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*a supply of—*

*for clinical test  
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# ASTHMA

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'FELSOL' is a colourless crystalline powder of acid reaction, and somewhat bitter but not unpleasant taste. Easily administered by placing on the tongue and swallowing with a little water.

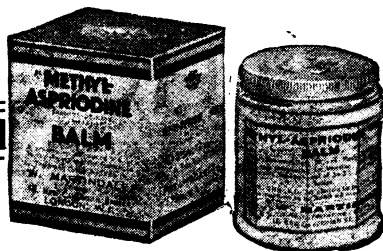
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FOR

### RHEUMATIC AFFECTIONS

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*Payment of Assistant*

"D. W. Mc." inquires whether a principal contracting to pay an assistant £350 and to provide him with board and lodging at a cost of £100 a year would be worse off as regards income tax deduction than one paying £450 a year to the assistant.

\*\* No. In each case the principal is expending the same amount and is entitled to the same deduction. The difference in the two arrangements, however, would probably affect the assistant, as in the former case he would be liable to assessment on £350 only.

## LETTERS, NOTES, ETC.

*Treatment of Boils*

Dr. H. L. McCORMICK (Glasgow) writes, with reference to Dr. Rupert Hallam's paper (October 8th): My experience is that the most satisfactory treatment for boils, recurring or non-recurring, is intramuscular injections of manganese butyrate. I have used this preparation for several years past with complete satisfaction. Moist dressings are unnecessary, dry dressings being quite sufficient—a time-saving matter for the busy general practitioner. A small incision meets the need for any surgical intervention. Collosol manganese is of much value in building up the patient's resistance to infection, but for immediate treatment the butyrate is the drug of choice. Vaccine therapy, actinotherapy, yeast, purgatives, etc., are more buckshot than medicine. Another method of prophylaxis which does not appear to have received the attention which it merits is Dr. Knott's thyro-manganese treatment. This is a very good and a very simple line of treatment, and should be more widely known.

Dr. J. T. MACLACHLAN (Dornoch) writes: The experience of any one doctor is necessarily very limited, but I should like to point out that quinine is a very efficient remedy for boils. But it must be given in adequate doses. I have found that 10 grains a day are required, given in 2-grain doses every two hours, or five doses a day. I tell my patients that in forty-eight hours no more boils will appear. I presume it acts as a germicide.

*X-ray Therapy in Erysipelas*

Dr. M. K. SAMBASIVAN (Kunhakonam, S. India) describes the case of a man, aged 54 years, who was admitted to hospital for alveolar abscess. Four days after incision of the abscess and removal of two molar teeth, a rigor occurred and the temperature rose to 104° F. On the evening of the next day pain and swelling was present on the left side of the face; the temperature remained high. One day later an extension of the swelling towards the nose had occurred, a diagnosis of erysipelas was made, and the affected area was painted with tr. ferri perchlor., antiserum (20 c.cm.) being given (temperature 103°-104°). On the next day the right side of the face was affected: serum was again given. On the following day the whole face was involved, parotid and submaxillary glands being swollen and tender, and the temperature varying between 103° and 105°. Serum administration was repeated. A small dose of x rays, given next day to the face, was followed in twenty-four hours by a drop in the temperature to 99°, a reduction of pain and swelling, and a general improvement. The patient was discharged cured in less than a week.

*The Female Figure: Ancient and Modern*

"ANOTHER M.D." writes: The European stronghold of Astarte was Malta, and a short stay on the island shows that she is still adored there. It also happens to be a place where ecclesiastical pressure concerning birth control is both strong and effective—a highly reprehensible state of affairs if its maternal mortality rate were equal to that of, say, Barnsley. Actually, however, according to their public health reports, the maternal mortality rate is a small fraction of 1 per cent., a result which indicates either that your correspondent "M.D." (September 24th, p. 616) is correct, or else that Malta is capable of teaching England something about the conduct of confinements.

*Differential Count of Leucocytes*

Dr. FREDERICK COCK (Weston-super-Mare) writes: The note of Dr. A. Fraser (Glasgow) under the above heading in the *British Medical Journal* of September 24th emphasizes the fact that the percentage estimation of the white blood cells is tedious, and takes considerable time. This is, of course, chiefly due to the number of fields that have to be examined before a total of 200 or 300 leucocytes is found for the estimation. If a film is made according to the "drop smear" method I described in the *British Medical Journal*

of February 25th, 1928 (p. 306), it is remarkable how quickly a count can be made. Instead of a few leucocytes per field fifteen to thirty is the average, and in some fields as many as sixty. The difference between a count made by this method and one made from an ordinary blood film is noted in the article referred to.

*Disruption of the Pelvis*

Dr. CHARLES E. DENNIS (Melbourne) writes: The report in the *Journal* of June 11th suggests to me that the following is also worth putting on record as a case of complete disruption of the pelvis without any pelvic fracture. On August 25th, 1926, I was asked by Mr. Fay Maclure, F.R.C.S., to make a bedside x-ray examination of a lady who had had a bad fall while hunting and sustained a pelvic injury. Her horse had fallen at a jump, pinning her under it in a sitting posture, with one side of her pelvis against a stone. The radiograph showed an upward displacement of the whole of one side of the pelvis, dislocation occurring at the pubic symphysis and sacro-iliac joint. The only fracture present was that of the fifth lumbar transverse process, which had been displaced by the ilium. Treatment was by extension, but difficulty was experienced in maintaining reduction. Eventually she made a good recovery, and I am informed she was able to continue hunting.

*Medical Golf*

The autumn meeting of the Shropshire Medical Golf Association was held at Church Stretton on Sunday, October 2nd. In spite of a gale on the Stretton Hills some very good scores were returned. The captain's prize, presented by Dr. F. A. Anderson (Shrewsbury), was won by Dr. K. M. Rodger, with 88-12=76 net. Other leading scores were: Mr. A. D. Haydon, 90-12=78; Dr. Fowell, 89-10=79; Dr. Beckett, 91-11=80. The foursomes competition was won by Dr. J. Lavelle and Dr. K. M. Rodger—all square, the runners-up being Mr. A. Lavelle and Dr. T. R. Elliott—5 down. Dr. A. C. Watkin was elected captain for the year 1932-3, and Dr. T. R. Elliott was re-elected honorary secretary. The spring meeting was fixed for the last Thursday in May at the Hawkstone Park Golf Club.

The Medical Golfing Society held its autumn meeting at Deal on October 8th and 9th, by invitation of the Royal Cinque Ports Golf Club. Over eighty competitors took part, and, in spite of very inclement weather, thoroughly enjoyed the splendid links. Their comforts were well attended to by Mr. Bernard Drew, the secretary, to whom the society owes many thanks. The dinner on Saturday was a very cheery affair, and the selling sweep, in Mr. Rowley Bristow's able hands, was a great success. The various competitions resulted as follows: Singles *v.* Bogey: First, A. Galletely; second, A. Rusack. Foursomes *v.* Bogey: First, A. Galletely and G. D. McGrath; second, Harold Chapple and W. Dale. Canny Ryall Cup: First, J. L. Livingstone, 74 net; second, G. D. McGrath, 75 net; third, J. Grace and W. Dale, 76 net. The thanks of the society are due to Mr. H. M. Creasy for the organization and conduct of the whole meeting and the selling sweep.

*Thyroideum "B.P. 1932"*

Messrs. ARMOUR AND CO., LTD., write: There is a very considerable conflict of opinion regarding thyroid B.P. 1932. Certain hospitals have been offered U.S.P. 0.2 per cent. thyroid powder as being twice the strength of the new B.P., and we have had several inquiries asking if it is satisfactory to break down, with equal parts of milk sugar, thyroid powder with an iodine content of 0.2 per cent. to produce the 1932 product. It must be borne in mind that thyroid B.P. 1932, although being standardized to 0.1 per cent. iodine in combination as thyroxine, actually contains more than 0.2 per cent. total iodine. An assay of a good grade thyroid will probably give a total iodine content of up to 0.3 per cent. Of this iodine content probably 10 per cent. will be inorganic iodine; of the remaining 90 per cent., thyroxine iodine varies from 30 to 60 per cent.; the remainder of the organic iodine is in the form of acid-soluble di-iodotyrosine, the latter being physiologically inert. Of the three iodines present in thyroid, therefore, only one—namely, acid insoluble thyroxine iodine—is recognized in the B.P. product, and it is on thyroxine iodine content solely that the B.P. 1932 standardization is determined.

*Vacancies*

Notifications of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 41, 42, 43, 47, and 48 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 44, 45, and 46.

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 219.

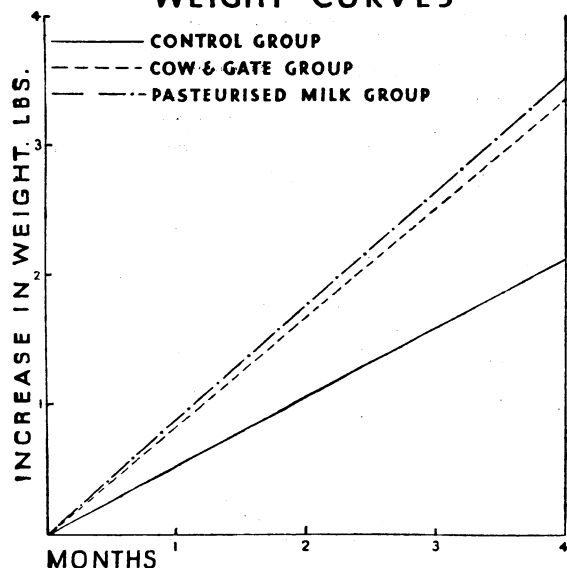
# Growth-producing factors in Roller Milk Powder

It has often been suggested that the heat process employed in powdering milk by the Roller Process must necessarily involve damage to the growth-promoting factors in milk.

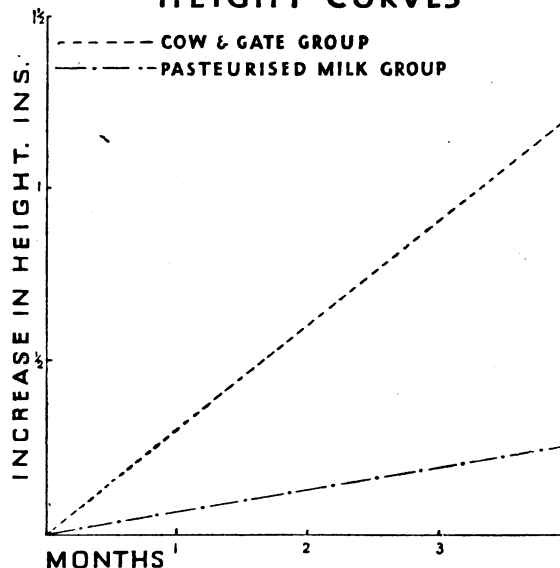
A recent experiment at the Princess Beatrice Centre, Fulham, demonstrates that an additional ration of milk to the home diet resulted in an increase in height and weight, and, in the case of the group fed on Milk Powder, a marked increase in height.

Cow & Gate Full Cream Milk Powder was used in this social experiment, which has demonstrated that the Improved Roller Process, with its rapid heat treatment, does not damage the growth-promoting factors, vitamins, and soluble calcium in the original fresh milk.

## WEIGHT CURVES



## HEIGHT CURVES








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with a tablespoonful  continues  
with a teaspoonful  and finally  
stops it altogether  Surely, there is  
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