

PELVIC CIRCUMFERENCE OF INFANT AT BIRTH.

"INQUIRER" asks: Would someone kindly give me the average measurements of a full term child—round the pelvis—at the level of the iliac crests or at the level of the trochanters. I cannot find the average circumference of the pelvis of a child at birth in any book of reference. Is there any difference noted between the male and female circumferential measurement at birth?

*. The bitrochanteric circumference and iliac circumference cannot be easily dissociated because of the difficulty of taking the former measurement when the thighs are partly flexed on the trunk, as is usually the case in the newborn. The full-term child has a circumference at the level of the iliac crests of 9 in. to 13 in. The bitrochanteric diameter is ± 4 in. The following data are given by Le Damany ("Quelques proportions du corps chez les nouveau-nés," *Journ. de l'Anat. et de la Phys.*, 1910, Paris, Tome 46, pp. 664-690): "The transverse diameter of the trunk at the level of the iliac crests is 7.4 cm. and 7.2 cm. in the male and female respectively (0.200 and 0.197 of the stature). The difference is therefore insignificant. The antero-posterior diameter of the trunk at the level of the anterior superior iliac spines is 4.4 cm. and 4.5 cm. in the male and female (0.0875 and 0.0832 of the stature). The difference is due to the more salient anterior-superior iliac spines in the female."

CHANCE'S FILTER FOR ULTRA-VIOLET RAYS.

DR. S. T. BEGGS (Middleton) inquires about the use of Chance's filter (Wood's glass) in conjunction with the ultra-violet ray lamp. He asks if it is suitable for diagnosis and treatment other than in ringworm cases.

*. Wood's glass, of which Chance's filter is made, is a glass of dark violet hue, which transmits only the rays at the extreme violet and ultra-violet end of the spectrum. When light from a source rich in ultra-violet rays—for example, the mercury vapour lamp—passes through it, fluorescence is caused in various substances. The filter is useful in the diagnosis of ringworm of the scalp, because infected stumps fluoresce so strongly that they stand out like silver bayonets, and are quite unmistakable. It must, however, be remembered that epidermal scales and vaseline also fluoresce, although not so strongly as to cause any difficulty in recognizing ringworm of the scalp, but for that reason this test is useless for the diagnosis of ringworm of the glabrous skin. There seems to be no other cutaneous condition in which Wood's glass assists in the diagnosis, nor is it used in any way in treatment. Its scope is limited to ringworm of the scalp alone, in which it is useful both for making the original diagnosis and for testing the results of treatment; with its aid it is quite easy to pick out a single remaining infected stump. The examination must, of course, be made in a darkened room.

INCOME TAX.

Commencement of Liability.

"B. G." was employed as an assistant from March, 1927, to November, 1927, and again in January, 1928, for two weeks; he then started independent practice. What is the basis of his liability for the years to April 5th, 1928, and 1929, and should he approach the authorities?

*. For each year the basis of assessment in these circumstances will be the current year. We suggest that "B. G." should prepare an account of his earnings and expenses, either as at December 31st, 1923, or the expiration of twelve months from the date as from which he commenced independent practice, and use it to compute the liability (1) for the period from the latter date to April 5th, 1928, and (2) by agreement with the authorities, for the year to April 5th, 1929. It would seem that "B. G." cannot usefully deal with the matter until the end of this year, and he will then probably find it most convenient to write to the local inspector of taxes, enclosing a copy of his statement of account, and asking for the forms of declaration. We gather that our correspondent did not purchase and take over an existing practice.

Succession in a Practice.

"M.B., B.Ch." has recently purchased a practice which has since "deceased considerably." He asks if he must pay tax on the basis of his predecessor's earnings?

*. The Income Tax Acts provide that in such a case the amount of the gross assessment should be unaffected by the change in proprietorship, but entitles the successor to claim—under Rule 11, Cases I and II, Schedule D—for an adjustment at the end of the year if the profits have fallen short from some specific cause. Apparently our correspondent will be able to invoke the assistance of that proviso, and he may find it convenient to make up his first account to April 5th, 1928, for that purpose. The local inspector may be technically correct in saying that tax should be paid on the existing assessment and any relief obtained by repayment, but we have usually found that where a prima facie case for application of Rule 11 is made

out, the authorities are willing to accept as a payment on account a sum representing the tax on the amount of the probable ultimate liability. It should be remembered that in such a case as this the authorities will not accept "cash accounts" unless the predecessor's receipts are brought into the computation.

LETTERS, NOTES, ETC.

A LISTERIAN IN ALABAMA.

DR. L. L. HILL, F.A.C.S., of Montgomery, Alabama, was a pupil of Lister at King's College Hospital, London, and his enthusiasm for his great master has not waned. He has written a most eloquent biographical and personal notice of Lord Lister under the title of "Lister's Centenary," which appeared originally in the *American Journal of Surgery* last August, and has now been reprinted in pamphlet form. Dr. Hill is the master of a polished style, and his choice of language is as sound as was his choice of a surgical teacher.

THE USE OF ABBREVIATIONS.

DR. CHARLES R. BOX (London, W.) writes: The annotation on "Typographical Usage" in your issue of March 17th leads me to ask why are the letters T.B. (=Tubercle Bacillus?) so often printed as an abbreviation for the word Tuberculosis? If an abbreviation must be used surely Tb. is more correct.

*. This matter has already been dealt with in the *Journal*, though we cannot at the moment recall where. The usage has probably come about through contributors sending to the press their rough case notes, instead of writing them out in printable form, and also through the tendency of physiologists and others to "lapse into presenting their readers with 'protocols' of experiments related in laboratory slang." In our opinion it is not correct, it is not even safe, to use either of the abbreviations referred to, for we have known these letters to stand not only for "tubercle bacillus" and "tuberculosis," but also for "tuberculin." We remember an instance of a contributor being "called to a confinement (t.b.)." No, it was not the birth of a tubercle bacillus to which he was called, nor was the mother tuberculous; the meaning of the letters in this instance was "twin birth." There are no doubt other terms for which this combination of letters is employed (torpedo-boat, for example), and we might even imagine that, were Uncle Remus telling his delightful tales in these days of rush and hurry, he would refer to his Tar-baby as "T.B." or "Tb."

SEVERE ANAPHYLAXIS.

DR. H. CAMERON KIDD (Emsworth) writes: In the note on severe anaphylaxis on March 17th (p. 480) are not the symptoms described those which follow the injection of almost any medication directly into a vein or lymphatic vessel? I personally experienced exactly these symptoms after one of a series of twelve autogenous vaccine injections. After flushing of the face and then of the whole body, there was intense throbbing of the head, and, finally, a profuse urticaria all over the body, especially over the face, neck, and limbs; all the symptoms disappeared within fifteen or twenty minutes.

GALL-BLADDER DISEASE.

DR. ADAM MOSS (West Kirby) refers to Professor D. P. D. Wilkie's address on aspects of gall-bladder disease (March 24th, p. 481) and writes: Twelve years ago a girl, aged 10, came under my care suffering from pain, vomiting, high temperature, and deep jaundice. There was a history of frequent previous attacks. She had been seen by two or three specialists, whose aim had been evidently to disinfect the gall-bladder with hexamine. I suggested that the trouble might possibly be septic, and that benefit might be derived from vaccines. I gave mixed infection phylacogen (Parke, Davis and Co.) from 5 to 10 minims twice weekly, which effected a complete cure. Since then I have used it for a patient who refused operation for what seemed cholecystitis and gall-stones; the result was that there have been no attacks for the last five years. I regularly give it now in such cases, and often with good results. Personally, I illustrate the association of appendicitis with gall-stones. Seven years ago my appendix was excised during an acute attack, and four years later six mulberry gall-stones were removed after an attack of cholecystitis, set up by trauma in climbing over an oak stile when on a fishing holiday.

MEDICAL GOLF.

THE semi-finalists in the Medical Golfing Society's spring knock-out tournament are E. Laming Evans, G. Dawson, A. Scott-Gillett, R. A. Woodhouse.

VACANCIES.

NOTIFICATIONS of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 43, 44, 45, 48, 49, and 50 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 46 and 47.

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 111.