

## BOILS

**EDWENIL**—2 c.c. subcutaneously daily, to effect—usually three or four days.

¶ Edwenil has been described as a "synthetic vaccine"—with the important differences that Edwenil causes no untoward reaction, local or systemic; cannot cause anaphylaxis, and IS POLYVALENT.

*Boxes of 3 or 12—2 c.c. ampoules*

*Bottles of 12½ and 25 c.c.*

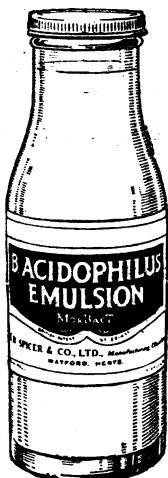
*Made only in the Laboratory of*

**E. H. SPICER & CO., LTD.**  
WATFORD, HERTS.

## EMULSION

### LACTOBACILLUS ACIDOPHILUS

(Minimum Count: 250 Million per c.c.)



Weekly examinations of the faeces will disclose the rapidity with which the intestinal flora is affected by the large quantities of viable B. Acidophilus incorporated in this very palatable emulsion

#### B. ACIDOPHILUS EMULSION

overcomes toxæmia of intestinal origin and promotes adequate defaecation.

*12-oz. Bottles 7/6.*

*Special Price to Hospitals.*

*Made only in the Laboratory of*

**E. H. SPICER & CO., LTD.**  
WATFORD, HERTS.

## LETTERS, NOTES, ETC.

**Pulmonary Embolism after Injection for Varicose Veins**

Dr. CHARLES SIMS (Cardiff) writes: In view of the infrequency of serious sequels to the intravenous injection treatment of varicose veins, apart from sloughing of the skin and superficial tissues at the site of injection, the following case seems to me to be worth recording in the *Journal*. A widow, 47 years of age, had enjoyed perfect health until July, 1931, when she attended a London hospital for treatment of varicose veins. She was given an injection into the right leg below the knee; unfortunately, it is not known for certain what solution was injected, but she was probably given 2 c.c.m. of sodium morrhuate, as this was the treatment in use in the hospital at the time. Five days after the injection I saw her at her home. She was in severe pain, and was found to have phlebitis in the right leg extending from the site of injection as far as Poupart's ligament. The skin at the site of injection was normal. The inflamed vessel was hard and exceedingly tender. She was treated by rest in bed, and application of glycerin and belladonna to the leg over the vein for five weeks, at the end of which time the leg was quite painless, although the thrombosed vessel was easily palpable. After a further two weeks she was allowed to sit up. On the second day of convalescence, on her own responsibility, she started walking in her room, and was suddenly seized with severe pain in the left chest at the base posteriorly. I was called to see her about six hours later. She had in the meantime had a slight haemoptysis, and respiration was painful. On examination her temperature was 99°, pulse 120, and respirations 28. She was in great pain, had a slight cough, which she suppressed on account of pain, and was rather cyanosed. There was a definite pleural rub and dullness over a small area at the base of the left lung behind. By the following day there was a small pleural effusion on the affected side, and the patient was sent to a hospital. She there made an uninterrupted recovery in about eight to ten weeks. I suggest that this was a case of pulmonary embolism following thrombosis after an injection for varicose veins.

**Simpson and Chloroform in Labour**

Dr. J. LIVINGSTONE LOUDON (Hamilton) writes: On glancing through the amusing book, *Devils, Drugs, and Doctors*, by Dr. Howard W. Haggard, I notice two slight errors in the chapter dealing with anaesthesia in labour. (1) At page 105 Dr. James Y. Simpson is referred to as professor of obstetrics at the University of Glasgow! Edinburgh was of course intended. (2) At page 116, in connexion with his (Simpson's) title of knighthood, it is said that Sir Walter Scott wrote to Simpson and suggested as a coat of arms suited to his work on anaesthesia at childbirth "a wee naked bairn" with underneath the motto, "Does your mother know you're out?" Whoever wrote thus to Simpson it was not Sir Walter Scott, because he died in 1832, and Simpson first used chloroform in labour fifteen years later (1847). Moreover, if the coat of arms and motto were suggested in connexion with his title—that was thirty-four years after Scott's death, for Simpson was created a baronet in 1866.

**Unusual Sequel to After-pains**

Dr. H. N. Knox (Tring) writes: I attended a patient in a cottage here in her third confinement a short time ago; both previous pregnancies had been normal. Labour on this occasion was slow, and was terminated by low forceps. The condition of the patient seemed normal afterwards except for after-pains. On the third day the pains ceased, and I was shown a firm mass, the size of a hen's egg, which had been passed during the night. The patient had had no excessive bleeding and the uterus was involuting well. The swelling had no pedicle and was quite smooth. It was sent to the Pathological Department at King's College Hospital for microscopical examination, and was reported to be a fibro-myoma of the uterus. That the condition is rare is suggested by the fact that no case has occurred in the records of the last 7,500 deliveries in the Obstetric Department at that hospital.

**Prolonged Catheter Life**

Dr. D. LIVINGSTONE Pow (Wrexham) writes: In view of the well-known dangers that attend catheter life in men suffering from enlarged prostate, the following case which recently came under my notice is of interest. The patient is a man of 82 years, somewhat broken down, but still able to get about in a quiet way. There is a large bilateral scrotal hernia, which almost obscures the penis from view. The prostate is enlarged, elastic, and presents no sign of malign-

nancy. It is definitely stated that no urine has been passed naturally for the past fifteen years. During that long period the catheter has been in constant use. It is passed about 10 p.m. each evening, and thereafter the man enjoys an uninterrupted night. The urine is drawn off again about 6 a.m., again about an hour later, then about 3 p.m., and, finally, before retiring to bed. The gum elastic catheter used is boiled once or twice a week, otherwise it is given an ordinary cleansing with water after each withdrawal of urine, and stored in a cardboard tube. The urine, recently examined, was acid in reaction, had a specific gravity of 1013, showed a haze of albumin, and a comparatively small quantity of pus. A rough calculation shows that instrumentation must have been carried out some twenty to thirty thousand times.

**Treatment of Undulant Fever**

Dr. H. G. LANGDALE-SMITH (Stechford) writes: I was interested to read Dr. Forbes's article, on a case of undulant fever, in your issue of June 4th, and the apparent good effect of S.U.P. 36 on its course. In a case that came under my care in May last year I tried the same preparation, and it certainly seemed to have an excellent effect for, although the temperature continued, the patient's general condition improved, and the depressed feeling the patient complained so much of every evening was largely relieved after each injection, which I gave at the end of the third week at three to four days' interval. The patient was able to get about at the end of eleven weeks. Radiostoleum, I think, was useful in the last few weeks of the illness.

**Radium and X Rays in Treatment**

Dr. S. J. STREIGHT (Assistant Medical Director, the Canada Life Assurance Company, Toronto) draws our attention to two slips in the annotation with this heading in our issue of June 11th. The report under discussion was issued by order of the Legislative Assembly of the Province of Ontario. The chairman, the Hon. Dr. John Henry Cody, is rector of St. Paul's Anglican Church in Toronto and president-elect of the University of Toronto. The only medical member of the commission was Dr. W. T. Connell of Kingston, formerly dean of the faculty of medicine, Queen's University.

**Hippuric Acid Synthesis Test***Correction in the Extra Pharmacopoeia*

Mr. W. HARRISON MARTINDALE, Ph.D., F.C.S. (12, New Cavendish Street, W.1), writes: In preparing an abstract of an article on the above kidney function test by Dr. P. L. Viole, in the *Lancet* of June 11th, 1921 (p. 1239), for inclusion in my book, a mistake was made which has passed unnoticed through two editions. Instead of the patient being given glycocoll and hippuric acid, as stated, it should read glycocoll and benzoic acid. Curiously enough the author himself apparently made an error (or, alternatively, it was a misprint), as he commences by stating, "We give the patient a dose of 0.5 gram of glycocoll and 50 grams of benzoic acid." Later, a dose of 0.5 gram of each is referred to, and as this latter dose coincides with that given by him in a previous letter in the *Lancet* of April 17th, 1920 (p. 884), there is no doubt that this is what he intended. The abstract in future editions of the *Extra Pharmacopoeia* will therefore read "0.5 gram of glycocoll and 0.5 gram of benzoic acid."

**Avoidance of Anaesthetic Accidents**

Dr. DANIN (St. John's Hospital, Lewisham) writes: There is nothing more frightening to an anaesthetist than to read, as one did the other day, of a patient losing his life as the result of liquid ether having been pumped into the trachea by mistake. In my opinion there is only one easy way to avoid disastrous results from using the Shipway apparatus wrongly, and that is to mark every loose end by a letter. By connecting each end to that having the corresponding letter the apparatus is made practically foolproof. There should be definite letters on the three-arm tube in the hot-water flask: the tube to be attached to the oxygen cylinder should be marked "oxygen," and that going to the patient marked "patient."

**Vacancies**

Notifications of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 44, 45, 46, 47, 50, 51, and 52 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenancies at pages 48 and 49.

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 24.

# BOVRIL MEDICAL AGENCY, Ltd.

ALDINE HOUSE,

10-13, BEDFORD STREET, STRAND, LONDON, W.C.2.

Telegrams: BOVMEDICAL, LESQUARE-LONDON.

Telephone: TEMPLE BAR 1616 (3 Lines).

Under the personal directorship of Dr. J. FIELD HALL and J. C. NEEDES

who have both had many years' experience as Medical Transfer Agents.

The commission chargeable in respect of any practice or partnership in Great Britain placed exclusively in the hands of this Agency has been fixed on an exceptionally favourable scale, the maximum chargeable on any transfer being fifty pounds (£50). Full Schedule of Terms and Conditions will be forwarded on application.

Accountancy and legal services furnished by the Agency, where desired, at moderate inclusive charges.  
No charge is made to Principals for the introduction of Locum Tenens or Assistants.

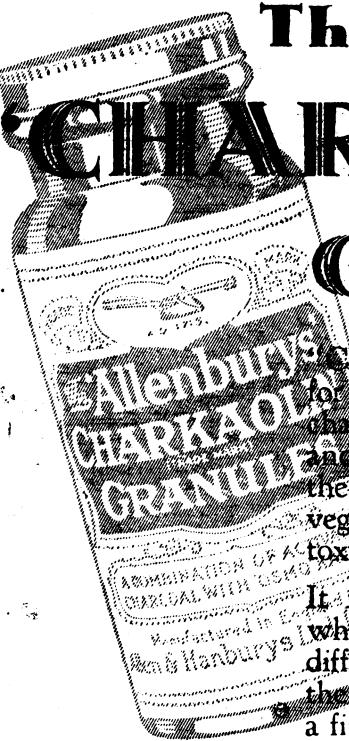
1. PARTNERSHIP.—FAVOURITE SOUTH COAST WATERING PLACE.—An opportunity offers for a first-class man (holding degrees in Medicine or Surgery, aged 35 to 45) to acquire a two-fifths share with increase to one-half in 18 months, and three-fifths in 3 or 4 years, and ultimately succession, in a good-class non-panel non-dispensing Practice, averaging nearly £3,000 p.a. Fees good and expenses very light. Excellent modern residence available. Price £3,400, but might be let for short period. Premium £2,330.
2. LANCS.—LARGE TOWN.—Middle and working-class PRACTICE, producing about £800 a year, and offering scope. Panel of 1,250. Fees 2/6 to 4/6. Small house can be obtained on rental. Reasonable premium for quick sale.
3. SOUTH WALES.—LARGE TOWN.—PARTNERSHIP.—A one-third share is offered in a very old-established good middle and working-class Practice. Average gross cash receipts for past three years, £4,703 (last year £4,827). Panel of nearly 1,500 and appts. worth about £80 p.a. Visits 5/- and 7/6, with medicine extra. Not much midwifery. Good house, with 3 reception, 6 bedrooms, etc. Separate professional rooms. Rent on lease £100 p.a. Good sport and schools. Premium for share £3,000.
4. SOUTH MIDLANDS.—Old-established mixed-class and steadily increasing PRACTICE, situated in small country town in the midst of rich agricultural district. Cash receipts for the past 3 years average nearly £1,700 p.a., last year £1,798, including panel of over 1,200. Very good house (6 bedrooms, etc.) with 1/2 acre of garden. Garage. Price freehold £1,500. Premium 1½ years' purchase.
5. SOUTH WALES.—LARGE TOWN.—PARTNERSHIP.—A one-third share, with increase later, is offered (after a short preliminary apprenticeship) in an old-established very good mixed-class Practice, averaging nearly £4,000 a year. Panel of 1,750. No appointments. Fees from 3/6 to 2 gns. Suitable accommodation can be secured. Ingoing Partner must be accustomed to good-class work, preferably Scotch or English. Premium for share 2 years' purchase, half down and balance by arrangement.
6. NORTHS.—LARGE TOWN.—PARTNERSHIP.—A one-third or two-fifths share is for disposal in a well-established mixed-class Practice, offering good scope for increase. Receipts average over £2,000 p.a. Panel of 2,000. Fees from 2/6. Suitable accommodation can be secured. Very moderate premium will be accepted for quick sale.
7. HOME COUNTIES.—Country PRACTICE in very attractive district, within easy reach of London. Old-established chiefly better-class practice, producing for last 12 months £970. Panel of over 500, and appointments worth about £60. Fees 2/6 to 21/-. Not much midwifery at from 3 gns. Very nice house, with all modern conveniences, and good garden. Garage. Price for freehold £1,700. Premium £1,450.
8. NORTH-WEST LONDON.—Old-established better-class non-dispensing PRACTICE averaging for the last four years about £840 p.a., including panel of about 120. Fees 3/6 to 21/-. Purchaser can choose his own residence if present house not required. Premium £1,050.
9. PARTNERSHIP.—SIX MILES NORTH-EAST OF LONDON.—Owing to the retirement of the senior Partner (through advancing age) a third Partner is required in a very old-established mixed-class Practice, in populous but pleasant open district. Receipts last year nearly £3,800, including appts. £100 and panel over 3,700. Very little midwifery. Good house with ample accommodation, at moderate rental. Fourth share to commence with. Premium 2 years' purchase.
10. PARTNERSHIP.—SOUTHERN COUNTY.—Within 35 miles of London. A HALF SHARE is offered in an increasing country practice situated in delightful residential district. Gross cash receipts average over £3,000 p.a. Panel of 1,500, and appts. worth about £200 p.a. Commodious house in good position with large hall, 2 reception, 9 bedrooms. Garden, and garage for two cars. Freehold for sale. Premium 2 years' purchase.
11. YORKS.—LARGE TOWN.—Steadily increasing middle and working-class PRACTICE, producing nearly £700 p.a.; including panel of over 500. Fees 2/6 to 7/6. Suitable house with surgery and waiting room, dining room, three bedrooms, and boxroom. Garden. Garage. Price for freehold £850. Premium 1½ years' purchase.
12. PARTNERSHIP.—YORKS.—(Within easy reach of coast)—A ONE-THIRD SHARE is offered in a very old-established good mixed-class practice, situated in an attractive town, having an up-to-date Hospital. Gross cash receipts for the last three years average over £6,000. Panel of about 2,400. Fees 3/6 to 2 gns. Midwifery 2 to 15 gns. House, in pleasant residential part of town, contains 3 reception, 5 bedrooms, etc. Good garden. Garage. Price £2,000, or might be rented. Premium for share £3,250. Ingoing partner should be married and accustomed to good-class work.
13. PARTNERSHIP.—DESIRABLE OUTLYING RESIDENTIAL SUBURB.—A suitable Partner (experienced, preferably married, about 30 years of age, and having the necessary capital) can acquire a share producing a gross income to commence with of about £1,250 in an old-established good mixed-class Practice worth nearly £8,500 last year. Option of further additional shares, at stated intervals, up to one-third. Good house, with ample accommodation, to rent or purchase. Premium two years' purchase.
14. MIDLANDS.—CATHEDRAL CITY.—Old-established better-class non-panel PRACTICE, producing for last twelve months £3,300. No appointments. Fees from 5/- to 21/-. Not much midwifery. Commodious house, with 2 reception, 6 bedrooms, etc. Price for freehold £2,000, part on mortgage. Good Surgical scope if required. Premium £5,000.
15. ESSEX.—COAST TOWN.—Very old-established non-panel (but good scope for this if wished) middle-class PRACTICE, averaging £1,156 p.a. Visits 5/- to 10/6, medicine extra. Very little midwifery. Expenses light. Detached house, with 2 reception, 3 bedrooms, bathroom, etc. Garden. Rent £100 p.a. on lease. Premium 1½ years' purchase.
16. YORKS.—EAST RIDING.—Well-established unopposed PRACTICE within reach of the coast, and near large town. Cash receipts for last 12 months £950, including panel of 630. Fees 3/6 to 10/6. House contains 3 reception, 3 bedrooms, etc., and professional accommodation. Garage. One acre of garden. Price for freehold £900, part on mortgage. Hunting, shooting, golf, etc. Premium £1,175.
17. SOUTH-COAST TOWN.—Chiefly middle-class non-panel PRACTICE, averaging over £500 p.a., but offering scope for increase. Fees 2/6 to 10/6. Eight-roomed house with kitchen, etc., and professional rooms. Can be rented or purchased. Premium £600. Vendor retiring.
18. PARTNERSHIP.—EASTERN COUNTIES.—A third Partner is required in a good mixed-class Practice, situated in very pleasant market town within reach of the sea. The share offered at first will produce about £1,000 p.a., with increase eventually up to one-half. Practice is old-established and producing about £4,500 p.a. Panel of 1,600. Choice of houses, or in-going Partner could reside in rooms. Premium 2 years' purchase.
19. SOUTH-WEST OF ENGLAND.—PARTNERSHIP.—A one-third share is offered in a good middle and better-class Practice situated in an attractive country town, near coast. There is a Hospital of 50 beds, and good Surgical scope. Average gross cash receipts over £3,000 p.a. Selected panel of 570. Fees 4/- to 21/-. Choice of houses. Premium 2 years' purchase.
20. YORKSHIRE.—PROSPEROUS TOWN.—PARTNERSHIP.—A one-third share (with increase later) is offered in a good middle-class non-panel Practice, averaging £3,300 p.a. Fees 3/- to 2 gns. Nice house, with 2 reception, 4 bedrooms, etc. Small garden. Electric light. Garage. Price for leasehold £1,200, £800 on mortgage. Good sport and excellent schools. Very good Surgical prospects. Premium for share £2,000.
21. WITHIN 40 MILES OF LONDON (EAST) AND CLOSE TO THE SEA.—PARTNERSHIP.—A fourth share is offered, owing to the retirement of one of four partners, in an old-established Practice, in very pleasant country district. Income £5,400 p.a., with good panel backing. Detached house, with ample accommodation, garden, etc. Price freehold £1,700. Premium 2 years' purchase.
22. SOUTH OF ENGLAND.—FAVOURITE COAST TOWN.—Old-established chiefly better-class PRACTICE, producing about £1,800 p.a. Small selected panel. Fees 3/6 to 10/6. Not much midwifery. Good house, with ample accommodation, and garden. Freehold for sale. Premium £3,000.
23. NORTH MIDLAND CITY.—PARTNERSHIP.—Two Partners are required to take over a three-fifteenths share each (with increase later) in a very sound old-established and increasing Practice in desirable town. Average gross cash receipts for the past three years £5,000. Panel of about 4,000. No clubs, and very little night work. Fees from 5/-. Suitable accommodation can be obtained. Premium 2 years' purchase. Excellent sport and schools.
24. PARTNERSHIP.—WEST OF ENGLAND.—A share producing about £700 p.a. is offered in a well-established Practice, averaging over £1,500 p.a. Ultimate succession later. Panel of nearly 1,400. Choice of houses. Premium £1,400.

WANTED TO PURCHASE.—(1) HOME COUNTIES—Well-established practice, preferably in good residential town, producing from £1,000 to £1,500 p.a. Panel not essential. Nice house, with garden. Ample capital available. (2) LONDON or Suburbs, preferably S.W., W., or N.W. Income £1,500 to £2,000, with large panel. Capital £3,000-£4,000. (3) SUFFOLK or NORFOLK—Country practice having an income of not less than £1,500 p.a., with some panel. Required at once. (4) Partnership.—A one-third or half share (producing from £1,000-£1,500 p.a.) having good surgical scope, in better-class Practice within easy reach of London. Capital available.

ASSISTANTS REQUIRED.—(1) YORKS. Large Town.—Indoor. Salary £300 p.a. to experienced Scotch Graduate. (2) DORSET.—Indoor, £300 p.a. Well-established PRACTICE in country district. (3) SOUTH WALES.—Indoor, £300 p.a. Young Irishman preferred. Car provided. (4) DURHAM.—Outdoor, £400 p.a. Country PRACTICE in pleasant district. Must be single and Protestant (5) Favourite SOUTH COAST TOWN.—Indoor £250 p.a. with view to Partnership. Easy work. (6) LONDON, North.—Indoor £300 p.a.

The Agency has made arrangements for special facilities, on very favourable terms, to be afforded to approved purchasers for the advance of part of the premium for any suitable practice or partnership. Full details on application.

The "Allenburys"  
**"CHARKAOLIN"**  
**GRANULES**

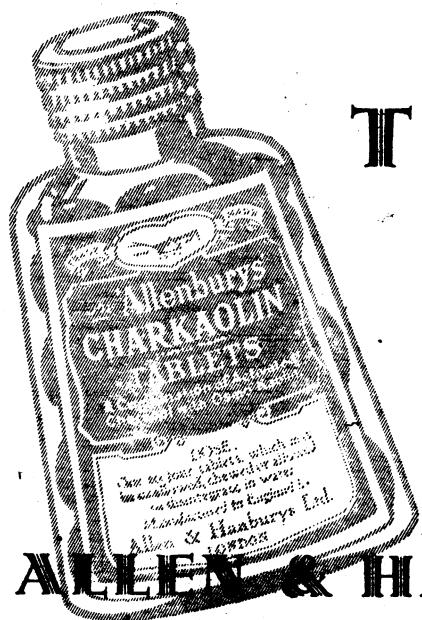


"Charkaolin" is a highly efficient agent for the treatment of intestinal infections characterized by abnormal fermentation and the formation of toxins. It combines the absorbent properties of highly activated vegetable charcoal with the well-known toxin-adsorbing qualities of "Osmo" Kaolin.

It is in the form of fine, clean granules which disintegrate rapidly in water and diffuse their ingredients evenly throughout the liquid. "Charkaolin" is tasteless, forms a fine suspension in water and is, therefore, quite easy to take.

In bottles at 2/6 each.

**T A B L E T S**



The "Allenburys" "Charkaolin" Tablets provide a convenient alternative method of administering "Charkaolin." Particularly suitable when travelling. Tasteless and disintegrate readily

In bottles :

40 tablets	:	1/6
80 tablets	:	2/6

**ALLEN & HANBURY'S LTD.**  
**LONDON, E. 2**

Telephone :  
 Bishopsgate 3201 (10 lines)

Telegrams :  
 "Greenburys Beth London"