

Letters, Notes, and Answers

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QUERIES AND ANSWERS

Income Tax

Purchase of Professional Equipment

"J. F." has recently taken over an ophthalmic practice and purchased £100 worth of instruments to bring the equipment up to date. Of this expenditure about half was to replace apparatus which had become unsuitable, and the remainder for essential but entirely new apparatus. What deduction can he claim?

** In our opinion the amount represents capital outlay so far as "J. F." is concerned, the amount of capital invested by him in the equipment being the cost to him of the apparatus as it stood when he took over the practice, plus the £100 he expended to bring it up to the required standard.

Car Replacement

"X Y Z" bought a car for £700 in 1920, and has now sold it for £30, buying a new car for £350. What deduction can he claim?

** Only the actual out-of-pocket expense—namely, £350 - £30 = £320. Our correspondent would have received a greater total allowance if he had claimed annual depreciation.

LETTERS, NOTES, ETC.

The Begging-letter Writer

The Bishop of Salisbury, speaking at the Church Assembly last week, declared that begging letters were the bane of the clergyman's existence. Perhaps the medical profession is even more often the prey of the professional beggar than the clergy, because there exists a popular idea that, while the clergy are usually poor, medical practitioners are usually well-to-do, and that their generosity corresponds with their resources. It is easy to throw begging letters into the waste-paper basket, but not so easy to dispel the thought that for nine undeserving appeals consigned to oblivion, one really genuine appeal has gone unregarded. It is satisfactory, however, to notice that one person whom bodies like the Charity Organization Society and the Royal Medical Benevolent Fund describe as the most persistent begging-letter writer in the country, and whose special field was the medical profession, will be unable to exercise her art again until the close of next year. At the London Sessions, on June 8th, Jean Atherton, aged 26, pleaded guilty to obtaining sums of £3 from two medical men by false pretences, and was sentenced to eighteen months' imprisonment. Her methods had an ingenuity worthy of a better cause. From the large number of medical names and addresses in her possession she would select one practitioner abroad and one in this country, and would write to the latter pretending to be the stepdaughter of the former, and pitching a plaintive tale of her stepfather's illness and his poverty-stricken circumstances. The lady was well on the way to planting stepfathers in all the Dominions of the British Empire, and in each case he was a brother in distress to the practitioner at home. Her

record, divulged in court, was a much more commonplace affair. It showed that she had been convicted on various occasions, and at different places, especially seaports, since 1923, on charges of false pretences, and, on one occasion, of larceny. Her father, who, it appeared, had once been a medical student but failed to qualify, was, in one case, charged with her, and got six weeks' imprisonment for false pretences. She wrote her appeals also under the aliases of Mary Beale and Millicent E. Aldridge. For the present there will be no more of these pathetic appeals "for old times' sake," unless, of course, the publication of her method leads to imitation. The medical profession is fortunate in one respect—namely, in the organization of its charities—which give help to the deserving and have a sharp eye for the impostor.

Adequacy of Contraceptive Methods

Dr. T. VIBERT PEARCE (Harrogate) writes: In your issue of June 4th (p. 1047) there is a short report of the interesting speech made by Dr. Enid Charles at the conference on medical problems of contraception, organized by the National Birth Control Association. I have not had the advantage of reading her contribution in full, but I should like to suggest that, although the period "at least a year" seems adequate on first thoughts, the time during which observation of the adequacy of contraceptive methods should be observed ought to be much longer. Some figures have been published with reference to the spacing of pregnancies in the *Journal of Obstetrics and Gynaecology of the British Empire* (xxxvii, No. 4), which seems to show that 75 per cent. of women aborted within 4.97 years following a previous termination of pregnancy. There was no evidence that these women had used contraceptive methods, and hence it appears to me that observation for a considerably longer time would be desirable if the natural space between pregnancies is to be taken into account.

Amidopyrin in Measles

Dr. MAURICE O'REGAN (London, N.W.1) writes: There were many letters published last year relating to the treatment of measles by amidopyrin. This spring there was a severe epidemic in this district, and I had an excellent opportunity of observing the results obtained with this line of treatment. I found that when amidopyrin was administered the temperature fell to normal within one or two days, and that cases seen late, when the measles was well developed, and even with signs of bronchopneumonia, cleared up under the influence of this drug. The dosage I used was: Children, 2 years and over, 5 grains four-hourly; under 2 years, 2½ grains four-hourly, until the temperature fell to normal. The results of this treatment are excellent, and I hope it will come to the notice of my fellow practitioners, as it may help to mitigate much of the suffering and anxiety in this disease.

The Sacrum

Dr. WILLIAM CLOW writes: Absence on holiday is the excuse for a belated reference to the explanation of the word "sacrum" as discussed in the review of *Cunningham's Anatomy* (April 30th), and the letter on the same subject (May 14th). The writer of the letter carries the matter back to the time of the Emperor Hadrian, but Hippocrates called the bone "the sacred bone"—*το ιερον οστεον* (On joints, Ch. 45 and 47, Withington's Loeb edition)—at least 400 years before Christ. Will someone therefore still try to tell us the meaning of its sacredness?

Dysidrosis in Western Australia

Lieut.-Colonel F. W. COTTON, R.A.M.C. (ret.) (Western Australia) describes dysidrosis as quite a common disease in that country, especially in the tropical coast belt. It occurs mainly at times of high temperature accompanied by a high wet bulb reading, and is rarely seen in children, who commonly go about barefooted. He writes: For those who wear boots only for decency's sake the treatment is a white canvas boot and no socks. Those who wear boots for protection's sake are constantly reinfecting themselves, but the disease can be kept in check by painting with iodine and the use of frequent baths. Dysidrosis is rapidly cured by the administration of calcium, and is presumably due to a diet deficient in calcium.

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, 46, 47, 50, and 51 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 48 and 49.

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 347.