

Letters, Notes, 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*, *Aetiology Westcent, London.*

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

MEDICAL SECRETARY, *Medisecra 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.

DRY SKIN.

"H. M. C." desires suggestions for the treatment of a woman, aged 40, who has had a very dry skin for a considerable time. She suffers each winter from deep cracks on the tops of the fingers and in the creases of the joints. Creams and ointments of various kinds, and a course of thyroid gland, have been tried without much improvement.

A PAGE-TURNING DEVICE FOR ARMLESS PATIENTS.

WITH reference to "W. N.'s" inquiry about a mechanical device for turning the leaves of a book, Dr. W. JOHNSON SMYTH (Bournemouth) and Dr. F. W. BURTON-FANNING (Norwich) remind us that among the many little inventions for the help of wounded officers who during the war were his guests, the late Sir Arthur Shipley (Master of Christ's College, Cambridge) made an appliance of this kind suitable for a man without arms. It was held between the teeth, and worked well. A description, with figure, appeared in the *British Medical Journal* of June 9th, 1917 (p. 769).

MRS. HUTCHINSON (The Lodge, Pembroke College, Cambridge) tells us that this contrivance was made by the Cambridge Instrument Company, Ltd., Carlyle Road, Cambridge, during the war, and it is possible they may still have the design and be able to repeat it. If not, Mrs. Hutchinson will endeavour to find a specimen contrivance or the design, which she believes to exist among Sir Arthur Shipley's papers.

INCOME TAX.

Expenses of Caretaker: Additional Practice.

"J. F. M." is a bachelor, and as from October 24th purchased an additional practice. He continues to reside at his former practice, where he employs a man and his wife as caretakers, etc., and employs a widow at the additional surgery, where she resides with her two children. What allowances is he entitled to?

*** On the facts stated "J. F. M." can claim the whole cost of the employment of the widow in respect of the additional premises—including, of course, any remuneration given in kind, such as coal, gas, etc.—and the whole of the rent and rates. In the case of the premises where he resides, such expenses will have to be divided in a reasonable proportion, according to the ratio of private and professional use. We think that the income tax authorities will require the practice to be treated as a new one as from October 24th last, unless the additional net earnings from the new portion of the practice as now constituted are small.

Assistant's Motoring Expenses.

"A. C. E." held various temporary appointments after qualifying in 1925, but has been in the same assistantship since November, 1926. He has been assessed as having commenced employment as from that date. He now uses his own car, but for a considerable time a car was provided by his principal and a car which belonged to him was paraged elsewhere. He also desires to know whether a man who backs horses regularly through a commission agent can declare gains or losses in his income tax return.

*** We are of opinion that in strictness the gains of employment in such circumstances are separately computable for each employment, and that expenses incurred in connexion with

cars—either by way of renewal or through depreciation—are not deductible in respect of periods when it was not a condition of the employment that the car expenses should be borne by the employee. With regard to backing horses, the results, whether favourable or unfavourable to the backer, do not come within the scope of his income tax declaration.

LETTERS, NOTES, ETC.

THE MEDICAL AND DENTAL REGISTERS. OFFICE EDITIONS.

THE REGISTRAR of the General Medical Council (44, Hallam Street, Portland Place, W.1) writes: In order to facilitate the work of those who find it essential to know whether a medical practitioner is legally qualified or not—such, for instance, as officials of insurance committees, chemists and druggists, etc.—the Council publishes an office edition of the lists contained in the *Medical Register*, giving the names and addresses of all registered practitioners. This office edition is bound in paper boards, and issued from this office at the special rate of 7s. 6d., post free; but no copies can be issued at this price unless they are ordered and paid for prior to December 31st of the year preceding that of publication. Similarly the Dental Board publishes an office edition of the *Dentists Register*, containing the names and addresses of all registered practitioners and the local list at the price of 4s. net, post free, but no copies can be issued at this price unless they are ordered and paid for prior to December 31st of the year preceding that of publication. This information may be useful to some of your readers.

THE DIAGNOSIS OF GASTRITIS.

DR. P. J. MOLLOY, in the course of a letter from Berlin, writes: Considerations of space prevent my replying fully to Dr. Hurst's criticisms of my letter of November 6th, and I can therefore only deal with one or two points shortly. In his lecture he stated definitely that gastritis can be diagnosed *only* by means of a fractional test meal, and I suggested gastroscopy as an alternative method: the matter of gastroscopy being somewhat dangerous is beside the point. It is undoubtedly not the method of choice, but it is still a possible method. The radiological method is used by many people of experience, and they are convinced it is the best, finding it quite reliable in diagnosing gastritis. Therefore one may be allowed to take it that this method, although by no means perfect, is another means of diagnosing this condition. And there are clinicians of wide experience who are convinced that gastromyorrhoea is not a myth but a definite, if not too frequent, entity. I must still maintain my point of view that the primary essential factor of gastric and duodenal ulceration is not yet definitely known; I do not say that Aschoff is right, or that Bergmann is right, or that the infection theory is wrong, but am of the opinion that, until the evidence of the guilt of any one factor is definitely proved, the matter must be left open, and there are not many who will maintain that the last word on the subject has been spoken. On the matter of milk test meals I went into the subject in detail with Kalk, and I may mention that he is not satisfied that Dr. Hurst's statements as regards his (Kalk's) work and findings are quite correct. And, finally, I hope Dr. Hurst does not think I am, in medical matters, pro-German and anti-British; nothing is further removed from the truth. Having been some time in Germany I naturally am in more intimate contact with German than with English medicine, but I do my best to keep in touch with medicine at home.

VAGINISMUS.

A TASMANIAN CORRESPONDENT writes with reference to the inquiry by "C. A." (September 8th, p. 473): Some thirty-five years ago I had under my care a very bad case of vaginismus, which had lasted five months. Under anaesthesia I inserted a fairly large boxwood egg-shaped pessary, and impressed upon the patient the absolute necessity of removing it herself the next day by means of the strong tape left attached. I did not tell her anything about the size of the object left in her vagina. The plan was completely successful, as also in two other cases later on. It is probable that the delivery *while conscious* of so large an object helps to correct the faulty psychology which is causing the trouble.

THE THERAPEUTIC VALUE OF VALERIAN.

DR. A. ROSE (Aberdeen) writes to express complete agreement with Dr. Manson's remarks about the value of valerian (*British Medical Journal*, November 10th, p. 842). I frequently use this drug in my work (he says), chiefly for patients suffering from neurosis. Unlike Dr. Manson, however, I prefer to prescribe with it ammonium bromide, occasionally sodium bromide, but never potassium bromide. A typical prescription would be: tr. valerianae ammon. drachm 1/2, bromide salt gr. x, with perhaps a few grains of phenazonium if the patient is suffering from headache that appears to be associated with the neurosis.

VACANCIES.

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

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 263.