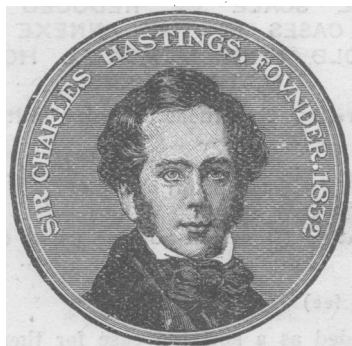


The
British Medical Journal

THE JOURNAL OF THE BRITISH MEDICAL ASSOCIATION.



*Including an Epitome of Current Medical Literature
WITH SUPPLEMENT.*

No. 3559.

SATURDAY, MARCH 23, 1929.

Price 1/3

ADVERTISEMENTS and COMMUNICATIONS for our issue of March 30th: See Notice on page 2 (Advertisements).

In Pernicious Anæmia

THE Liver Extract offered by Parke, Davis & Co., for use in the treatment of pernicious anæmia, is prepared by a method that has been shown to produce an exceedingly active product. It is supplied in vials each containing the extract from 100 grammes (nearly 4 ounces) of fresh liver, the contents of three or more vials being taken daily.

The P., D. & Co. Liver Extract is a palatable preparation with a pleasant salty taste, and it may be taken sprinkled over potatoes, meat, or bread. Its miscibility with water, milk, soup, orange or lemon juice, and other liquid foods also suggests other acceptable modes of administration.

Liver Extract

(Parke, Davis & Co.)

Supplied in packages of 24 vials.
Further details will be
furnished on request.

PARKE, DAVIS & CO.



BEAK STREET, LONDON, W.1

INTERMEDIATE HOSPITAL IN ANNEXE AT 17, PARK LANE

Helped by an endowment fund, an Intermediate Hospital of 25 beds (later to be increased to 50 beds) is now open for suitable general surgical cases at 17, Park Lane, London, W.1, in which the fees for a room cost only three guineas a week.

(The whole scheme is an attempt to help people unable to pay ordinary full surgical expenses, and yet at the same time to avoid any semblance of a charity which would be distasteful to such.)

All further particulars can be obtained from the Secretary or Matron at 17, Park Lane.

Telephones: Grosvenor 2312 & 2313.

A TYPICAL SCALE OF REDUCED FEES FOR SURGICAL CASES IN THE ANNEXE CLINIC OF THE HAROLD FINK MEMORIAL HOSPITAL AT 17, PARK LANE.

Hospital Fees, including Nursing, 3 guineas a week (limited to an average stay of 3 weeks)	£9 9 0
Dressings, Theatre Fees, etc.	1 1 0
Assistant Surgeon at operation (quarter usual charges)	2 2 0
Anæsthetic Fee (one-third usual charges)	3 3 0
Surgical Fees for Major Operation (from one-quarter usual charges, according to patient's means) (say)	26 5 0
(From Forty guineas inclusive fee)	£42 0 0

N.B.—The patient must be recommended as a suitable case for these reduced fees by their own Medical Attendant, who will take charge of the after-treatment while in hospital, and be paid direct by the patient his usual fees for such attendance in addition to the fee as Anæsthetist or Assistant at operation.

When the patient's doctor wishes to arrange a preliminary consultation with the Surgeon-in-Chief (with a view, for example, to a Bismuth Meal, Cystoscopic or X-ray Examination, etc.), all that is necessary is to telephone either the Secretary or Matron, and an appointment will be made. (Proportionately reduced fees only charged therefor.)

Telephones: Grosvenor 2312 & 2313.

All rooms are of course separate, and hold one patient only, there being no wards.

ULTRA-VIOLET IRRADIATION—

THE value of irradiated milk for rachitic children, and in cases of tuberculosis of the bones, has been shown many times. (See *British Medical Journal*, March 28th, 1925; *The Lancet*, January 2nd and December 25th, 1926; *The British Journal of Radiology*, February, 1926; and *The Journal of Actinotherapy*, June, 1928). But hitherto the process of irradiation has always tainted the final product.

This difficulty has now been definitely overcome!

by The 'SCHEIDT' PROCESS

in which COLD QUARTZ TUBES with remarkable U.V. spectra give an easily controlled and positive activation, and leave the products **UNCHANGED in TASTE or ODOUR**

**THE ONLY PROCESS OF EFFECTIVELY
IRRADIATING MILK WITHOUT TAINT OF
OZONE AND CARBON DIOXIDE.**

THE 'Scheidt' Apparatus for cold tube activation is now installed, and in process of installation, at many of England's leading Clean Milk Farms and Dairies. These Farmers understand Milk and how it should taste where Infant Nurture is in question.

They have adopted the 'SCHEIDT' PROCESS!

Clinical, X-ray, and Blood Tests, carried out by eminent medical men using only the Scheidt Cold Tube apparatus (as against Quartz Lamp), are available, and have been quoted in the literature of Foreign Competitors, who appear to have thus paid an unconscious tribute to the value of the 'Scheidt' process.

MEMBERS OF THE MEDICAL PROFESSION ARE INVITED TO A DEMONSTRATION AT

The FOODSTUFFS IRRADIATION Co., Ltd.,
15, CAROLINE STREET, BEDFORD SQUARE,
LONDON, W.C.1.

'Phone: MUSEUM 0162.

TREATMENT OF PREMATURE BALDNESS.

DR. M. BROWN (Glasgow) asks for suggestions for treating a nervous lad, aged 18, who is prematurely bald, and is becoming very sensitive about his appearance. There is a mild degree of sexual neurasthenia, but otherwise he is normal. Would glandular therapy help?

PROLONGED ADMINISTRATION OF CASCARA.

"SIGMOID" asks: (1) Can cascara sagrada be administered for long periods without producing deleterious effects? (2) Can the drug produce poisonous symptoms when administered for long periods, and what form will these symptoms take?

ADMINISTRATION OF ULTRA-VIOLET RAYS.

DR. ELIZABETH C. MUDIE (Glasgow), in reply to "A. M." (March 9th, p. 485), writes: (1) and (2) The best way of heating small treatment rooms is by electric radiators. A two-unit fire will keep a room 15 ft. by 15 ft. at 70° F., but in addition I advocate the use of a Sollux lamp, which can be placed over the patient to prevent chill while he is undressing. A temperature of 70° F. will not harm the lamp. (3) A steam radiator should not be used in the treatment room, as moisture in the atmosphere shuts off short ultra-violet rays. (4) It is advisable to have the lamp recouditioned at the end of twelve months, but there are instruments on the market for recording the efficiency of the burner.

ENURESIS.

DR. F. R. PROCTOR-SIMS (London, N.) writes: In reply to "K.'s" query (March 9th, p. 485), I should advise him to try suggestion. I had a case some years ago of a bright, intelligent boy about 10 years of age, who was brought to me by his father for nocturnal incontinence of urine. I spoke to the boy quietly about the drawbacks in life that the habit would be to him, and especially how it would debar him from staying at friends' houses during his holidays. I gave the father instructions about not giving the boy anything to drink close to bedtime, and to see that the boy emptied his bladder before retiring. I told the boy himself that I was giving him some medicine which would wake him up in the night if his bladder got full, and that he was immediately to jump out of bed and micturate. The mixture was a simple bitter tonic. The father called on me a week afterwards and said that there had been no trouble since, and as I have seen neither of them since, I presume it was a cure. I know of one other case which was cured by hypnotic suggestion. With regard to belladonna—if this has to be tried—I wonder if "K." has used the extract belladonna virid 1/10 grain in water t.d.s. I found it in some cases more effective than the tincture.

"L," in reply to the query of "K." on March 9th (p. 485), reports a case in a boy, aged 10, a relative-in-law of his own, who was staying with him as a guest for two months last summer holidays. Treatment consisted in orders that the boy was himself to perform all the tidying-up, washing, and drying involved by his disability, and that preliminary instruction by the women folk, and a certain amount of watching, were all that they were to do for him. The sense of shame and horror he evinced on the first morning gave an idea of the difficulty such orders would meet with in the case of a boy at home in the care of a mother habituated to do everything for him. Undeterred by reports of relapse after dramatic initial success, "L." persisted, and saw to it that no evasion of his orders was practised by anyone. At Christmas the mother gratefully wrote reporting that the resulting improvement had been well maintained. The life of an uncle of this boy had been practically wrecked by enuresis.

TREATMENT OF CHRONIC CONSTIPATION.

DR. ARTHUR E. DRUITT (Southampton) writes: Dr. Rothwell's inquiry in the *British Medical Journal* of March 9th (p. 485) prompts me to reply that I am always surprised at the frequent resort to drugs in chronic constipation without any mention of diet, in view of the uselessness of relying on drugs for an ailment which, in perhaps nine cases out of ten, is brought about by irregular habits and indiscretion in diet. When shall we learn that the wrongness of feeding on white bread can only be properly rectified by changing over to wholemeal? How is it that methods such as regular feeding, rational dietary, the adequate use of water, and the inclusion of sufficient vegetable roughage are not more practised? If, in spite of such reasonable care, the malady still persists, why, instead of falling back on drugs, should not restoration of muscular activity be sought in massage, hydrotherapy, and electrical treatment, combined with physical exercises? In emergencies cathartics hold a valuable place, but chronic constipation is not an emergency, though it is the frequent precursor of such. Unless there is reason to resort to the more specialized forms of treatment, my general practice is to recommend the use of uncooked bran, one tablespoonful for an adult or a teaspoonful for a small child; this is mixed into the breakfast porridge at the time of serving out. It lends itself well to this, and can also be mixed in milk, marmalade, etc., according to taste. It is placed, when needed, upon the table as regularly as is the sugar basin, so that people may help themselves without further comment, and carry on the treatment, if necessary, for the rest of their lives, taking it with them when on holiday. It is a treasure indeed to those who have common sense enough to use it, and who do not mind not being in the fashion of using a special doctor's prescription or the latest preparation of liquid paraffin. The construction of our w.c.'s is, in my opinion, very wrong, inasmuch as it does

not encourage the natural attitude for defaecation, and herein lies, aided by natural laziness, a great contributory factor to constipation. When in Damascus, shortly after the war, I was delighted to note in the best houses a simple hole in a stone slab on the floor, through which water constantly trickled, as it was supplied by the fountain in the centre of the dwelling. The natural squatting position was then the only one to adopt, but happily for those who are thus minded and physically inclined, our own w.c.'s can, by a little ingenuity, be likewise utilized.

INCOME TAX.

Assistant—Free Accommodation.

"A. H. W." is at present remunerated by a salary, out of which he pays for his own board and lodging. It is suggested that he should take over his principal's present house, free of rent and lighting charges, and receive a smaller cash remuneration. If he does will he be assessable on the cash only, while his principal deducts the full cost to himself?

* * In our opinion, Yes; provided that the new terms of appointment make it clear that "A. H. W." will have no legal tenancy of the house and no right to sublet any portion of it.

Assistant's Expenses: Professional Subscriptions.

"J. S." is employed as an assistant to a general practitioner. The local inspector of taxes has refused to allow the deduction from the amount of the salary of the subscription to the British Medical Association, Medical Defence Union, etc., on the ground that, as the employer is responsible, those expenses are not "necessarily" incurred by the assistant.

* * The point is whether the expenses are "necessarily incurred" to earn the salary in all the circumstances. If the principal leaves it to the wish of his assistant as to whether he or she joins certain associations, etc., then the subscriptions are not "necessary," however proper and desirable. But if the principal lays it down as a condition of employment that his assistant shall belong to those associations—as he very well may—then the assistant must incur the annual expense of subscriptions, and that expense is necessarily incurred in the performance of the duties, as required by the terms of employment. We have always understood that the above statement of the position is accepted generally by inspectors of taxes.

LETTERS, NOTES, ETC.

PROPHYLAXIS OF INFLUENZA.

DR. E. R. LYTH (Isle of Man) writes: Influenza has been my *bête noire* for many years and, in spite of inoculations and sprays, I have succumbed over and over and over again. Comparatively recently I hit upon the idea of spraying or atomizing my nose and throat with an infusion of tea, and I have found this most helpful; though attending cases of influenza, it has been a new experience to escape and to keep well. There is no pain whatever in the use of the spray, and the tea mixes readily with the nasal mucus. I put in fresh tea from the breakfast teapot each morning after washing out the bottle, and this serves for the next twenty-four hours, being used, indifferently, hot or cold. Two or three compressions of the bulb for each nostril and for the throat before going out and on returning has been my custom, with an extra use of the atomizer before and after seeing any suspicious case.

ENDOGENOUS OR EXOGENOUS.

DR. F. P. DE CAUX (London, W.) writes: Sir James Barr, writing in your issue of March 9th (p. 475), stated that, after douching his nose with saline, a few drops of clear fluid would drop out on lowering his head. It may interest him to know that I douche my nose regularly with glycerinum thymol compositum (*B. P. C.*), and that on lowering my head several drops of pink-coloured fluid run out, and that, if I do not lower my head until several hours have elapsed, when I do so the pink fluid still runs out. If Sir James were to colour his saline with a solution of carmine he might think of another reason than the one he gives.

UNUSUAL SYMPTOMS OF PROSTATE ENLARGEMENT.

"J. C." writes: I was interested to see in the *Journal* of February 9th (p. 233) that when one of Mr. Grey Turner's patients put his hands into water he experienced an instant urge to micturate. I have spoken to surgeons about the reflex connexion between the bladder and hands, but have never obtained any satisfaction. In my own experience when the bladder is over-distended there is acute pain in both palms on starting urination. I wonder if Mr. Grey Turner has noted mental changes in the direction of *tête montée* in early cases of prostate enlargement?

VACANCIES.

NOTIFICATIONS of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 47, 48, 49, 52, 53, and 54 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 50 and 51.

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 71.

BRITISH SCIENCE TRIUMPHS OVER DEAFNESS

ORAVOX

BRITISH THROUGHOUT

THE complete range of Oravox Deaf-aids, suitable for all forms of deafness, can be demonstrated to you or submitted for you to test to your complete satisfaction. The Oravox works, offices, and consulting rooms are open for your inspection at any time. Oravox Deaf-aids are entirely British throughout and your attention is drawn to the undermentioned names associated with this undertaking to produce really practical and efficient aids to deafness



Technical Advisers :

SIR OLIVER LODGE, F.R.S., D.Sc., LL.D., etc.

Prof. A. F. C. POLLARD, F.Inst.P., etc. C. M. R. BALBI, Esq., A.M.I.E.E., etc.

ORAVOX LIMITED,
26, LANGHAM STREET, LONDON, W.1.

Telephone : MAYFAIR 6178.

‘BYNIN’ AMARA

(TRADE MARK)

A Powerful Tonic and Hæmatinic

‘Bynin’ Amara is of special value in influenzal conditions and in the marked asthenia and nervous depression which are prominent features of the post-influenzal state. A course of ‘Bynin’ Amara whenever there is any indication of lowered resistance is a valuable safeguard against infection.

It has important advantages over Easton’s Syrup on account of its basis being ‘Bynin’ Liquid Malt in the place of syrup. The ‘Bynin’ Liquid Malt, besides having valuable digestive and nutritive qualities is an efficient solvent for the other ingredients and helps to mask their unpleasant taste.

In bottles at 3/6, 6/6 and 12/-.

Further particulars and free sample will be sent on request

COMPOSITION

Quinine Phosphate	1½ gr.
Iron Phosphate	2 „
Nux Vomica Alkaloids	equal to Strychnine 1/8 „
‘Bynin’ Liquid Malt	1 oz.

Allen & Hanburys Ltd.
37 Lombard Street, London, E.C. 3
West End House: 7 Vere Street, W. 1
Canada—Lindsay, Ont. United States—90 Beekman St., New York City.