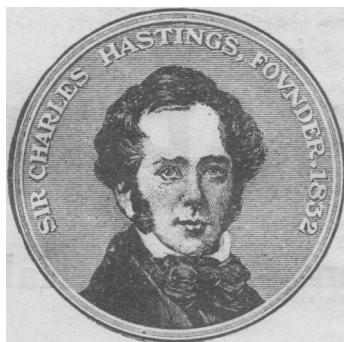


The

British Medical Journal

THE JOURNAL OF THE BRITISH MEDICAL ASSOCIATION



Including an Epitome of Current Medical Literature
WITH SUPPLEMENT

No. 3703

SATURDAY, DECEMBER 26, 1931

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Letters, Notes, and Answers

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QUERIES AND ANSWERS

Still's Disease

Dr. WILLIAM BELL (Bradford) writes: May I ask, through your correspondence columns, for information as to the measure of success which is obtained, or which fairly may be expected, in the treatment of Still's disease. One is aware of the gloomy prognosis held at the time Dr. Still published his account of the condition. Such progress may have been made since that success may be commonplace and not worth recording. Even to-day, however, the variety of treatment suggested, some of it drastic—for instance, malaria therapy—points to doubt about the issue. The doubt is perhaps justifiable, considering the nature of the condition. I have recently observed a typical case, in which there was restoration of apparently perfect health. From my very limited experience of the condition I wonder if this is usual.

Income Tax

Year Overlooked—Free Quarters

"J. S. R." received a hospital appointment in April, 1929, at £300, and later at £350, per annum. Quarters are provided, but he has to pay for meals, laundry, etc. He paid tax for 1930-31, and has since received a notice of assessment for 1929-30, and wishes to know whether it is correct that he should be assessed for the quarters which he was compelled to occupy.

** Assessments can be made within six years of the end of the year to which they relate, so the assessment for 1929-30 is well within the time limit. As regards the quarters—if the terms of appointment provide for a monetary salary, subject to deduction for quarters, food, etc., then the amount of the salary is assessable even though the whole of it is not received in cash. On the other hand, if the "quarters" represent an additional benefit (or obligation) over and above the monetary remuneration fixed by the terms of employment, he cannot be assessed on the salary plus the value of the quarters, as he has presumably no right of letting, and cannot, therefore, convert the right of occupancy into money or money's worth.

LETTERS, NOTES, ETC.

Ventilation of Cinemas

Dr. T. GRAHAM-SCOTT (London, W.) writes: May I draw the attention of the medical profession, especially medical officers of health, to the insanitary condition of some cinema theatres. On entering them from the fresh air, the atmosphere is so foul that one can hardly breathe. Managers should be compelled to have better ventilation and not crowd the people so closely as they do, and at the end of a performance all doors and windows ought to be thrown open. The hygienic conditions of the older and smaller places are dreadful. They are a hotbed for germs of every kind, a source of infection from influenza

and catarrh, and a general danger, because people are heated up for hours and then go out into the cold with nausea and headache from the unclean atmosphere. I do not say these conditions apply to the large and modern buildings, but certainly some of the others should be pulled down or modified.

Smoke Abatement and Income Tax

While no outstanding event is recorded in the second annual report of the National Smoke Abatement Society ending June 30th, it is evident that a great deal of constructive and pioneer work is being done by the society, not only in exposing the consequences of uncontrolled emission of smoke, but in directing attention to the most effective measures for its elimination. Thus, in the autumn issue of the journal of the society there are authoritative articles on smokeless fuel and on the progress of the electrical grid, in addition to notes on the public health aspects of smoke abatement as observed in various parts of the country. During the year under review several questions were asked in the House of Commons concerning legislation on the subject, and in the House of Lords a debate took place in which the suggestion was made that there might be a slight remission of rent in State-aided houses where there are no open fires, or a remission of income tax under Schedule A. The society estimates that if smoke could be abolished from this country in a single year, the benefit to the nation would be equivalent to a reduction of one-third of income tax.

Diet and Dental Caries

Dr. J. GORDON CAMERON (Kuala Lumpur) writes: The *Journal* takes three weeks to reach Malaya, and therefore, no doubt, the correspondence on diet and dental caries will have come to an end some weeks before this letter reaches you. I write with the *Journal* of October 17th, containing Mr. F. W. Broderick's letter, in front of me. I have been most interested in Mrs. Mellanby's findings on diet in relation to dental caries, and have put them into practice whole-heartedly in my maternity work. Maternity patients here consult me early in pregnancy, and I invariably explain to them the importance of ample vitamins in their diet in relation to their own well-being and the well-being of the child to be. I ask them to take daily doses of a vitamin food prepared by a famous British firm, in which food are present vitamins A, B, and D, the last-named being in the form of irradiated ergosterol. I further ask them to take a small dose of calcium daily, plenty of fresh fruit, and give a few hints about exercise, bowel regulation, and the like. This routine I ask them to carry out from the time at which they first consult me up to the birth of the baby and for several months afterwards. As a result I find that dental caries, almost invariably, does not occur during or after pregnancy; that the mothers to be are exceedingly fit; that at the end of pregnancy they are often healthier than before they became pregnant; that they are, as a rule, able to feed their babies themselves, and that the babies do exceedingly well, both in bone and tooth formation and in general health. As a mere general practitioner, the above practical findings are proof enough for me that Mrs. Mellanby has struck the nail on the head.

Treatment of Cataract

Dr. F. W. CORRY (Leeds) writes to record that he has obtained good results in treating cataract with inunction of equal parts of ung. hydrarg. ox. flav. and white vaseline. A small quantity of the ointment is placed inside the lower lids; the lids are closed, and the eyes gently massaged for two or three minutes nightly. The following morning, after rising, the face is bathed with warm water, then directly afterwards sponged with cold water, and dried. Every focal sepsis should be carefully attended to. Dietetic and general measures for establishing a healthy state of mind and body must be taken into consideration. As an ophthalmic surgeon of over twenty-five years' experience in ophthalmology (he says), I affirm that cataract can be often cured, especially if treated sufficiently early.

Tetra Forceps

With reference to Dr. E. W. Lewis's improved tetra forceps (or towel clip), an account of which was given by him in last week's issue (p. 1142), the instrument in question was the uppermost of the four illustrated.

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, 40, 41, and 44 of our advertisement columns, and advertisements as to partnerships, assistantships, and locum tenencies at pages 42 and 43.

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 340.

"ITS WEIGHT AT BIRTH WAS ONLY 4 lbs."



Dear Sirs,

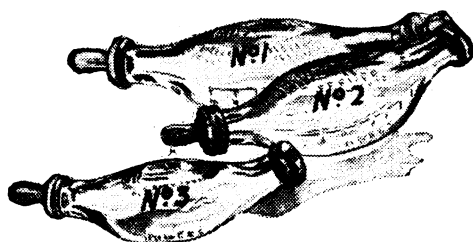
The following case will, I am sure, interest you. Baby Lowe was born on November 4th, 1929, at the 28th week. Its weight at birth was 4 lbs. It was put in an incubator and fed with a fountain-pen filler. First it was fed from the breast, then on a spray-process dried milk, and finally on a peptonised food.

It was brought to the Motherhood Bureau on June 10th, 1930—aged 7 months. Its weight was 8½ lbs. It was still fed on peptonised feeds and these; and was therefore losing weight.

Baby Lowe was put on a Lacidac Half Cream—4 measures to 6 ozs. of water—with Mead's Dextrin Maltose No. 1, 4-hourly feeds. Within a week the sickness had improved, the baby had begun to gain a little weight, and by July 10th its weight was 9 lbs. It was then put on Full Cream Lacidac and the appropriate additions of Brestol. In August Cow & Gate Rusks were added to the diet, and mixed feeding was commenced as the teeth were beginning to erupt.

In the 5 months from July 11th, 1930, to January 7th, 1931, the child gained 8 lbs., and at the last report on May 28th, 1931, was very bonny and well and was walking and climbing everywhere.

C.M.B.



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No. 1. 9 oz. Patent Glass Stoppered Feeder.
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Cow & Gate Milk Food

"Cow's milk made safe and suitable for Baby"

The makers will be pleased to send clinical samples of Lacidac, which is made in three strengths—full, half and separated—and Brestol to any members of the profession who may be interested

"The Best Milk for Babies when Natural Feeding Fails"

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INSIST ON COW & GATE FEEDERS 8 oz & 4 oz.



PURGATIVES AND MALNUTRITION

The dangers attending the administration of irritant purgatives to delicate and debilitated patients have long been recognised.

Whilst a certain amount of immediate relief may be thus obtained, the disturbing effect on the autonomic nervous system and the malnutrition resulting from irritation of the absorptive mechanism frequently outweigh the temporary alleviation. There appears, also, to be considerable risk of malnutrition in the constant use of laxatives of the so-called lubricating type. The covering of the mucous membrane of the intestines with a thin coating of oil can hardly fail to lessen the absorption of aliment. Moreover, it was found by Channon and Collinson that a portion of the mineral oil is liable to be absorbed and to

accumulate in the liver. The pathologic possibilities of such accumulation need no stressing.

For the relief of moderate degrees of constipation, in cases in which the fullest nutrition is important, no safer or more reliable laxative can be found than an effervescent preparation of the standard of Eno's "Fruit Salt."

In Eno's "Fruit Salt," it is claimed, we have at our disposal a carefully compounded, pure and standardised preparation, entirely free from the harsh and disagreeable sulphates of soda and magnesia. Eno's "Fruit Salt" has been used and prescribed by thousands of doctors for over half a century, during which time its reputation has become world-wide.

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