THE BRITISH MEDICAL ASSOCIATION.



Including an Epitome of Current Medical Literature SUPPLEMENT. WITH

No. 3465.

1927. June 4, SATURDAY,

1/3 Price

BRAND

Post Pituitary Extract

Specially prepared for Hypodermic and _____ Intramuscular Injection. ____

Pitibulin Preparations are physiologically tested and standardised by the most approved methods, and may be relied upon for purity, constancy, activity and asepsis.

NOW ISSUED IN TWO STRENGTHS.

'Pitibulin' Obstetric

A 10 per cent. standardised extract of infundibular substance as recommended by the Modical Research Council for obstetrical and general purposes. Given intramuscularly, 'Pitibulin' Obstetric is invaluable for promoting uterine contraction in the second stage of labour and after delivery; also for the prevention of post-partum hæmorrhage.

*Azoule' 'Pitibulia' Obstetric—1 and 1 c.c. in each.
In boxes of 6 and 12.

le' 'Pitibulin' with Adrenin—le.c.c. with gr. 255.
In boxes of 6 and 12.

ulin' with Adrenin—1 c.c. with gr. 180. In boxes of 6 and 12.

'Pitibulin' Surgical

A 20 per cent. extract of infundibular body. This preparation is identical with 'Pitibulin' as hitherto supplied by this House. Its use is especially indicated to raise blood pressure in surgical shock and post-anæsthetic collapse. In very urgent cases it may be administered per rectum or intravenously diluted with normal saline.

Preparations:

zoule' 'Pitibulin' Surgical-1 and 1 c.c. in each. In boxes of 6 and 12.

Leaflet giving further particulars will be sent on request.

Allen & Hanburys Ltd., 37 Lombard Street, London, E.C. 3.

CANADA-66 Gerrard Street East, Toronto.

UNITED STATES-90 Beekman St., New York City.

Coolidge X-Ray Tube Service

Several complete working equipments have been installed at Morley House for the practical demonstration of the superiority of the Coolidge Tube and Coolidge Tube Technique, covering the entire range of Diagnostic and Therapeutic Service. Radiologists and all interested are invited to call or communicate with us.

PRICE REDUCTION — Standard Tubes Now £35

EVERY TYPE OF COOLIDGE TUBE IN STOCK.

VICTOR X-RAY CORPORATION LTD.

MORLEY HOUSE, 314-322 REGENT STREET (GROUP), LONDON, W.1.

TELEPHONE: MAYFAIR 6554



TELEGRAMS: "STABILIZER"



Designed to meet the increasing need for a high-grade binocular microscope that ful-fils the following conditions:

- I. Stereoscopic Vision. 2. Extremely Large Field.
- 3. Long Working Distance.
- High Eye Point. 5. Wide Range of Magnification.

It gives the advantage of viewing the image in its true position, not inverted or reversed.

Supplied on four different stands covering every re-quirement, the microscope being interchangeable on cach stand.

BIOLOGICAL MODEL FOR MEDICAL WORK

Special Features

1. Eyepiece prism of overlapping type, giving a dividing line that is practically
invisible. Removable, dustproof housing.

2. Cups, of armoured type,
have plane parallel bottoms,
and are separable for cleaning. They are raised or
lowered by rack and pinion
adjustment of microscope
precision. Adjustable zero
point.

precision. Adjustable zero point.

3. Plungers, six-sided in form to deflect extraneous light, are made of optical glass, matched for colour.

4. Pinions and operating heads always in fixed location, so that readings are controlled by observation only—not by location of heads. heads.

Also Accessory Apparatus, including Colorimeter Lamp, Nephelometer Attachment, Nephelometer and Colorimeter Illuminator, and Hæmoglobinometer.



Microscopes for all purposes. Microtomes, Photomicrographic Apparatus, Centrifuges, Hæmoglobinometers, Balopticon Projection Lanterns, etc.

LISTS ON REQUEST

Bausch & <u>lo</u>mb ()ptical (o. <u>lt</u>d. 37-38, HATTON GARDEN. LONDON,

Contractors to British, Indian, Colonial and Foreign Governments. Our instruments may be obtained through all Deulers.



Special Repairs to House.

H. G. P." had to purchase his house a year ago, and found it necessary to spend £140 in putting it into proper condition. His claim to deduct this amount has been refused on the ground that it was "capital" expenditure.

** The claim which "H. G. P." can make is under Rule 8, No. v, Sch. A, of the Income Tax Act of 1918. He should ask the local inspector of taxes to supply him with the form of claim provided in connexion with that section, and will find the relevant clauses explained therein. It may be that there is some capital element in the total amount, representing an improvement as compared with the original property, but it seems clear that the great bulk of the expenditure is a proper subject of claim. The statutory allowance is based on an average of five years, but "H. G. P." can no doubt obtain approximate estimates of the expenditure of past years from the previous owner or his agent.

Expenses and " Earned " Relief.

"S. A. J." earned £248 last year and claimed to deduct £7 medical journals, £18 (being one-third) annual value of house, telephone £4, travelling £3, total £32, and earned income relief.

* * The asse-sor says the assessment for 1927-28 will be £222, apparently accepting all the deductions as claimed, except the one-third of the annual value, for which he substitutes £12. The earned income relief is not a deduction in arriving at the assessment, but is taken into account in computing the tax payable thereon. The only point which may be worth while pressing on the assessor's attention is that the deduction in respect of the use of the house should include something in respect of rates, light, and heat, and on that ground he might be urged to restore the £18 as claimed.

LETTERS, NOTES, ETC.

EARLY PARENTHOOD.

OR. LEBON, M.R.C.S. (Sarreguemines, Moselle), writes: As regards early parenthood, may I mention the following occurrence. On April 29th last I was called to a barge to see a girl who had been delivered of a child two days previously. She was 12 years old in January, and had been the victim of a rape. She had a big laceration of the perineum, which, owing to the difficulty of getting a doctor, had not been sutured. She had risen from bed on going to stool, and afterwards had a complete inversion of the uterus, which was lying in front of the vulva. I had her taken to hospital and tried in vain to reduce the inversion under anaesthes a. I renewed the attempt on the following morning, but still failed. As the girl was very anaemic and got fever, I had to give up all further manipulation. She left hospital on May 1st with her uterus still inverted, lying inside the vagina, as her parents, having in the meantime had their barge loaded, were returning to Paris, where I expect further treatment will take place. What struck me most in this case was the rapidity with which the lacerated perineum healed up without any attempt being made at restoration by suture. Dr. Lebon, M.R.C.S. (Sarreguemines, Moselle), writes: As regards

PREVENTION OF TUBERCULOSIS IN GUERNSEY.

DR. H. D. BISHOP (M.O.H. for Guernsey), who recently drew OR. H. D. BISHOP (M.O.H. for Guernsey), who recently drew attention to the very low incidence of bovine tuberculosis in that island (Jóunnal, April 16th, p. 749), now sends a comparison of the human and bovine statistics in 1910 to 1919 with those of 1924 to 1926, both years included. During the last three years 2,882 cattle were tested with tuberculin and 2 reacted, while in the previous period, out of 2,426 so tested officially, as many as 191 reacted. As regards human tuberculosis the total mortality in the first period was 478 (357 pulmonary and 121 other forms), and in the second period 123 (103 pulmonary and 20 other forms). Whereas in the earlier period the deaths of children under 5 numbered 41, representing 8.5 per cent. of the total tuberculosis mortality; in the last three years only 2 children died, the percentage having thus fallen to 1.7.

AN ALTERNATIVE TO CIRCUMCISION IN PHIMOSIS.

Dr. D. R. Lewis (Burna Medical Service) writes: As one who has performed over 500 operations for circumcision during the course of nine years, while attached to the out-patient department of the Rangoon General Hospital, Burma, I would like to point out that Dr. Whitfield's method, as mentioned on page 187 of the BRITISH Dr. Whitfield's method, as mentioned on page 187 of the British Medical Journal of January 29th, cannot be recommended, for the following reasons, as an alternative to the usual method of circumcision: first, bleeding from the glans (a very vascular region) is apt to be troublesome, and it does not admit of the usual method of haemostasis, as it is a condition of general oozing; secondly, the narrow orifice of the prepuce cannot be readily retracted as far as the corona glandis without centripetal lacerations. When these heal there is bound to be a certain amount of constriction of the prepuce once again. From his description I understand that he relies on a good nurse to hold the baby, rather than employ an anaesthetic. This procedure certainly inflicts upon the baby unnecessary pain. It is much easier to give the baby a few whiffs of chloroform, slit the

prepuce, retract it, and put a suture at each end of the cut objection to an anaesthetic the prepuce may be dilated daily, during the bath, first with a probe and then with a Spencer Wells artery forceps; the condition is generally relieved in a month's time. In the case of adults nothing gives better results than the orthodox method of circumvision. orthodox method of circumcision.

THE STUDENT WHO SMOKES.

DR. FREDERICK BACK (Ryhope, Sunderland) writes: With reference to your commentary on Dr. Earp's "Study of the student who smokes" (May 28th, p. 973) and his hypotheses to explain why, of the students who fail to reach diploma standard, the why, of the students who fail to reach diploma standard, the heavy smokers are twice as numerous as the non-smokers, I think there is a tendency to confuse cause and effect. I suggest that it is not so much the fact that heavy smoking causes inefficiency as that inefficient people smoke excessively. For people with deficient mental energy and inability to concentrate it is so much easier to smoke a cigarette or chain of cigarettes than to do what is required—whether it be to make a decision, to perform some action, or to consider a subject—for one obtains the illusion you mention of doing something when in reality. the illusion you mention of doing something when, in reality, doing nothing.

MEDICAL GOLFERS.

MEDICAL GOLFERS.

THE medical profession has the distinction this year of supplying the amateur champion in Dr. William Tweddell of Stourbridge. Needless to say when the stage of the final round in the Amateur Championship was reached both players were very excellent golfers. It seems to be generally agreed that Dr. Tweddell owed his success, which in the end was rather hollow, to steadiness. In golf, as in many other of the affairs of men, the final event is determined rather by the faults of the rival than by the excellencies of the winner, though, as has been said, a high degree of excellence is essential. We may be allowed to congratulate Dr. Tweddell on his success. said, a high degree of excellence is essential. allowed to congratulate Dr. Tweddell on his success.

But these high excellences would not be reached if there were But these high excellences would not be reached if there were not many nurseries for golfers. One of these is the Manchester and District Medical Golfers' Association, which, on May 25th, held its annual medal competition over eighteen holes. The challenge cup for the best net return was won by Dr. J. L. Bradley of Salford with a score of 71, playing from a handicap of 10. The Walter gold medal for the best scratch score was won by Dr. A. A. Smalley of Manchester with a round of 77; Dr. Bradley also secured the Walter silver medal presented for the best gross score by players with handicaps of 10 and upwards. Club prizes were won by Dr. J. Clark and Dr. J. Leech for the best net scores for holes 1 to 9 and holes 10 to 18 respectively: 122 players competed.

tively; 122 players competed.
It will be remembered that three competitions will be played out during the Annual Meeting of the British Medical Associa-tion at Edinburgh: (1) for the Ulster and Childe Cups at Muirfield on July 21st, (2) for the Treasurer's Cup on Friday, July 22ud, at Gullane, and a ladies' competition on the morning of July 20th at Cammo.

JOHN JONES.

An anonymous but sympathetic writer in the issue of the Medical Journal and Record for February 2nd gives an interesting account of Dr. John Jones, a pioneer of American surgery, who was born in Jamaica in 1729 and died in 1791. After completing his studies in Philadelphia he went to Europe, where he attended the lectures of John Hunter and Percival Pott in London and of Petit Le Cat and Le Dran in Paris; he spent some time also at Edinburgh and Leyden. On his return to America he settled New York, where his professional attainments as a surgeou and Petit Le Cat and Le Dran in Paris; he spent some time also at Edinburgh and Leyden. On his return to America he settled in New York, where his professional attainments as a surgeon and obstetrician soon procured lim an extensive practice. He was the first to perform the operation of lithotomy in that city, and his fame as an operator spread throughout the middle and eastern states of America. He served with distinction in the campaign against the French in 1758 and gained the gratitude of the wounded French commander, General D'Escaux, who had been taken prisoner, for his skilful attention. When the medical school in the College of New York was founded Dr. Jones was appointed professor of surgery. After a second trip to Europe, when he renewed his acquaintance with Hunter and Pott, he published, in 1775, his Plain Remarks upon Wounds and Fractures, which was the first work on surgery by an American author in the United States prior to 1800, and was used as a manual of the American army surgeons during the revolutionary war. On the evacuation of Philadelphia by the British troops in 1778 he removed to that city and remained there until his death thirteen years later. He was not only the intimate friend, but was as last illness, which was caused by renal calculus complicated by pulmonary abscess. At the time of his death Jones was physician to the Pennsylvanian Hospital, president of the Humane Society, and vice-president of the Medical College, in the formation of which he had taken an active part. which he had taken an active part.

VACANCIES.

Notifications of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 59, 60, 61, 64, 65, and 66 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 62 and 63.

A short summary of vacant posts notified in the advertisement columns appears in the Supplement at page 231.

The Liposoluble Ovarian Hormone

STANDARDISED PHYSIOLOGICALLY BY THE GROWTH TEST.

ALSO GIVES THE ŒSTRUS TEST.

VIDE "THE LANCET" MARCH 26TH, 1927, pp. 674-5 and APRIL 9TH, 1927, p. 764.

SISTOMENSIN

| Indications | PACKAGES | Dosage |
|---|--|---|
| Functional dysmenorrhœa, hæmor- rhages of puberty and menopause, menorrhagia, cisturbances subse- quent to menopause or oöphorec- tomy, hypoplasia of the uterus, infantilism, sterility, etc. | Ampoules, 1.1 c.cm., containing 0.05 grm. in sterile oily solution. Boxes of 5 and 20. Tablets each containing 0.0125 grm. Bottles of 40. | 1 to 2 c.cm. a day injected deeply or intramuscularly. 1 to 3 tablets three times a day. In cases of profuse menstruation it is advisable to commence treatment two or three days before the onset of the period. |

The Hydrosoluble Ovarian Substance

CAUSES HYPERÆMIA OF THE FEMALE GENITAL ORGANS.
STIMULATES THE FUNCTIONS OF THE GENITAL
GLANDS AND MENSTRUATION.

AGOMENSIN

| Indications. | PACKAGES. | Dosage. |
|---|---|---|
| Functional amenorrhæa, oligomenor- rhæa, sterility, vomiting during pregnancy, etc. | Ampoules, 1.1 c.cm., containing 0.04 grm. in sterile aqueous solution. Boxes of 5 and 20. Tablets each containing 0.02 grm. Bottles of 20. | 1 c.cm. to 4 c.cm. injected subcutaneously or intramuscularly two or three times a week. 1 to 3 tablets three times a day. |

THE CLAYTON ANILINE CO., LTD.,

PHARMACEUTICAL DEPARTMENT

Telephones: HOP 6954-5.



40, SOUTHWARK STREET, LONDON, S.E.I.

Telegrams: CIBADYES BOROH LONDON.

HORMOTONE for PREMATURE SENILITY and OLD AGE

Stimulates metabolism
Increases muscle tonicity
Raises respiratory exchange
Effects marked subjective improvement



"Old age being caused by degeneration of the endocrine glands, especially the thyroid and sexual glands, all that is necessary to secure rejuvenation is to improve the condition of these glands. The best and easiest way to do this is to administer by the mouth extracts of these glands, after their extirpation from healthy animals. . . .

"The persons treated looked considerably younger after it, to the extent of ten or fifteen years, and sometimes even more. The wrinkles in the face already began to disappear four or five weeks after the treatment, and, at the same time, previously corpulent persons, losing their excess of fat, were made to look slender, thus imparting a youthful impression."

(Lorand, "Life Shortening Habits and Rejuvenation," 1922.)

Dose: 1 or 2 tablets three times daily.

G. W. CARNRICK CO.

417-421, Canal Street, New York.

Dependable Gland Products.

London Agents: BROOKS & WARBURTON Ltd., 40-42, Lexington Street, W.1.

Specify—CARNRICK (TRADE MARK).