British

Medical



FEBRUARY 22, 1936

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QUERIES AND ANSWERS

? Idiosyncrasy to Nitrous Oxide

Dr. Myles Mitchell (Yeovil) writes: I administered N2O and O₂ to a boy aged 6 years for a dental extraction. He took the gas under protest, but there was nothing noteworthy about the induction. Immediately after the extraction, however, he became pale, pulseless, and flaccid, and his respiration ceased. After a few seconds he gave and his respiration ceased. After a few seconds he gave a sudden deep inspiration, followed by another about thirty seconds later, when his colour and pulse returned. The respiration remained slow and irregular for possibly fifteen minutes, when he passed into a state resembling recovery from a general anaesthetic. He continued thus for an hour with his eyes closed. He then opened his for an hour with his eyes closed. He then opened his eyes, and the pupils were found to be widely dilated, and there was no reaction to light. He continued thus for a further forty minutes, waving both arms as though actively resisting something. He then passed into a sound natural sleep, out of which he wakened about an hour later. Once awake he seemed very frightened, but was otherwise normal. I should be interested to hear if anyone has had a similar experience, and, if so, whether any explanation could be provided for it. I might add that several other patients were given gas from the same cylinder before this case, and without any untoward results.

General Pruritus

Dr. A. HAWKYARD (Leeds) writes: I have a woman patient, aged 50, a sufferer from an intolerable itching of the skin all over the body. I have tried everything in the shape of internal and external remedies with no benefit. There is no skin eruption, but the patient has suffered from poliomyelitis since infancy. Can any member give a helpful

Parenteral Bismuth

"M.D." asks for information as to the efficacy of parenteral bismuth therapy for multiple cutaneous warts, and of the most suitable bismuth preparation and dosage, etc., for such cases.

Income Tax

Purchase of Practice with Book Debts

A. purchases a practice from B. and C., taking over book debts to the nominal amount of £1,171 at £800 cash. At the end of his first year the gross income of the practice is calculated as follows:

Cash collected		486
Add Debts due at end of year	•••	1,741
22000 2 02 07 020 000 000 02 9 002 00	•••	
		£2,227
Less Debts due at beginning of year	•••	1,171
Gross income	2	£1.056

The income tax inspector contends that the amount of £800 should be substituted for £1,171, which increases the gross income to £1,427. We understand that this is the considered official view, and that if A. appeals successfully to the Commissioners he might be faced with an appeal to the High Court.

** The £1,427 seems clearly excessive, because it results from comparing two unlike factors—the value of the debts at the beginning with the nominal amount at the end of the year. A reasonable basis of settlement would seem to be for the debts, totalling £1,741, to be carefully examined, and a statement made of their value as at the end of the year. The result of a calculation based on that figure would at any rate be equitable, and probably would not differ very much from that shown above. An alternative line of approach would be to contend that the debts taken over are irrelevant—that is, that A.'s legal basis of assessment is the value of the bookings of A.'s work only, seeing that he is assessable as a medical practitioner only; but that might involve a prohibitive amount of work in excluding cash receipts and debts arising out of the old practice from the accounts. The difficulty A. is under in putting his computation forward is that so far as he is concerned the amount of £1,171 did not arise from his services, and the £800 is in fact the amount that those debts cost him. On the whole, we advise a settlement on the basis of bringing down the £1,741 amount to the sum it was really worth at the end of the year.

LETTERS, NOTES, ETC.

Newcastle Hospitals

The Secretary-Superintendent of the Middlesex Hospital writes: My attention has been drawn to a serious inaccuracy in a statement on the rating of hospitals made to our last Court of Governors. In a comment upon the wide variation in assessments throughout the country the Newcastle hospitals were cited as among those which were either not rated or were subsidized by municipal authorities. This is not the My board regret that this unfortunate slip has caused trouble to the management of the Royal Victoria Infirmary, and would be grateful if you would publish this correction.

The Car In Winter: Precaution Against Frost

During the recent spell of cold weather many instances of damage to cars as a result of frozen water in the cooling system have been brought to the notice of the Automobile Association. It is not generally known by motorists that the installation of a thermostatic control—which is a the installation of a thermostatic control—which is a feature becoming popular on the modern car—increases the risk of freezing and actually makes it possible for ice to form in the radiator during the early stages of a journey. A thermostat delays the circulation of water between the radiator and the engine and thus allows the cold air a longer period in which to take effect; this makes it almost imperative to add a suitable anti-freezing mixture to the water to reduce the freezing point during cold weather. The engineering department of the A.A. will gladly advise members of the preparations most suitable for their particular cars.

Disclaimer

Dr. LESLIE HOYLE writes from the Department of Bacteriology and Preventive Medicine, University of Manchester: I beg to disclaim responsibility for certain articles about myself and my work on influenza which have appeared in the lay press. Since my appointment as Royce Research Fellow I have been subjected to almost continuous persecution by the Press. On several occasions, when interviews have been refused them, representatives of the Press have attempted to obtain information from my wife parents and other to obtain information from my wife, parents, and other relatives. In self-defence I recently consented to give an interview to a certain newspaper on the understanding that I should be informed of the nature of the resulting article. I was subsequently shown a proof, which I edited, but 90 per cent. of the matter which subsequently appeared was not contained in the proof. The name of Dr. C. H. S. Harris has also appeared in connexion with these articles entirely without his consent.

Vacancies

Notifications of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 45, 46, 48, 49, 50, 51, 54, and 55 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 52 and 53.

A short summary of vacant posts notified in the advertisement columns appears in the Supplement at page 88.