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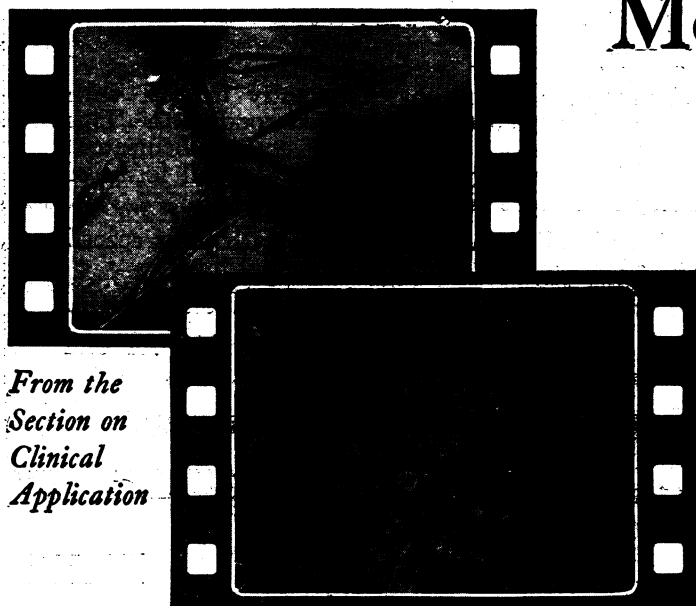
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Letters, Notes, and Answers.

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QUERIES AND ANSWERS.

PROLONGED ADMINISTRATION OF CASCARA.

DR. L. J. HOBSON (Harrogate) writes: In reply to "Sigmoid's" inquiries (March 23rd, p. 584), I have taken, and also prescribed, cascara, as an extract, for some forty years for habitual constipation, and without any deleterious result at any period of its administration. Quite exceptionally, however, it has been withheld, owing to a history of some griping in its action. Otherwise the first condition insisted upon for its success has been a definite daily dosage of 4 grains in an adult at first, reducing to 3 grains, and in some cases to 2 grains, when this has at length proved a sufficient dose. I always give it in the form of the standardized tablets, to be taken a few minutes before, and not after, the evening meal, which is the second cardinal condition to ensure a daily action on the morning following.

INCOME TAX.

"PERPLEXED" received from a patient a "gift of £100"; he had had to buy a house, and the cheque was given to assist him, as was explained in the donor's covering letter. Is this liable to income tax?

* * * Gifts are not liable to income tax in the hands of the recipient; they are outside the scope of the tax. At the same time we should perhaps point out that if, when the gift was made, the patient in question had received professional attention for which a fee would ordinarily have been charged, but which was cancelled in the special circumstances, then it would seem reasonable for "Perplexed" to return for assessment a corresponding amount, as being in effect included in the £100 gift.

LETTERS, NOTES, ETC.

THE DOCTOR AND CHEMICAL WARFARE.

DR. ARTHUR T. JONES (Mountain Ash) writes with reference to Dr. Humphreys's letter on January 26th (p. 180): With the Covenant of the League of Nations and the Kellogg Pact, warfare of any kind, and especially chemical warfare, ought to be beyond the range of possibility. Such warfare, involving, as stated by Dr. Humphreys, the death of 5,000 in five minutes, is too horrible to contemplate, but poison gas let loose on a civil population or a whole community means nothing short of annihilation. Dr. Humphreys suggests that the British Medical Association should formulate some practical policy to meet the situation and to equip medical practitioners with antidotes for themselves and those in their care; I fear that, far from having an opportunity of exercising their skill or knowledge, they would probably all be huddled among the victims. Surely we should aim at something higher and more rational. If, as medical men, we believe that prevention is better than cure, we should act accordingly. It seems to me quite incongruous that, side by side with laboratories engaged in discovering the cause and cure of cancer and other scourges of mankind, others should be engaged in research designed to invent poison gases for chemical warfare. If there is any duty incumbent on us individually as medical practitioners, and collectively as an Association, it is that we should

take the lead in creating public opinion for the prohibition of research in and manufacture of poison gas. Even if we cannot hope to abolish war completely, we should so foster this public opinion as to make it a potent factor in the enactment of international legislation, by which chemical warfare will be condemned as an illegal procedure.

UNUSUAL SYMPTOMS OF PROSTATE ENLARGEMENT.

DR. MARSHALL HAVER (Driffield) writes: Mr. Grey Turner's article of February 9th (p. 233) and "J. C.'s" note of March 23rd (p. 584) prompts me to send the following. Recently I had a very old patient, since dead, with prostate enlargement, who had used the catheter for five years. He often described to me a curious sensation he experienced in the soles of the feet occurring the instant micturition ceased. He had some difficulty in describing the sensation, but likened it to a feather lightly brushing and tickling the soles. The sensation was momentary and invariable, and amused him greatly. I have often wondered what reflex connexion there is between the bladder and the soles of the feet.

"AURIST" writes: I have similar symptoms to those mentioned by "J. C." (March 23rd, p. 584) when my bladder is distended, especially with pale urine of low specific gravity. I get neuralgic pains in the palms of the hands and fingers on urination.

ANAESTHESIA FOR COLLES'S FRACTURE.

DR. E. J. CHAMBERS (Doncaster) writes: I read the article on March 16th (p. 491) with surprise that Mr. Blundell Bankhart thinks so little of gas-oxygen anaesthesia, as carried out with an efficient machine. There is no "luck" about it; nor is there any difficulty in treating a Colles's fracture with the patient anaesthetized by this method, the safety of which is acknowledged by all. A deep chloroform or ether anaesthesia is certainly, in my opinion, subjecting the patient to unjustifiable risk and considerable avoidable discomfort.

QUININE IN INFLUENZA.

DR. A. H. DODD (Bournemouth) writes: During the earlier epidemics of influenza I was particularly sensitive and a frequent victim, necessitating many locums. On the advice of one who had himself been in practice for many years, I tried quinine as a prophylactic. Always afterwards in the late autumn, or at the slightest hint of return of an epidemic, I was in the habit of taking one or two grains of quinine sulphate (preferably sugar-coated pills or uncoated tablets, both being so easily soluble and reliable) the first thing in the morning on rising, with a tumbler of hot water. I went eight years without another attack, then had a slight one, followed by another five years' freedom. I used to continue taking the quinine for about four to five months. I have frequently advised others to follow this line, and with great success when persevered with. In one boarding school, at my recommendation, the head mistress gave it to all, and not a single case of illness occurred during one of the severe epidemics.

THE USE OF THE TONSILS.

DR. J. McNAMARA (London, W.) writes: In your issue of March 23rd (p. 543) Dr. Irwin Moore is quoted as stating that "the general opinion is that after the age of 5 years nearly all tonsils are useless and are in the majority of cases a menace to health." That the ring of lymphatic tissue including the tonsils, with the lingual and pharyngeal tonsils, which, like a defensive bulwark, surrounds the entrance to the body, is useless after five years, is *a priori* improbable. I know two children who had their tonsils removed when well over 5 years old. One of these within a year, the other within a few years, developed an irregular rise of temperature, with chests shown by x-ray examination to be crowded with enlarged tuberculous glands. I cannot say whether the tuberculous infection of these glands after removal of the tonsils was *post hoc* or *propter hoc*, but the experience is suggestive, and if any readers have had a like experience its publication would be useful.

AN OPTICAL PHENOMENON.

DR. W. F. LLOYD (Windsor) writes: If an object such as an isolated pane of glass against a dull sky, or the disc of the moon, is looked at, first with one eye, and then with both, two changes are observed: the object becomes brighter and also larger. One might expect it to appear brighter, since the brain is receiving twice the amount of stimulation, but why does it seem larger? Is it that the images on the retinae do not quite correspond? In that case one would expect a hazy outline, but the outline seems to be quite definite. In my case the object seems to increase in size about one-twelfth of its diameter.

A DISCLAIMER.

DR. F. M. WALKER (Ayr) writes to state that the recent appearance of his name in a local newspaper in connexion with a case of blood transfusion was without his knowledge or approval.

VACANCIES.

NOTIFICATIONS of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 49, 50, 51, 52, 53, 56, and 57 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 54 and 55.

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 83.



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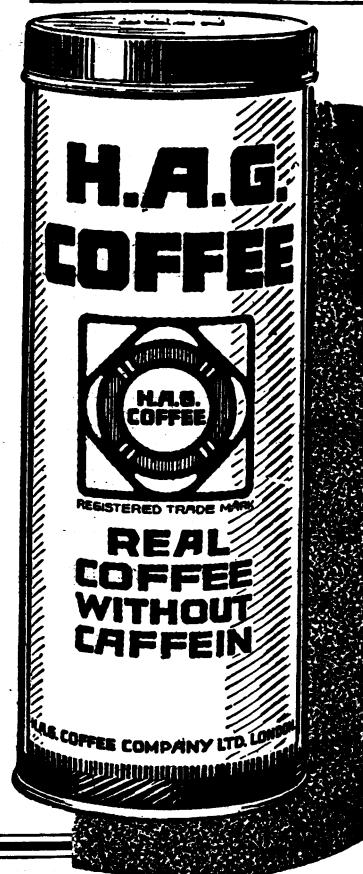
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