

THE ETERNAL COLD QUESTION.

"CURED" writes: "H. H." should improve the vasomotor tone of the mucosae (he may then let organisms take a second place in his treatment). Thus:—*Fauces, tonsils, pharynx*: Make a habit of swabbing out daily before retiring with 3 per cent. silver nitrate solution, later increasing to 5 per cent. Use a thin wooden aural applicator dressed with smallest quantity of cotton-wool, and dab on quickly before a hand mirror; the retching reflex with practice becomes insignificant. *Nasal mucosae*: Make a habit of spraying by "glaseptil" pocket nebulizer with chlorotone inhalant; it is best to do this also at night and after contact with infectious persons. Occasionally swab the mucosae with 5 per cent. argyrol; later on change for 3 per cent. silver nitrate solution. *Laryngeal mucosae*: A pinol and menthol inhalant vehicle—rectified spirit) may be used, a few drops being placed on the handkerchief daily; also keep down the irritation with menthol and eucalyptus lozenges. Having suffered previously for years, the above routine now keeps me free.

EFFECT OF TROPICS ON MENORRHAGIA.

"O. M." replying to the inquiry in the *Journal* of January 25th (p. 179), writes: With the experience of twenty years' general practice in the tropics, and being well acquainted with the climatic conditions mentioned, I would advise decidedly against the patient being allowed to go out—first, on account of the menorrhagia, and secondly, on account of her not being robust. None but quite physically fit women should go out; ignoring climatic conditions only leads to invalidism, and she would almost certainly have to be sent back to a temperate climate before the end of a few months.

ABDOMINAL SURGERY AT SEA.

CAPTAIN A. F. W. DA COSTA, I.M.S. (Camp Sibora, India), writes: With reference to the inquiry by "T. S. S." in the *Journal* of September 28th, 1929 (p. 604), about a book on operative surgery (abdominal) for emergencies, I think he could not do better than invest in a copy of *Lejar's Urgent Surgery*. I consider that Treves and Hutchinson's *Handbook of Surgical Operations* is much on the short side.

INCOME TAX.

Resident Patient.

"W. E. M." has a resident patient who pays £5 5s. per week. Would he be justified in deducting £100 per annum for her board and lodging?

* * On the facts stated we think the amount is justifiable, provided that our correspondent is not claiming to deduct, say, one-half of the cost of rent, rates, etc., and a part of the cost of domestic service from general practice profits. If he is in such practice and has made such a claim, he should bear in mind that it is only that part of the general expenses not deducted from general profits which can properly be allocated to the expense of lodging the resident patient.

Subscriptions to Professional Societies.

"A. J. W." asks whether the annual subscription to a particular medical society can be treated as a professional expense.

* * Yes; but if the income from which the deduction is sought to be made is a salary, then the amount cannot legally be deducted unless the employer has made it a condition of the appointment that membership of the society in question shall be maintained.

"A. H. C." inquires similarly with regard to other subscriptions.

* * (1) London and Counties Medical Protection Society: if the local inspector of taxes is not convinced by production of the society's printed statement that the subscription can be deducted, "A. H. C." might ask the society to communicate direct with the inspector. (2) British Medical Association: the subscription is usually allowed under Schedule D. (3) Society of Medical Officers of Health: we have no evidence that this subscription is allowable. It may be that the difficulty in "A. H. C.'s" case is not the identity of the professional societies, but the condition referred to in the reply to "A. J. W." printed above.

LETTERS, NOTES, ETC.

FOXGLOVE AT THE BEDSIDE—AND ELSEWHERE.

DR. F. J. ALLEN (Cambridge) writes: Some fifty years ago a friend of mine in Somerset met a rustic carrying a large bundle of foxgloves, when a conversation occurred somewhat as follows: "What are you going to do with those foxgloves?" "Take them home to my wife; she makes foxglove tea of them." "Foxglove tea! Why, don't you know they are rank poison?" "No; that I don't. My wife has got the dropsy, and foxglove tea does her a world of good." Thus this drug, which doctors administer with so much caution, was being taken in a perfectly casual way by an ignorant person. I have met with no other similar case; but it seems possible that the use of foxglove for the treatment of dropsy was traditional, and had existed from time immemorial.

MENTAL DISORDER AND INTESTINAL SEPSIS.

DR. JAMES CRAIG (Glasgow) writes: I am sure we are all indebted to Dr. Joyner of Torquay for his description of the illustrative case in the *Journal* of January 11th (p. 89). I have seen many such in my lifetime. When lecturing on jalap my old materia medica teacher used to hold up a piece of the root and say, "Gentlemen, Shakespeare says in one of his plays, 'Canst thou not minister to a mind diseased?' Well, then, this is my verdict, that jalap is the most effective remedy in mind disease." How often in these long years of practice have I found the truth of this statement! Every mother knows the magical effect of castor oil on refractory or bad-tempered children who suffer from constipation. A good deal of my work is among the aged, and I find many of them irritable, opinionative, and difficult to deal with on account of constipation or imperfect evacuations of the bowel. Grey powder, rhubarb, and soda administered four-hourly have a most beneficial effect on such cases. I am afraid free purgation is being neglected in these days of over-refinement in drug treatment, and special appeals to the palate in food and other things.

LARGE HYDROCELES.

DR. P. M. SHEPHERD (Uburu, Southern Nigeria) writes: Medical men in practice in tropical countries are familiar with cases of large hydroceles; I wonder how the following compares with the experience of others as regards size? An old man came here recently with double hydrocele. The fluid in the left sac measured 61 oz. and in the right 40 oz. The usual radical operation was performed, and the patient made a good recovery.

ST. DUNSTAN'S.

BEARING the title "Fifteen Years After," the fourteenth annual report of St. Dunstan's, for the year ended March 31st, 1929, takes the form of a historical survey of the activities of St. Dunstan's during the period which has elapsed since its foundation. The council pays the highest tribute to those people all over the Empire who, from the beginning, have given the organization their sustained and generous support, and it is interesting to read that the Empire-wide work of St. Dunstan's has been rendered possible entirely by voluntary financial effort. Last year the council initiated an exhaustive inquiry to discover as nearly as possible how much further financial help the organization would require, and for how long it would be needed. It was estimated that if St. Dunstan's continued to receive its present measure of financial support it would be able, within the next fifteen years, to set aside from its necessary annual expenditure a sum which would provide a capital endowment sufficient to make further appeals unnecessary, and yet to ensure the continuance of the present standard of benefit to every war-blinded man coming under the influence of the organization. It is gratifying to note that already there is a surplus of income over expenditure, and that the first step towards the endowment has therefore been taken. At the present time the St. Dunstan's community comprises 1,907 ex-officers and men and 4,977 wives and children. The report is illustrated throughout by photographs depicting every phase of life at St. Dunstan's.

THE BRITISH INDUSTRIES FAIR.

THE British Industries Fair, organized by the Department of Overseas Trade, is being held at Olympia, London, from February 17th to 28th. An advance copy of the catalogue which has reached us contains descriptive entries relating to the exhibits of some 1,800 British manufacturers. Drugs and pharmaceutical preparations have an entire and representative section to themselves, and so have medical and surgical instruments and appliances, though this latter section seems unexpectedly small, with only five exhibitors of surgical instruments and only three of x-ray and electro-medical apparatus. Scientific and optical instruments, however, will be shown in great profusion, and illustrate every class of optical requirement. Fifteen firms show manufactures of hospital ware. A valuable feature of the catalogue is the alphabetical list of the exhibits, which is really a dictionary of trade and technical equivalents in nine languages. The catalogue as a whole ought to be a corrective to pessimism concerning British manufacturing enterprise.

THE GULF STREAM MYTH.

DR. J. M. McNAMARA (London, W.) writes: I have pleasure in replying to Dr. Elliot's friendly letter. The article I referred to is "The lore of the wanderer," in the *Castleknock Chronicle*, June, 1927. Should Dr. Elliot want more information on the subject he will find it in *Physiography*, by Huxley and Gregory (Macmillan and Co., 1919 edition, p. 199, etc.). Under the article "Atlantic Ocean," in the ninth edition of the *Encyclopaedia Britannica*, the subject is ably treated by Dr. W. B. Carpenter. I may add that my being set right on the subject of the Gulf Stream I owe to the courtesy of the editor of *Nature*.

VACANCIES.

NOTIFICATIONS of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 42, 43, 44, 45, 48, 49, and 50 of our advertisement columns, and advertisements as to partnerships, assistantships, and locum tenencies at pages 46 and 47.

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 43.