

Cobalt

Dr. WILLIAM C. HOFFMAN (Glasgow) writes in reply to the query by "J. A. R. T." (November 21st, p. 971): Cobalt has frequently been used internally, especially in combination with other metals, such as copper, iron, and zinc, for various forms of anaemia. Endomin, a haematopoietic, manufactured by Messrs. Reed and Carnrick, contains 0.03 mg. of cobalt per tablet. I cannot vouch for the efficacy of cobalt as a remedy in anaemia, but it is possible that it functions as a catalytic agent in the process of enriching the blood.

Naevus

Dr. H. F. PARKER (Guildford) writes: In reply to "Inquirer's" letter (November 14th, p. 927) with reference to the treatment of a V-shaped naevus on the forehead of a baby, the painless application for about twenty seconds of a moulded stick of carbon dioxide snow should cure it, leaving practically no mark. Should the naevus be of too irregular a shape for this treatment, the best alternative would be electrolysis. Naevi may enlarge rapidly, so there should be no unnecessary delay in treatment.

Income Tax**Replacement of Car**

"H. G. S." bought a car in 1927 for £850, and sold it in March, 1931, for £130, when he bought a new car for £493. At that date a car similar to the one replaced would have cost £750.

** The replacement allowance cannot exceed the actual out-of-pocket expenditure—that is, £493 - £130 = £363, and where the new car costs less than the old one this results in a loss of allowance. If the contrary is the case the increase in cost represents an addition of capital sunk in the practice, whereas in "H. G. S.'s" case a certain amount of capital has been lost; the Income Tax Acts do not allow increases in or losses of capital to be taken into account. In the case of the car which was sold without being replaced no allowance at all is due, the cost of replacement being *nil*. This case is a forcible illustration of a point we have often made in these columns—namely, that failure to claim the annual allowance for depreciation usually involves loss in the long run, especially during periods of falling prices.

Change of Employment

"A. B." was working as locumtenent or assistant from June, 1929, to April 31st, 1931, earning approximately £400 per annum. As from June 1st, 1931, he has been acting as house-physician at a hospital, his monetary remuneration being at the rate of £100 per annum. How should he be assessed for 1931-32?

** In our opinion there was such a definite change in the nature of the employment and the basis of remuneration in June, 1931, that "A. B." is entitled to regard himself as having ceased one employment and commenced another. In that case he appears to be entitled to be assessed on the basis of his earnings for that year—that is, one-twelfth of £400 + ten-twelfths of £100—and we see no reason why he should be put to the trouble of paying on £400 and claiming repayment at the end of the financial year.

LETTERS, NOTES, ETC.**The "Medical Register"**

The Registrar of the General Medical Council (44, Hallam Street, W.1) writes: I desire to remind those who find it essential to know whether a practitioner is legally qualified or not, that in order to facilitate their work the Council publishes an office edition of the *Medical Register*, printed on inexpensive paper, and bound in boards. This edition contains precisely the same names and lists as the official edition. It is issued from this office at a special charge of 10s., post free, but no copies can be issued unless they are ordered and paid for prior to December 31st. I shall be happy to send an order form upon application. The *Medical Register* is the official publication, issued under the Medical Acts, and contains the names of all legally qualified practitioners: there is no other publication which takes its place. The Council also issues each month a list of additions to, and deletions from, the *Register*. The charge for these will be furnished upon application.

Treatment of Severe Asthma

Dr. N. GABER (Schweizer Reneke, Transvaal) writes: The rarity of cases of asthma of the type mentioned below prompts me to bring it to the notice of the profession. The patient, a married woman, is 44 years of age, and has suffered from asthma for twenty years. She has had most of the known treatments: adrenaline, ephedrine, and pituitrin, tuberculin, autohaemotherapy, theocin sodium acetate, morphine, asthma powder for smoking, atropine, vaccines, etc. Following tonsillectomy (tonsils were septic) and autohaemotherapy, she improved considerably (tonsils removed at midsummer). With the advent of the cold weather she again became subject to bad attacks, lasting thirty-six to forty-eight hours. During the last twenty-four hours she has received: (1) 1 ounce of adrenaline hydrochlor. sol., 1/1,000 subcutaneously; (2) 3/4 grain morphine hydrochloride. Yet she felt no relief. To alleviate the spasm I injected 3 grains of luminal solution intramuscularly, but no relaxation occurred until ten minutes afterwards, when I chloroformed her. The luminal then commenced to take effect, and she had a fitful sleep, with slight relaxation of the bronchial spasm, for a few hours. I wonder whether this amount of treatment does not constitute a record, even if only as far as the use of the adrenaline was concerned, 1 ounce in twenty-four hours.

Age Limits

"JUVENIS" writes: Can nothing be done in the matter of age limits? Recently in a short list sent to a committee there was a medical man whom I particularly wanted—older than myself, but I consider that does not matter. His age was 51. This doctor was the very one to fill the post by his experience, manner, qualifications, and appearance. Yet the committee (whose average age was far above 51) turned him down at once as being "too old." Surely there are very good admirals, generals, judges, archbishops, prime ministers, and what-not at ages of 60, 70, or 80. In a political career a man of 45 is a baby, and yet in the medical world 45 is the usual age limit for an appointment, an age when one could still be playing Rugby football. In the Services, I believe, 90 per cent. of doctors are dispensed with at 50—the prime of life of a healthy man.

Medical Art Calendar, 1932

We have received a copy of the Medical Art Calendar for 1932 from the publishing house of J. Philip Kruseman, Nassauplein 1B, The Hague, Holland. Calendars are too often dull things, evil and necessary reminders of how quickly the days pass, witnesses of wasted time. The Medical Art Calendar, with its attractive reproductions in sepia of prints and paintings by Dutch artists, illustrate the length of the art of medicine in terms of the ancient art of painting, reducing to insignificance the shortness of life. The alchemist with his flasks, retorts, and learned books, and the physician with his bleeding-bowl and urine basket, are portrayed with the rich dignity that oils alone can give to a painting. A satirical print by C. Kramm (who shows marked affinities to Hogarth and Rowlandson), in which doctors and undertakers are seen leaving a wine shop and doffing their hats to two skeletons, suggests that for these life was indeed too short. The first use of liver in medicine would seem to be of ancient origin, for the Angel Gabriel "turned heart and liver of a haddock to beat the Devil," so that Tobit might marry his bride. This calendar is very good value for 6s.

Developmental Defects

Dr. A. M. WATT (house-physician, Peterborough and District Memorial Hospital) writes: In the *British Medical Journal* for October 3rd, under "Memoranda," you have published a case of transposition of viscera. In October we had, in this hospital, a child with partial transposition of viscera, and, in addition, two other-developmental defects. Heart, with apex to left, but a deficient interventricular septum, and patent ductus arteriosus. Right and left lungs each had three lobes. Stomach passed to the left; duodenum passed from left to right; caecum and appendix in left iliac fossa; sigmoid colon in right iliac fossa. Spleen in right hypochondrium; gall-bladder and most of liver in left hypochondrium; left kidney lower than right. "Owing to deficient interventricular septum the child was a "blue baby," and died at the age of 13 weeks.

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, 48, 49, 52, and 53 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 50 and 51.

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 298.