Tetters, Aotes, and Answers.

All communications in regard to editorial business should be addressed to The EDITOR, British Medical Journal, British Medical Association House, Tavistock Square, W.C.1.

ORIGINAL ARTICLES and LETTERS forwarded for publication are understood to be offered to the *British Medical Journal* alone unless the contrary be stated. Correspondents who wish notice to be taken of their communications should authenticate them with their names, not necessarily for publication.

Authors desiring REPRINTS of their articles published in the British Medical Journal must communicate with the Financial Secretary and Business Manager, British Medical Association House, Tavistock Square, W.C.1, on receipt of proofs.

All communications with reference to ADVERTISEMENTS, as well as orders for copies of the *Journal*, should be addressed to the Financial Secretary and Business Manager.

The TELEPHONE NUMBERS of the British Medical Association and the British Medical Journal are MUSEUM 9861, 9862, 9863, and 9864 (internal exchange, four lines).

The TELEGRAPHIC ADDRESSES are:

EDITOR of the British Medical Journal, Aitiology Westcent,

London.

FINANCIAL SECRETARY AND BUSINESS MANAGER (Advertisements, etc.), Articulate Westcent, London.

MEDICAL SECRETARY, Mediscera Westcent, London.

The address of the Irish Office of the British Medical Association is 16, South Frederick Street, Dublin (telegrams: Bacillus, Dublin; telephone: 62550 Dublin), and of the Scottish Office, 7, Drumsheugh Gardens, Edinburgh (telegrams: Associate, Edinburgh; telephone 24361 Edinburgh).

QUERIES AND ANSWERS.

DELAYED MENSTRUATION.

DR. E. BAYLIS ASH (Birmingham) writes with regard to the inquiry by "A. E." (November 3rd, p. 828): I saw a similar case successfully treated by Dr. Urbach of the Wilhelminaspital, Vienna. He used diathermy, the electrodes being placed ou either side of the head, and the skull and its contents were warmed. This girl, after a number of treatments, lost weight and began to menstruate. Before this treatment is commenced it would be advisable to have a skiagram of the skull to show any possible abnormality of the pituitary fossa.

INCOME TAX.

Married Couple Living Together.

"H. M. H." explains that the wife runs a house in which both live: the husband pays her £10 a month, and also pays two-thirds of the household expenses, the King's taxes (Income Tax Sch. A) on the house, and shares the payment of local rates with the wife. Is the wife liable to account for tax on the £10 a month?

** No; the incomes of husband and wife are aggregated for

the purpose of calculating tax so that a payment by one to the other should be ignored—unless, of course, the two are living apart. On the other hand, it follows that in calculating the amount of his professional income "H. M. H." cannot treat the rent as an actual payment, but must calculate the amount of the deduction as a proportion of the annual value of the house as assessed to income tax.

LETTERS, NOTES, ETC,

THE QUAKERS AND MEDICINE.

The Quakers and Medicine.

In a contribution to the Bulletin of the Society of Medical History of Chicago Dr. David J. Davis of the University of Illinois College of Medicine, Chicago, has given a sympathetic account of the origin of the Quakers, in which he points out that of the four chief professions in the seventeenth century—the Church, Law, the Army, and Medicine—the last was the only one which was at all consistent with their views of life. Both in England and in the United States there appeared a number of medical men who were either ardent Quakers or the descendants of such, and to whom medicine and the world at large will be eternally indebted. Dr. Davis considers them under two groups—namely, a number of great English Quaker physicians—largely of Welsh origin—who went to America early, some with Penn himself. The first great English Quaker physician was Dr. John Fothergill (1712-80), whose most important scientific contribution was his "Account of the sore throat attended by ulcers," describing the epidemic of scarlet fever which visited London in 1747. He was a close friend and admirer of Benjamin Franklin, and became interested in the American Quaker colonies in their early days. The first of the native Welsh physicians who accompanied Penn was Thomas Wynne (1631-92), who was afterwards not only the chief physician in the young colony of Philadelphia, but also a

prominent person in public affairs. His daughter married Dr. Edward Jones, another notable Welsh physician, and from them were descended two men whose names are of importance in American medicine—Thomas Cadwalader, the first teacher in American melicine—Thomas Cadwalader, the first teacher of medical anatomy in America and author of an essay on "West Indian dry gripes" (lead colic), and John Jones, whose Plain Remarks upon Woun's and Fractures, which appeared in 1775, was the first book on surgery published in the United States, and probably the first medical book of any kind written by an American. John Jones was also an intimate friend and physician of both Benjamin Frankliu and George Washington. The last of the prominent medical men of Quaker birth in America was Dr. John Evans, commonly known as Governor Evans (1814-97), who was editor of the North-Western Medical and Surgical Journal (the first medical journal in Chicago), co-founder of the American Aged Association and professor of obstetrics in Rush Medical College. In conclusion, Dr. Davis summarizes the influence of Quakers in medicine under two heads. In the first place they furnished great practitioners of medicine in such men as Fothergill, Lettsom, Wynne, Jones, and Lister, and secondly, they showed a genius for organization, which was exemplified by John Morgan (the founder of the medical school in connexion with the College of Philadelphia), Evans, and Johns Hopkins. Evans, and Johns Hopkins.

. IMPONDERABLE PHOSPHORUS THERAPY.

DR. M. J. T. WALLIS (Maldon, Essex) writes: All scientific persons, whether medical men or otherwise, will be astonished, persons, whether medical men or otherwise, will be associated, and incidentally vastly amused, at the coroner's summing up at a recent inquest. It was the case of a man, aged 75, who died of cancer of the stomach shortly after taking some powders which had been given him by an unqualified practitioner. This gentleman had seen him once and charged him fifteen guineas. The man had seen him once and charged him fifteen guineas. The powders on analysis were found to be quite harmless, only cane sugar being detected. The unqualified practitioner stated that they contained "phosphorus in non-taugible doses." This towering genius, expert analytical chemists will be pleased to hear, has made over a thousand drugs of which no trace can be detected by either chemical or spectroscopic means.

Now this I submit is a very next space for the chamists

Now this, I submit, is a very nasty smack for the chemists. We wretched mediocrities of doctors, with our admittedly inexact science, who have been foolish enough to spend from five exact science, who have been foolish enough to spend from five to seven years studying the elements of our subject; who on making any advance in medicine or surgery are foolish enough to disseminate that knowledge among our colleagues, and who generally charge the patient about half the number of shillings that the saccharine and non-tangible phosphoric gentleman charged guineas; and who quite humbly realize that we are only on the very fringe of knowledge on these matters—we realize here. Term are cotting onto the partial points in the latest and the second of the seco medical men, I say, are getting quite inured to having pointed out to us in the press how very narrow, bigoted, and stereotyped we are, how saturated with professional jealousies, and how unwilling we are to admit that wisdom will not die with us. But what have our chemists been doing all these years not to have made any of these elusive, non-tangible, and apparently very spensive substances that cannot be detected by any of their childish tests? Surely they must share in our ignominy on this occasion.

occasion.

The effects of the coroner's summing up on the public mind (I am not for a moment criticizing the verdict, which was the obvious one) were these: to give a colossal advertisement for all forms of unqualified medical practice; to stimulate Mr. Bernard Shaw to a further outbreak of juvenescence; but, unfortunately, to have a very harmful effect on the minds of sufferers from this terrible disease. In legislation regarding matters of this kind we are, of course, fifty years behind America and all civilized European countries. Should not a technical expert sit by the coroner or judicial authority in an advisory capacity in succases to save him from emitting egregious folly on a subject of which he is profoundly ignorant? To my mind the long-continued reticence of the medical profession on these and similar matters is most emphatically not in the public interest. matters is most emphatically not in the public interest.

TUBERCULOSIS SERVICE.

DR. F. J. ALLAN (Chairman of the Medical Sickness Annuity and Life Assurance Society, Ltd.) writes: Dt. A. J. McMillan suggests in his letter in your issue of October 20th (p. 727) on the subject of the tuberculosis service, that the county or other administrative body should take out a sickness insurance policy on the life of each person appointed to such service. It may be of interest to your readers to know that this society has worked or interest to your readers to know that this society has worked out a scheme, which has been adopted by a tuberculosis hospital to meet the point raised. Under this it is compulsory for each resident medical officer on taking up his appointment to effect the policy with this society, the premium for which is paid by the administrative body. Special rates are charged, and various options provided, so that the policy may be retained by each individual on leaving the service.

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, 47, 50, 51, and 52 of our advertisements 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 235.