescuing survivors from a merchantman which was being attacked by enemy aircraft.

CASUALTIES IN THE MEDICAL SERVICES**ROYAL NAVY***Wounded*

Surgeon Lieut. Charles John Robarts, R.N.

ROYAL ARMY MEDICAL CORPS*Missing*

Major Patrick David Clifford Kinmont.

Universities and Colleges

ROYAL COLLEGE OF OBSTETRICIANS AND GYNAECOLOGISTS

At the quarterly meeting of the Council, held in the College House on July 26, with the President, Prof. W. Fletcher Shaw, in the chair, the following officers were elected to take office in October.

President: Prof. W. Fletcher Shaw. *Vice-Presidents:* Mr. Eardley Holland and Prof. C. G. Lowry. *Honorary Treasurer:* Mr. J. P. Hedley. *Honorary Secretary:* Mr. G. F. Gibberd. *Honorary Librarian:* Wing-Commander F. W. Roques, R.A.F.V.R. *Honorary Curator of Museum:* Mr. Aleck W. Bourne.

The following were admitted: *To the Fellowship:* N. L. Edwards, W. A. Taylor, R. Watson. *To the Membership:* J. Joseph.

The following candidates were elected to the Membership: G. Boyd, D. S. Foster, E. Gledhill, Constance E. Peaker, Kathleen M. Robinson, Katharine C. Rogers, R. X. Sands, Violet E. A. Sykes, G. Wynn-Williams.

Medical News

The Annual Congress of the Ophthalmological Society of the United Kingdom will be held, circumstances permitting, in Cambridge on September 4 and 5, 1941. The subject for discussion will be "Ocular Injuries resulting from the War," and the openers will be Dr. O. M. Duthie (Manchester) and Dr. S. Zuckerman (Oxford). It is possible that all male members can be accommodated in college. It is desired that all who hope to attend will notify at an early date the honorary secretary, Mr. Frank W. Law, F.R.C.S., 36, Devonshire Place, London, W.1.

Medical practitioners are informed that the Food Rationing (Special Diets) Advisory Committee of the Medical Research Council has recommended that persons suffering from nephrosis or the nephrotic type of glomerulo-nephritis should be granted three extra meat rations a week. Doctors may therefore complete certificates on behalf of their patients suffering from these diseases for submission by the patient to the local Food Office.

The Board of Education has asked local education authorities to review their school medical services, with a view to releasing doctors and dentists for the Services. Routine medical inspection of school entrants must be maintained, but many other surveys, it is suggested, might be undertaken by school nurses, while doctors of foreign nationality who have been registered in this country might be employed.

Four years ago the National University of Mexico founded its social service system under which every medical graduate is required to practise for five months as a health officer in some part of the country where there is no such representative. He sends in a weekly report of contagious diseases cases seen, and a monthly report which includes information on sanitary questions such as water supply and drainage. Since 1935 more than 100 graduates have taken part in this social service programme.

Lieut.-Colonel Sir Henry Gidney, I.M.S. (ret.) has been appointed a member from British India on the new Indian National Defence Council.

Dr. Gerhard Domagk, professor of morbid anatomy at Münster, who first introduced prontosil, has been made an honorary member of the Spanish Academy of Dermatology and Syphilology.

The May issue of *Annals of Surgery* is a special number devoted to "Surgical Preparedness Symposia."

The Canadian Red Cross Society will send 300,000 lb. of Canada's jam to Britain this year.

A new wing in the Salvador Hospital at Santiago, Chile, has been dedicated to the memory of Harvey Cushing.

Letters, Notes, and Answers

All communications in regard to editorial business should be addressed to THE EDITOR, BRITISH MEDICAL JOURNAL, B.M.A. 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.

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ADVERTISEMENTS should be addressed to the Advertisement Manager (hours 9 a.m. to 5 p.m.). Orders for copies of the *Journal* and subscriptions should be addressed to the Secretary.

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QUERIES AND ANSWERS

Income Tax

Employment by Self and Wife: Housekeeper

"GAMMA" is employed as non-resident medical superintendent of a municipal hospital, and his wife has been appointed whole time to the staff of the M.O.H. for the duration of the war. Consequently it has been necessary to employ a housekeeper. Can an allowance be claimed for this expense?

* * No. The point was decided in the case of *Brewers v. Harding* on very similar facts.

LETTERS, NOTES, ETC.

An M.O.H. and the R.M.B.F.

Dr. LEWIS G. GLOVER, honorary treasurer of the Royal Medical Benevolent Fund, writes: I desire to acknowledge through your columns the receipt of the following letter, signed "Medical Officer of Health," in recognition and gratitude to you as well as to the donor. "I recently noticed in the medical press the suggestion that doctors who have received kindness in the form of medical attention to themselves and their families from other doctors should recognize the fact by making a grant to the Royal Medical Benevolent Fund which, to a certain extent, expressed their gratitude. The difficulty of making some return is increased when the recipient doctor is a medical officer of health. I think the suggestion made is therefore helpful, and I propose to follow it in the future and now enclose a 'token' subscription representing in a small way my appreciation for the kindness displayed to myself and family by medical practitioners." As the "token" was a very generous cheque I desire to express my grateful thanks both to the donor and also to you. It is possible that others who may read this letter may be encouraged to follow the example which I am glad to record is being taken up.

Ether Convulsions

Dr. C. LEONARD TRAYLEN (London, N.W.10) writes: May I point out that in my letter (July 12, p. 67) no stress is laid on the fact that no hot ether was used. Dr. Charles Wells was inclined to suggest that this was a cause.

Problems of the Circulation

Dr. G. ARBOUR STEPHENS (Swansea) writes: Prof. McDowall is to be thanked for his two lectures on the problems of the circulation (July 12 and 19), in which he pleads for a closer relation between physicians and physiologists, and deprecates the restriction of diagnosis to restricting formulae. It is interesting in this connexion to note that he, as a physiologist, believes that a muscle when it contracts produces no sound, while teachers of medicine contradict him when they say the sounds of the heart are due in part to the contraction of the heart muscle. Prof. McDowall speaks of "high pressure," but does not define it. In 1932 I pointed out that the height varies according to the width of the armlet, and for that reason emphasized the need for a standard width. He makes no reference to what I hold is of great importance—namely, the restriction of blood flow into the vasa vasorum when the pressure on the blood in the arteries is increased. I hold that the ratio of the systolic pressure to this pressure in the arteries, against which the heart stroke has to pump the blood, is of the greatest importance in connexion with cardiological problems.