

# Letters, Notes, and Answers.

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## QUERIES AND ANSWERS.

### REFERRED PAIN.

"Y. T." writes: Can any of your readers refer me to a book or paper in which "referred" or "reflected" pain is fully considered?

### ALTERATIONS TO A HOUSE.

"X. Y. Z."—On the information furnished, assuming that the house is above working-class standard, the Housing Acts as to habitability will not apply. Assuming that one or two rooms only are affected, it is thought unlikely that a local authority, if called in after the re-erection of the glass house, would hold that a nuisance, requiring action under the Public Health Act, existed. The question is primarily one of right as between landlord and leaseholder, depending on all the facts. It would be best to take legal advice.

### INCOME TAX.

#### Motor Car Depreciation, etc.

"J. L." sold in 1923 for £95 a car which cost him £400 and bought a second-hand car for £200, and in 1924 sold for £16 a cycle which had cost him £58, buying in 1925 a second-hand cycle for £22 8s.

\* \* (1) Obsolescence allowance, to be treated as a professional expense reducing the year's profits, for 1923, £200—£95=£105, in respect of the car transaction, and for 1925, £22—£16=£6, in respect of the cycle transaction. (2) Depreciation allowance for 1925—26 at, say, 20 per cent. of the value of the car and cycle, as written down from the original cost at the same rate of depreciation over the period from the dates of the original sales to the last date at which "J. L.'s" accounts were made up prior to April 5th, 1925.

"P." states that the car expenses, including depreciation, of his wife and himself in performing the duties of their public appointments exceeded the amount of their allowances. Can they claim relief in respect of the difference?

\* \* There is no legal bar, but the expenses must be proved to have been incurred wholly, exclusively, and necessarily in the performance of the duties of their offices. It is usually difficult to prove that the allowance made by public bodies is insufficient on that rather stringent basis. It makes no difference to the total tax payable whether joint or several returns are made, but in either case the wife's earnings should be shown separately.

## LETTERS, NOTES, ETC.

### TREATMENT OF GOUT.

DR. VAUGHAN PENDRED (East Sheen) writes: I have recently had under my care a very instructive case of gout—a short, plump man, aged 50, who has had gouty attacks since he was 31. The disease has been inherited from his grandfather and father, as, in my experience, is invariably the case. There is no albuminuria. Two years ago a friend advised him to take atophan, the drug so widely used at present. After he had taken a hundred pellets there developed an attack of diarrhoea and melaena; his friend was affected in the same way; in neither case was the gout improved. In January, 1926, he was given aquinol, the Swiss equivalent of atophan (allyl phenicinchonester). The gout was uninfluenced, and when I was called in at the beginning

of March he was gravely ill with severe gout in his feet, and profound anaemia that was only cured after a fortnight's stay in Ramsgate and much arsenic. I feel sure that the quinine in the aquinol had acted as a very potent haemolyser. After many years' experience I am convinced that the Hippocratic dictum—that the *Colchicum autumnale* is the remedy for gout—is true. Full doses must be given. Five drops are useless; fifteen or more every four hours is the only cure of the disorder known to-day. The much discussed depression caused by the drug is a myth.

### BROW PRESENTATION.

THE recent cases of brow presentation recorded in the **BRITISH MEDICAL JOURNAL** have induced Dr. HARRY FREEMAN (Dalston) to send the following record of a case which was successfully delivered: A multipara, aged 34, had been in labour for twelve hours before I was called. On examination the membranes were ruptured, the cervix nearly fully dilated, and a brow (right mento-anterior) was presenting. The patient had had two very easy previous confinements, and has a very roomy pelvis; the foetal heart sounds were easily audible, so under anaesthesia I converted to an occipito-posterior, and rotated. This proved much easier than I anticipated, and after flexing the head and pushing it well down into the pelvis, forceps were applied and the child delivered alive, though badly bruised. Before intervention I had, however, waited an hour, but there was no progress whatever and it seemed that the head would get impacted. The mother made an uneventful recovery, and the child, now 2 months of age, is perfectly well in every respect.

### IODINE INJECTION IN RHEUMATOID ARTHRITIS.

IN a letter with reference to an article on intramuscular injection of guaiacol-iodine-camphor oil by Dr. S. Watson Smith (October 10th, 1925, p. 648) and a subsequent letter (March 6th, p. 449), Dr. R. KERRY (Montreal) writes: The hypodermic injection of iodine has been used here for a number of years with consistently good and often striking results. It does not appear that the addition of camphor or guaiacol to iodine is beneficial, and it certainly renders the injection more irritating. A 1 in 40 solution of iodine in sesame oil, if about six months old, is unirritating at the time of use and is followed by no reaction; this is probably true if other bland oils are used. The pain caused by a freshly made solution is negligible. Trial has been made of a 1 in 50 colloid, but it is less active than the oily solution, though more pleasant to use. Intramuscular injection is not necessary, but the oil must be carried well through the skin, as induration, lasting some months, results if it be not placed deeply enough. The injection, he says, is followed by prompt relief from pain, owing to disappearance of inflammatory pressure, and, in acute cases, by a rise of one or two degrees in temperature, which seems to be beneficial rather than otherwise. When gross lesions are present, as in extensive pulmonary tuberculosis, toxæmia, resulting from the use of iodine, may overwhelm the patient, and fatal cases have so occurred. One-quarter of a grain of iodine (the ordinary weekly dose) in the body of an adult can have but small value as a germicide, and its undoubted potency must be due to its action, directly or indirectly, as an antitoxin.

### ADVERTISEMENTS BY POST.

DR. GEORGE JONES (London, S.E.) writes: During the recent strike there was a sudden and most blessed disappearance of advertisements sent by post. Now the enterprising firms have begun again and are making up for lost time. Could not this waste of time, money, and printer's ink be stopped? I do look at the advertisements in the **BRITISH MEDICAL JOURNAL** and other journals. I try to look through some of the regular advertisements of a few well known firms, but life would not be long enough to read the lot. Can no means be discovered of saving the time and eyesight of the profession? Many "ads." are quite well written and some are interesting, but the volume of printed matter consigned to the waste-paper basket is a grief to me.

### DEATH FROM PNEUMONIA AFTER NITROUS OXIDE ANAESTHESIA.

#### Correction.

AN accident seems to have overtaken page 896 of last week's **JOURNAL**, in which the line at the foot of col. 1 was mutilated and that at the foot of col. 2 disappeared altogether. The reference in the footnote in the first column is "*Zeit. f. Hyg. u. Infektionskrankh.*, 1918, 86, 1"; the missing line in the second column consisted of the word "acidosis," which ended the paragraph. We desire to express our regret to Professor Ernest Glynn, author of the article affected.

### MEDICAL INSURANCE AGENCY.

WE are asked to say that the Medical Insurance Agency has received from a member resident in Plymouth a request for particulars about the Doctors' Motor Car Policy, but he has not given his name and address. The inquiry refers to a 1920 Belsize car.

### VACANCIES.

NOTIFICATIONS of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 62, 63, 66, 67, and 68 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 64 and 65.

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 207.