

Letters, Notes, and Answers

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QUERIES AND ANSWERS

Bacte-rhino-phage in Asthma

"M.D." (Devon) would be glad to hear from anyone who has had experience of bacte-rhino-phage in the treatment of asthma. He also asks for references to English literature thereon.

Use of Quinine in Normal Labour

Dr. W. J. BURNS SELKIRK (Birmingham) writes: May there not have been an old fallacy in Dr. Sheinkin's (March 17th, p. 516) argument—namely, that the tablets passed through undissolved? It has seemed to me that the preliminary quinine (given in solution) helps one to choose a suitable day of confinement about full term, the hot bath and castor oil being more successful following the period of medication by quinine.

"G. B." writes: If Dr. Sheinkin had given doses of 1/2 to 1 grain three times a day, and limited his time to the last six or eight weeks, his results might have been better.

The Pox Doctor's Clerk

Dr. GEORGE JONES (London, S.E.) writes with reference to Dr. Philip Gosse's inquiry about "the pox doctor's clerk": Forty years ago the late Dr. Jukes de Styrap was a frequent contributor to your columns, chiefly on medical ethics. He published in 1890 a small book called *The Young Practitioner: His Code and Tariff*. At page 85 he wrote: "Be careful that your repute for special interest in venereal diseases does not obscure and surpass that for other maladies, otherwise you may get the unenviable title of 'P-x Doctor,' and entail social ostracism and the loss of family practice . . . or . . . by perpetually inquiring about the urine, and having it kept and bottled for you, earn the easily acquired title of 'P-s Doctor.'" That our forefathers were in the habit of using plain words is known to every reader of Shakespeare: 2 *Henry IV*, Act I, Sc. ii, line 258 and below. "The gout galls the one, and the pox pinches the other. . . . A pox of this gout! or, a gout of this pox! for the one, or the other, plays the rogue with my great toe."

LETTERS, NOTES, ETC.

History of Nitrous Oxide Anaesthesia

Dr. F. WILLIAM COCK, F.S.A. (Appledore, Kent), writes: In 1887 my old fellow-student, Dr. Dudley Buxton the anaesthetist, introduced me to J. F. Blennerhassett, who fitted me out with anaesthetic apparatus for a good many years. The N₂O bottles were of steel, with the flat bottoms welded in. "J. F. B." was a quaint bird, clever, ingenious, and perfervid, even to making interruptions at the local vestry or similar meetings: long-haired, with much-tangled beard, and withal a very likeable chap. After he died, or gave up, I was supplied by Barth and Co. for many years. Somewhere in the early 'nineties I attended an old gentleman named Orchard, who claimed to be the first to

condense oxygen in a cylinder. A man was killed at Fenchurch Street Station by the explosion of a gas-filled cylinder. The old gentleman, contrary to my orders, would attend the inquest to find out where the fault in the metal was. It was winter, he increased his bronchitis, took to his bed, and though I believe I kept him alive for at least a week by the use of his own oxygen (warmed by passing through a coil of gas-metal tubing placed in a pail of hot water), he ultimately died "drowned in his own secretions." The early cylinders were a great nuisance by reason of the freezing of the water vapour in the neck. I believe I shared the idea of putting a turned-up tube inside the delivery tube of the bottle, thus preventing the liquid gas escaping into the neck, freezing itself and the water vapour. But that is a long time ago.

Chilblains

"A. S." writes: Dr. Gillison's letter on chilblains recalls my meeting a patient in a tram last autumn. Besides the weather, she complained of chilblains. As I have great faith in this, I said, "It is four years since I wore gloves, and since then I have never had a chilblain." She smiled and said, "But mine are on the toes." I jokingly said, "In that case you will have to wear nothing but sandals." Her reply, "I know what you mean, but it might have been better expressed," made the next car-stop a convenient alighting place. I suppose Dr. Gillison would advise the elastic bands round the ankles whilst dressing, and then to lie on the bed with the legs as high as possible—an exercise that would at least tend to improve one's appetite for breakfast.

Adjustable Thermostat for a Car

Dr. MAXWELL K. BARNETT (Southampton) writes: I should like to call the attention of other general practitioners to the great benefits of an adjustable thermostat on a car. After running seven cars (two of which had radiator shutters) I have come to the conclusion that this is the ideal control for any machine which is left out for long periods in the cold and seldom properly "warmed up." On my "A.C." the temperature of the water in the cylinder block rises to 70° in two or three hundred yards' running, and I never have difficulty in starting from cold. The thermostat can be adjusted (if necessary) in a few seconds, and without soiling one's hands. I need hardly mention that I have no financial interest in this fitment.

CO₂ Therapy in Lobar Pneumonia

Surgeon Lieutenant A. F. DAVY, R.N., writes: I read with interest Dr. Hilton's article on the above subject in the *Journal* of March 10th (p. 418), and in particular the conclusions he had drawn. Surely, if pneumonia is an acute general infection with a local manifestation in one or both lungs, one's aim should be to rest the lungs as much as possible to avoid any further spread of infection. In these circumstances would not CO₂ be definitely contraindicated, except in very special circumstances?

Professor Adolphe Pinard

The death of Professor Pinard (writes our Paris correspondent) has been the signal for a remarkable demonstration of affection and regret, not only in the medical, but also in the lay Press. In the French Academy of Medicine also he was the subject of a glowing tribute by its president. No epoch-making discoveries are associated with his name, and for this reason history will perhaps forget him. But he did very useful work by applying the discoveries of others, from Pasteur's onwards, to the problems of daily life as they affect mother and child. With his aptitude for thoroughness he spent the first half of his life drilling into all with whom he came in contact—medical students, nurses, midwives, and others—the essentials of clinical obstetrics. At the Baudelocque he was the centre of the younger generation of medical men, foreigners as well as Frenchmen. At the Academy of Medicine, to which he was elected in 1892, at the Conseil Supérieur de la Natalité, in the Chamber of Deputies, and wherever else he could make himself heard, he was the untiring advocate of reforms. The latter part of his life was spent in infant welfare work, and he took a leading part in the education of nurses. When his health began to fail, about a year ago, he retired to the country in the neighbourhood of his birthplace, and he passed away about four weeks after celebrating his ninetieth birthday.

Vacancies

Notifications of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 32, 34, 35, 36, and 37 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 38 and 39.

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 132.