Cost of Arranging New Partnership

- "R. N. G." explains that a commission had to be paid by his firm for introducing a new partner in place of one who had died. Is this an admissible expense?
  - \*\* No. For one thing, it represents capital expenditure to cover a future period, and, for another, it is an expense incurred in connexion with the proprietorship of the practice rather than in carrying it on.

# LETTERS, NOTES, ETC.

#### A Hospital Vacancy in Palestine

The Right Rev. RENNIE MacInnes, D.D., Bishop of Jerusalem, writes: Is there any medical man among your readers, or known to any of your readers, who would consider an invitation to take charge of St. Luke's Hospital, Hebron, in Palestine? This is a mission hospital, which is financed by the Jerusalem and the East Mission, and is the only hospital in this large Moslem town of 16,000 people. There is no other hospital within twenty miles, and there are many villages in the district which have no other place to many villages in the district which have no other place to turn to for treatment. The experience of the last eighteen months has shown that, in fact, village patients come in considerable numbers from a very wide area, sometimes walking two or three days to reach the hospital. Medical missionary work has been carried on in Hebron for thirty-eight years, before the war by the United Free Church of Scotland, and since the war by the Church of England. The hospital building is new, and has been brought up to date, with its own electric plant, etc., during the last few months, at an expenditure of some £3,500. There is an English sister as matron, and a competent native doctor and staff. The whole usefulness of the hospital is at present staff. The whole usefulness of the hospital is at present seriously limited by the lack of an English doctor. From the professional point of view the work would be most interesting, and it is essential that whoever offers should be a surgeon. There is no other missionary work to possible in the town or neighbourhood, so that the opportunity the bosnital cannot be exaggerated. There be a surgeon. There is no other missionary work at present tunities before the hospital cannot be exaggerated. There is a chapel in the hospital building, and the grounds are large enough to permit of building a house for the doctor if suitable rented accommodation is not found. From the date that it was reopened, in September, 1929, just after the serious riots, the work of the hospital has received a great welcome from the people of the town, while relations with British Government officials have been most cordial. If any of your readers desire further particulars, would they communicate with my commissary, the Rev. E. M. Bickersteth, secretary of the Jerusalem and the East Mission, 12, Warwick Square, London, S.W.1?

## Dislocation of Tonsil

Dr. H. J. McCarthy (Llandudno) writes: I was recently called to see a woman, aged 28, who was suffering from bronchitis. Later in the day I was sent for urgently, and was told that the patient had had a severe paroxysm of coughing, which had induced retching. At the end of this she had a lump in her throat, which made her feel as if she were choking. On examination I was astonished to find the right tonsil dislocated forwards from its bed. It was freely movable, and was attached only at its upper pole. It was swollen and oedematous when I first saw it, and twelve hours afterwards, when seen in hospital by some of my colleagues, it was plum-coloured. Under light anaesthesia it was a simple matter to remove it, and I found that the capsule had been torn, and that the major portion of enucleation had been performed by the patient's own efforts. Although I have made extensive inquiries, I have failed to find any record of a similar case, and should be interested to hear of any.

# Pregnancy with Intact Hymen

Dr. J. Sefton (Edgbaston, Birmingham) writes: The following case is of such medico-legal interest that it seems worthy of record. Mrs. X, aged 23, came to see me in April, 1930. She was married on December 26th, 1929. As far as I could ascertain the dates, there had been three attempts at coitus: (a) between January 7th and 11th; (b) between February 16th and 23rd; (c) between March 16th and 23rd. The process was very painful to the patient, but at each attempt the husband emitted semen. On examination the hymen was found to be intact, having a small central perforation, which would barely admit the tip of the little finger. The membrane was thick and tough, and tender on pressure. The first day of the last period was March 8th, 1930, and as time went by, the diagnosis of pregnancy became certain. Save for proteinuria,

between September 14th and November 1st, the pregnancy was uneventful. On January 19th, 1931, the patient was delivered of a normal male infant, weighing 6 lb. The hymen and perineum were torn (second degree tear). The puerperium was normal. The child was jaundiced for three days, but has since got on quite well. Since the sperm is said to die within a few hours of deposition in the vagina (unless it enters the cervix), this case illustrates the powerful forces which tend to direct the sperm on its path. Further, the child was scarcely up to the average size and weight, yet the minimum period from coitus to delivery was 302 days. I take it that either the size and weight of a child are no index to the length of its sojourn in utero, or else that the sperm existed in the genital tract for some weeks before fertilizing the ovum. The former seems unlikely, and the latter is the usually accepted view.

# Puerperal Inversion of the Uterus

Dr. H. G. Sworn (Thorpe Bay, Essex) writes: Some years ago, when practising in Highbury, Islington, I was attending a patient in a private nursing home at Finsbury Park. The matron (a certified midwife) asked me to have a look at a lady in the home. She informed me that she had been confined about fourteen days previously; she was troubled because she could not feel the uterus, and the patient had a lot of haemorrhage. She had spoken to the doctor about it, and he did not think that there was anything to trouble about. I informed her that I could not see a patient of another doctor. The lady left the home at the end of the third week. The matron told her to call to see me, if the loss did not stop in a week. The patient came to my house after the week expired. On examination I found the inverted uterus in the vagina, so I sent her to the Soho Hospital. They were able to replace the uterus under chloroform. The interesting point about this case is that the patient was able to get about, and, apart from weakness from the haemorrhage, was in a fair condition.

### Memorial to Joan of Arc

Miss Barbara Barclay Carter writes: May I beg the favour of your columns for an appeal to your readers to contribute to the English national memorial to St. Joan of Arc? Five hundred years ago this May she was burned alive in Rouen market-place, and now a small church is to be built to mark the spot, to which church it is hoped that England may provide the main doors, as amende honorable for her share in the death of the Maid. This memorial should have special interest for the medical profession. Two doctors were among the judges who condemned her, and it is to one of these, Master Tiphaine, who, when the case was reopened twenty years after, bore witness in her favour, that we owe precious details as to the conditions of her imprisonment. It is he who tells how, when she lay sick (yet still in chains) and he would have bled her, the Earl of Warwick intervened, crying that she might thus escape by death, which must not happen, "for she was a great prize for the King of England, who had paid dearly for her, and she must die by justice in the flames." Contributions should be sent to the honorary treasurer, Miss Sheila Kaye-Smith, c.o. St. Joan's Social and Political Alliance, 55, Berners Street, W.1. The names of all who contribute 5s. and upwards will be inscribed in a Golden Book, to be kept in perpetuity in St. Joan's Church.

## **Routes for Motorists**

The information previously given by the Automobile Association in its itineraries is now augmented by the addition of detailed sketch maps, indicating not only the road to be followed, but also the adjacent country. These maps read in the direction of travel—from the bottom to the top of each page—and the itineraries are based upon a practical survey of the roads. The new map routes will be issued to members from all A.A. offices.

A blue-tinted petrol, containing a compound of lead and known as "B.P. Plus," is being put on the market by the British Petroleum Co., Ltd., at the ordinary price of petrol, and will shortly be obtainable from all "B.P." pumps.

## Vacancies

Notifications of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 48, 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 187.