WATER SOFTENING

"S. S. S." would be glad to know of a simple and economical method of softening water, or preventing the formation of "fur" in a domestic hot water supply.

ELECTRIC STERILIZERS.

"J. H. D." writes: I should be glad to know if anyone with experience can tell me of electrically worked sterilizers, suitable for a small hospital, that can be depended upon and are fool-

TREATMENT OF CHRONIC URTICARIA.

TREATMENT OF CHRONIC URTICARIA.

DR. E. C. MUDIE (Glasgow), referring to the request of "Inquirer" on October 20th (p. 732), writes: A child, aged 23, was brought to me with a history of "spots" covering his body completely (except the cheeks); they came out in crops at frequent intervals. The condition had lasted for two and a quarter years, and was tending to become worse. After searching among the various articles of diet for a sensitizing agent and applying different external and internal remedies without success; I put the child on thyroid extract, which was gradually pushed to his fullest tolerance, 5 grains daily. An improvement set in almost immediately the full dose was given; the crops gradually lessened in acuteness and frequency, and finally stopped. It is now more than eighteen months since the last dose of thyroid extract was given, but the condition has never returned, and the boy is perfectly healthy, mentally and physically. I have since tried thyroid extract on milder cases of urticaria with excellent results, so that my conclusions are that this painful condition must have some connexion with endocrine deficiency.

ADOPTION.

DR. G. C. HARTLEY (I, Hunton Hill, Gravelly Hill, Birmingham) writes: A childless relative of mine is very desirous of permanently adopting a healthy girl aged about 2 to 4 years. I should be greatly obliged if anyone knowing of such a child in need of a good home would communicate with me.

WANTED-A HOME.

In response to the request published under this heading in last week's Journal (p. 732), replies have been received from seventeen medical men, and these have been forwarded to "F.R.C.S."

INCOME TAX.

Commencement of Partnership.

- Commencement of Partnership.

 "G. W. M." writes to say that prior to April, 1927, he was an assistant to his father in private practice, and carried on a panel practice of his own, and then became a partner in his father's practice "by a verbal agreement," but still carried on his own panel practice. Income tax returns were made on that basis, and subsequently the terms of the partnership were set out in a deed executed on July 4th, 1928, which recited that the partnership shall be held to have commenced as from April 5th, 1927. The inspector of taxes declines to recognize the existence of the partnership prior to July 4th, 1928.
- * Two points need emphasis. The first is that the statement in the deed as to the date from which the partnership is to be regarded as having commenced is binding on the parties to the deed, but not on third parties-for example, the Revenue Department. The second is that, though it is usual for partners to enter into a deed, that relationship can be legally established by other means-for example, by the intentions of the parties stated and accepted, by holding out to the public (for example, by notepaper headings, accounts, public announcement, etc., that a partnership does exist, etc.). We advise "G. W. M." to remind the inspector that the deed was not essential to the creation of the partnership, and to point out to him such circumstances as will serve to show that that relationship existed from April 5th, 1927, onwards, and that the deed merely corroborated its terms.

Replacement of Car; Obsolescence Allowance. "R. G. L." bought an A car in 1926 for £340 and was allowed £68 for depreciation for the year 1927-28. In 1927 he sold that car for £141, buying an E car, price £295. He has claimed as an expense of the year 1927 £340-(£68+£141=) £209 (that is, £131), but the inspector declines to make this allowance, treating the matter as one of a further capital onlay of £295-£141=£154, and as increasing future depreciation allowances only.

* In effect "R. G. L." takes the view that the A car became obsolete in 1927 and claims the obsolescence allowance; the inspector apparently holds that "obsolescence" is not involved and that "R. G. L." will have to look to the increased depreciation allowances for future years to put him right in the long run. The only legal decision in point is that given nearly twelve months ago in the case of the South Metropolitan Gas Company v. Dadd-"R. G. L." might refer to a reply to "C. A. R. M." in our issue of March 10th last. The matter is not beyond doubt, but there is some tactical disadvantage in a contention that a twelve months old car is "obsolete," and if our correspondent is likely to remain in practice for some years he may prefer to look to the "long run" rather than contest the matter further.

LETTERS, NOTES, ETC.

WORKS ON HAEMATOLOGY.

Dr. A. PINEY (Cancer Hospital, Fulham Road, S.W.3) writes: I have been asked to undertake the preparation of abstracts of British works on haematology for the new French periodical Le Sang. The work would be much facilitated if authors would be so kind as to send me reprints of their papers. Articles dealing with diseases of the blood, symptomatic blood changes, blood cells, leucocytic enzymes, and blood chemistry are included.

INTRAVENOUS INJECTION OF INDIGO-CARMINE.

MR. A. E. ROCHE (London, W.1) recalls that in a letter printed in the British Medical Journal of May 26th (p. 921), he maintained that the dilution of indigo-carmine for intravenous injections should be 0.4 per cent. and not 4 per cent. He finds now that in the chapter on diseases of the kidney in Walton's new Text-Book of Surgical Diagnosis (1928) the figure is given as 4 per cent., in spite of the fact that indigo-carmine is soluble only up to 0.8 per cent. 0.8 per cent.

A SIMPLE ASPIRATION APPARATUS.

Mr. D. G. Duff, F.K.C.S.Ed. (Denbigh), writes: An aspiration apparatus is notoriously liable to be found wanting when most needed. The resort to laboriously emptying a thoracic effusion needed. The resort to laboriously emptying a thoracic effusion with a 20 c.cm. syringe proved too tedious an affair to-day, so the hospital vacuum cleaner was pressed into service, an improvised connexion being made with the barrel of a 9 in. ward dressing syringe and the bottle from the theatre oxygen apparatus; this then enabled the aspiration to be conducted in comfort to the patient, the small bore of the aspirating needle preventing too rapid an exhaustion. The rubber connecting-piece is not present in all vacuum cleaners, but it was found that the metal tube connecting-piece of the vacuum apparatus fitted closely inside the wide end of the glass syringe barrel and gave equally good suction. equally good suction.

SEA-SICKNESS.

"J. C. M." writes: As an acute sufferer from motion sickness of the mark. My own disability in that direction was first discovered by my nurse when I was some 16 months old. When discovered by my nurse when I was some is months out. When sitting on a swing with me on her lap, and swaying gently to and fro, she found that I was caused to vomit. Since those far-off days I have done much travelling by most kinds of transport, except aviation, and I have been three times round the world. Naturally I have tried most remedies and have acquired a nice Naturally I have tried most remedies and have acquired a nice discrimination in the amounts of nausea produced by the various kinds of jogging, swaying, and other motions to which one is subjected. For a short sea trip there is nothing to beat going on board with an empty stomach, choosing the cabin immediately behind the one exactly amidships, and lying prone on one's bunk in the position advocated by Burney Yeo. Neither heat nor cold, nor emotions, smells, stuffness, nor anything else matters a straw in my long experience of motion sickness. In my youthful days, however, I found chocolates particularly baneful. One patient of my own, a boy 12 months old, puzzled me much by sudden attacks of vomiting, until I discovered that they were caused by an energetic sister racing him in his perambulator caused by an energetic sister racing him in his perambulator up and down a pathway. I am unacquainted with the scientific explanation of Burney Yeo's position, but should be grateful for information.

MEDICAL TREATMENT IN CHINA.

Dr. A. H. SKINNER (Hankow) writes: In reply to Fleet Surgeon Home's query on August 4th (p. 228) as to Chinese custom in respect of contract medical practice, I have heard the same story, that a family doctor is paid a retainer which ceases during respect of contract medical practice, I have heard the same story, that a family doctor is paid a retainer which ceases during illness; I fear it is a fairy story, or at any rate it is nowhere known in the centre of China. Native physicians call when sent for, are paid, depart, and do not call again unless asked to do so. A well-to-do patient may change his doctor half a dozen times in a week; his friends give him no flowers, but express their active sense of sympathy by sending their favourite medical man to see the patient and prescribe for him. Priests of various sorts are also, in emergency, invited to attend—these are cash transactions—so that the invisible powers may not undo the effect of the visible medicines. A Chinese friend of mine attached to the local army finds that his salary is less likely to be overlooked if there has been some sickness among the higher staff officers, and he has attended with good result. Fatal illnesses would probably result in considerable delay in his monthly wage payment. Also in "quiet" times, when the general health of the force is good, his salary, like that of most officers, may fall much into arrears. Incidentally, foreign doctors in the treaty ports have most of their foreign patients on a system of contrastatendance. Chinese prefer their own system, paying for attendance as and when they need it, but we have on our books four native families on contract—one of these for over thirty years—during which time, I need hardly say, they have not enjoyed entire freedom from illness!

VACANCIES.

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

A short summary of vacant posts notified in the advertisement columns appears in the Symplement at page 183.

columns appears in the Supplement at page 183.