

## EPIDEMIOLOGICAL NOTES

## Discussion of Table

In *England and Wales* returns for measles, dysentery, and acute pneumonia were higher than last week by 1,136, 163, and 129 respectively. Only small fluctuations were shown by the other notifiable diseases.

There were 20 fewer cases of diphtheria than last week recorded in Durham, and 19 fewer in Glamorganshire. However, in the combined regions of London, south-east, south-west, south midland, and the eastern areas the notifications rose from 83 to 120. In these areas whooping-cough notifications rose by 74, but in the rest of England and Wales they fell by 96.

Acute pneumonia was slightly more prevalent throughout the country. Measles showed the largest weekly increase since February, 1943, and was particularly marked in the north. Lancashire had 295 more cases than last week, Warwickshire 202, Cheshire 135, Southampton 77, Staffordshire 68, Yorks West Riding 68, Nottinghamshire 64, Gloucestershire 50, and London 45.

The increase in dysentery was due mainly to the large outbreak in Yorks West Riding, Wortley R.D., where 130 cases were reported. The largest of the other returns were Lancashire 49, London 44, Surrey 20, Norfolk 16, and Glamorganshire 11.

In *Scotland* there was a general rise in the incidence of infectious diseases. The rises over last week's totals included measles 114, acute pneumonia 81, diphtheria 38, whooping-cough 35. A small increase in the incidence of diphtheria was general throughout the country; the largest returns were Glasgow 69, Lanark County 30, Edinburgh 19, Fife County 12, and Dundee 11.

In *Eire* there were 23 more cases of diphtheria than last week. Thirty-two cases were recorded in Dublin C.B., and the remaining 101 notifications involved forty-eight registration areas.

In *Northern Ireland* the incidence of measles rose by 68, and scarlet fever by 27. All but one of the 259 cases of measles were notified in Belfast C.B., which also reported 48 of the 117 cases of scarlet fever.

## Week Ending December 2

The returns of infectious diseases in England and Wales during the week included: scarlet fever 2,279, whooping-cough 1,474, diphtheria 637, measles 7,810, acute pneumonia 761, cerebrospinal fever 39, dysentery 381, paratyphoid 3, typhoid 7, poliomyelitis 10.

## Medical News

Prof. J. M. Mackintosh, M.D., F.R.C.P., has been appointed Dean of the London School of Hygiene and Tropical Medicine from Jan. 1, 1945.

A meeting of the Association for Scientific Photography will be held at the Caxton Hall, Westminster, S.W., on Saturday, Dec. 30, at 2.30 p.m., to discuss "The Choice of Materials for Scientific Photography."

A meeting of the Eugenics Society will be held on Tuesday, Dec. 19, at 5 o'clock in the rooms of the Royal Society, Burlington House, Piccadilly, W., for a discussion on "Aspects of the Housing Problem." All interested in the subject are invited to attend.

Vacancies are available for training in child psychiatry at centres recognized by the National Provisional Council of Mental Health for this purpose. Applicants should have the D.P.M. or equivalent mental health experience, together with experience of children in specialist or general practice. Training fee, £60; length of training, one year, half-time. Application may also be made for grants or loans. Applications should be sent to the secretary, Child Guidance Department, 39, Queen Anne Street, London, W.1.

Grants for more than £825,000, made by the United Kingdom Government under the Colonial Development and Welfare Act, 1940, have enabled the Uganda Protectorate to plan for the largest hospital and one of the most extensive health services in the British Colonial Empire. A grant of £477,500 will provide for the reconstruction and extension of Mulago Hospital, Kampala, so that 1,120 beds are available. A further sum of £350,000 for the extension of medical services will be used for the following: training of staff, £92,000; antimalarial campaign, £75,000; antivenereal diseases campaign, £63,000; antituberculosis campaign, £50,000; nutrition survey, £40,000; ambulance service, £30,000.

Mr. Thomas F. A. Stowell, M.D., F.R.C.S., has been re-elected to the Council of the Industrial Welfare Society, of whose advisory medical committee he is chairman.

## Universities and Colleges

## UNIVERSITY OF MANCHESTER

The following appointment is announced: Dr. G. J. Langley, F.R.C.P., Dean of Postgraduate Medical Studies.

The University has received a grant of £750 for the Department of Education of the Deaf from the Nuffield Provincial Hospitals Trust per the Manchester, Salford, and Stretford Hospitals Advisory Board.

## ROYAL FACULTY OF PHYSICIANS AND SURGEONS OF GLASGOW

At a meeting of the Faculty held on Dec. 4 with the President, Mr. William A. Sewell, in the chair, James Black, M.D., and Matthew McLearie, M.B., Ch.B., were admitted Fellows of Faculty.

## Letters, Notes, and Answers

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## ANY QUESTIONS?

## Etherington-Wilson Technique for Spinal Analgesia

**Q.**—What is the Etherington-Wilson technique for spinal anaesthesia, and where may full descriptions of the method be found? Is it a widely used technique?

**A.**—The original spinal technique described by Etherington-Wilson made use of Howard Jones's "light" or hypobaric 1 in 1,500 nupercaine solution in 0.5% saline. The lumbar puncture was performed in the sitting position, and the volume of solution injected and the time allowed for sitting up were calculated according to the desired height of analgesia. A full description of the method will be found in the *British Journal of Anaesthesia* (1934, 11, 43). Several modifications of the technique were recently described by Etherington-Wilson at a meeting of the Anaesthetics Section of the Royal Society of Medicine, and these will presumably be published in the *Proceedings*. The original method has been fairly widely used by some anaesthetists.

## Stilboestrol for Masturbation

**Q.**—Are there any records of the treatment of masturbation by the administration of stilboestrol? Also, are there any contraindications against the administration of stilboestrol for long periods in the years of early and acute sexual desire?

**A.**—Yes. A record may be found in the *Journal of Nervous and Mental Diseases* (June, 1944, 99, 928) describing the case of a psychopathic seaman 19 years old whose sexual preoccupation and frequent masturbation were very favourably modified by 1 mg. of stilboestrol by mouth daily, the only apparent adverse effect being mild gynaecomastia. Treatment was given intermittently (see also *J. Amer. med. Ass.*, 1944, 125, 760). The writer has used stilboestrol in 5-mg. doses in a lad of 17 brought before the courts for sexual assault. The patient was gigantic with some acromegaloïd features. The stilboestrol permitted him to control intense sexual desire, and to reduce the frequency of masturbation considerably. Here, too, there was some resulting tenderness and swelling of the breasts.

Large doses of stilboestrol in the normal male, or in cases of carcinoma of prostate, may produce disappearance of libido and impotence; also a considerable diminution in the sperm count, where such is possible. Experimentally, disintegration of the testicular structure occurs in small animals, but regeneration and normal sexual function follow withdrawal of the stilboestrol. It would appear that controlled doses of stilboestrol, given intermittently, may prove a useful and harmless form of therapy in selected cases. Prolonging the administration is associated with certain dangers indicated above. It would be unwise to neglect the appropriate treatment of an underlying psychoneurosis where such is present.