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#### Determination of Sex.

DR. N. McConnell Boyce (Romford) writes: In the Journal of November 13th, 1926 (p. 918), I suggested that sex determination was a question of pre-menstrual or post-menstrual conceptions, the former tending to produce males and the latter females. From letters received and further notes in the Journal it appeared that observers agreed that the time of insemination with relation to the menstrual period did determine sex, but while one group believed that conceptions before menstruation produced males, the other group were of the opinion that premenstrual insemination resulted in females. I agreed with the first group, and had great success in advising how to obtain children of the desired sex, but in one case the pre-menstrual by rule did not apply. This woman was a confirmed believer in the pre-menstrual girl rule. I attended two of her three confinements. In each she had taken care that the time of insemination was in accordance with her rule, and in each she had a baby of the sex desired by her. The truth appears to be that there is a sex-determining factor in the relationship between the time of conception and the menstrual date, but for each individual that relationship has to be worked out. It may well be impossible to prearrange or predetermine the sex of the first child, but from the facts of this first birth it is a simple matter to calculate the sex-determining rule for the particular mother. For example, a woman bore a full-term male child on October 10th; counting back 281 days from that date, the probable date of conception is reached—namely, January 3rd. The mother dates the last period from December 26th, 1929, to January 1st; conception is reached—namely, January 3rd. The mother dates the last period styles and so the mother follows the post-menstrual boy rule. Giving this mother advice with regard to pre-menstrual conception in order to obtain a girl, if desired, can do no harm. This is the only means at one's disposal to probe the truth or otherwise of the theory. The calculation from the date o

#### Pond Snails in the Spread of Disease.

DR. T. G. CAWSTON (Durban) writes: Although schistosomes capable of attacking man have not been recorded in Europe north of Portugal, allied parasites which depend on the water snail for a completion of their life-cycle are common; in the summer of 1926 I found cercariae plentiful in pools at Freusham in Surrey and near Farnham and Bromley in Kent, while they have also been reported from other centres. Though serving as one of nature's scavengers, snails in a stagnant pool become a source of danger to man when they are infested with trematode parasitic worms such as Fasciola and Schistosoma. On becoming acquainted with bilharzia disease in Natala colonist immediately recalled the experience of a boy with whom he had collected the eggs of waterfowl at the village of Aveley in 1880, and who contracted haematuria, which Dr. de Breut attributed to his wading in the stagnant pools of the Mardyke tributary of the Thames, close to Purfleet in Essex. Whether Schistosoma might have accounted for this condition or not, the presence of neglected pools on private property invites a danger from snail-borne disease.

#### N.S.P.C.C.

Since the National Society for the Prevention of Cruelty to Children was founded forty-six years ago it has dealt with over a million cases, affecting the welfare of about 4 million children. In this period the society has established over two hundred branches in England, Wales, and Ireland, and has organized an extensive system of investigation and supervision. Some idea of the vigilant protection it affords to the community may be obtained from the annual report of the society for the year ended March 31st, 1930, which reveals that the number of children on whose behalf the society intervened was 351 every working day, and that the total number exceeded the figure of the previous year by 6,000—a circumstance which is attributed mainly to successful propaganda. Although the society is inclined to accept the suggestion that the standard of case reported is tending to become higher, it is disquieting to learn that cases of brutality increased by 294 during the year under review, and that the number of such cases—namely, 3,440—is as high as it was thirty years ago. More reassuring is the decrease in the number of prosecutions, which are undertaken by the society only when all other methods of correction have failed. The proportion of these cases (1.16 per cent.) is the lowest recorded. There is also evidence that an increasing number of parents are voluntarily seeking the advice of the society in matters affecting the welfare of their children. The chief causes of neglect reported during the year were ignorance, indifference, laziness, drunkenness, and gambling. Slum conditions were found to be a recurrent evil; in 5,633 cases the families concerned lived in single rooms, representing 13 per cent. of the cases investigated in the course of the year. In commenting on the amelioration of housing conditions, the society points out that while the clearing of slum buildings and the rehousing of their occupants continues without interruption in our large cities, there is also need for reconditioning property unfit for

to give children living on these boats an opportunity of elementary education. Another aspect of child welfare which has shown steady and progressive development in recent years has been the assistance the society provides in securing medical aid for sick children. During the year 946 children successfully underwent operations in various hospitals in the country through the agency of the society's staff of inspectors. These include eleven women, who are responsible for sick and ailing children in several of the large provincial towns. More than a thousand children are reported to have recovered from minor complaints. In his annual report for the year Dr. L. D. Saunders, medical officer to the society, refers to some of the difficulties in arranging for satisfactory medical treatment, owing partly to the limited accommodation of hospitals and institutions, and partly to the lack of proper care in nursing children in their own homes. He insists that it is most undesirable that children recovering from encephalitis should remain at home without supervision. The report contains a detailed statement of the London medical branch of the society.

#### "The Royal Jennerian Society."

"D. S. M." asks for information about the Royal Jennerian Society. He has acquired an honorary testimonial, dated September 29th, 1835, electing John Dove, Esq., as an honorary member.

\*\* The Royal Jennerian Society for the Extermination of the Small-Pox was started under Royal patronage at a meeting held in London on January 19th, 1803, at which it was resolved to call the society the "Royal Jennerian Institution." Dr. John Walker was appointed resident inoculator. The society's office was in Salisbury Square, Fleet Street. The committee, after a time, disapproved of Dr. Walker's proceedings, and he resigned. Dr. John Baron, in his Life of Edward Jenner, M.D. (London, 1838), says: "It lingered on for some time, but on the establishment of the London Vaccine Institution in 1808, its finances being exhausted, its operations would appear to have ceased entirely. An attempt was made in 1813 to revive this society, and the chairman of a general meeting held for that purpose, Dr. Bradley, applied to Dr. Jenner requesting his acceptance of the office of president. He, in an answer dated Cheltenham, September 3rd, 1813, declined this proposal. It is desirable that this fact should be remembered, inasmuch as it proves that Dr. Jenner's name ought to be entirely disconnected from the proceedings of what is still unaccountably termed the 'Royal Jennerian Society.'" Nevertheless, it appears that there is in the library of the United States Surgeon-General at Washington a report of the Board of Managers of the Royal Jennerian and London Vaccine Institution to the governors for the year 1851, and that that association was formed by the union of the Royal Jennerian Society for the Extermination of the Small-Pox and the London Vaccine Institution. We have found no record of the existence of the society after 1851.

#### A Home for Invalid Ladies.

DR. L. N. HESKETH BIGGS writes: I want to bring to the notice of your many readers a home for invalid ladies of limited means, who earn their own living, situated at San Remo, Italy, a spot which is considered to have the best all-round climate on the Riviera. The "Villa Emily" was built by an English artist for his own use, and is a commodious house in a large sheltered garden. All the rooms face south, and wide verandahs run almost the entire length of the two floors. The object of the institution, which was started over fifty years ago and deserves to be better known, is to provide a comfortable home for ladies in ill-health who need a winter in a warm sunny climate to fit them once again for their duties. It is under the patronage of Princess Beatrice, is run by an English committee, and is in the charge of an experienced trained matron, with trained nurses under her. Each lady has to pay £2 a week, which sum is quite inadequate to cover expenses, and the annual deficit is made up by generous friends. Medical attendance and nursing are given free. The home has central heating, and has been extensively renovated. Information and forms may be had from Miss Janet Kay Shuttleworth, care of Messrs. Coutts and Co., 440, Strand, London, W.C.2, from June 15th to October 1st, and Villa Luna, San Remo, Italy, from October 1st to June 15th.

#### The New Mercurial Diuretics.

Correction.

In our report of Dr. Warren Crowe's reference to the use of salyrgan in Ménière's disease, made at the meeting of the Section of Therapeutics of the Royal Society of Medicine (December 20th, p. 1047), the name Mygind was incorrectly given as Meakin.

#### Vacancies.

Notifications of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 38, 39, 41, and 42 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 40 and 41.

A short summary of vacant posts notified in the advertisement columns appears in the Supplement at page 272.