

each ampoule. Capillaries made from broken test tubes are useful for doing coagulation times. Sugar estimations are easily done with a burette and Benedict's solution in a dish. There is a cheap blood nitrogen set on the market. Analysis of stomach contents is quite simple to do with indicators and the burette: solutions are easily made up. For the laboratory bench, a kitchen table, equipped with spirit-lamp and bought test-tube racks, suffices. Glass slides rubbed with sandpaper and turpentine give a good surface for writing labels. A sheet of glass should be fixed on the table, with paper, half white and half black, gummed underneath.

Pruritus with Jaundice

Dr. J. WATKIN EDWARDS (London, S.E.20) writes: I am interested in the inquiry made in the *Journal* of June 16th concerning the treatment, or relief, of pruritus associated with jaundice, and am reminded of a case which came under my observation some years ago in a patient who had been a medical student in London. This man had an attack of jaundice (after fish or pork, I forget which), very marked, and complicated by this maddening itching of the skin, which nearly drove him frantic. I tried the usual treatment for catarrhal jaundice, and soothing applications to the skin, with very unsatisfactory results. After a few days, finding no improvement, he expressed a wish to come to London to see one of his old teachers. I readily consented, and he chose that excellent physician the late Sir William Broadbent. After an examination, Sir William assured him that the itching would have disappeared by the next day. Although it is now many years ago, I distinctly remember that the chief ingredient in the prescription (which definitely *did* remove the pruritus by the next day, and without any relapse) was sodium phosphate. This good old-fashioned medicine is rather badly neglected in these days. I have never forgotten its usefulness in the above case, and often find it valuable in liver troubles. I write this letter in the hope that it might be of some value to revive the use of a good medicine and to meet the needs of your correspondent "P. J. M."

Income Tax

Assessment in Excess of Return

"SENEX" made a return and has been assessed in excess of the amount returned. (Apparently the "demand note" to which he refers was a formal notice of assessment issued to give opportunity for objection to be lodged.) He has been requested to supply particulars of expenses—and presumably a statement of gross receipts—but the inspector will not say how the original assessment "made by commissioners" had been arrived at.

** There are two bodies of commissioners, who sit at infrequent intervals: (a) the additional commissioners, who are responsible for the making of assessments; and (b) the general commissioners, who hear objections thereto. If the former did not have the return when the assessment was made, or thought it inadequate, they would make an assessment on estimate. Presumably something of that sort happened. "Senex" was formally notified, and now has the alternative of coming to an agreement with the inspector or of appealing to the general or special commissioners, who will personally consider any evidence he may wish to put forward. We suggest that a personal discussion at the inspector's office will probably be the best way of reaching a proper settlement.

LETTERS, NOTES, ETC.

A Campaign Against Rats

An account of their campaign against rats in Beyrouth, where bubonic plague has been endemic for more than a decade, is given by L. V. R. JUDE and J. V. H. LUBET in *Arch. de Méd. et de Pharmacie Militaires* for February, 1934. In 1920 there were sixty-two cases, in 1921 there were twenty, and in 1932 as many as forty-nine cases. The campaign included all the measures hitherto advocated. Among 214 rats examined between May, 1932, and September, 1933, eleven were found to be infected. Although rats were destroyed by the thousand by trapping, etc., it was realized that for a town with a population of 200,000 inhabitants something more radical must be done. Preliminary tests were accordingly made with the Danish virus ratin, and with the highly toxic preparation of squill, known as ratinin. The system adopted was to distribute the bait, impregnated with ratin, all over the town, and, after three weeks, to provide the survivors with bread, fish, or cheese impregnated

with ratinin. A credit of 200,000 francs was provided for the purchase and distribution of these two poisons, and fifty persons were employed on the preparation of 12,000 baits every day. They were put down in the evening, and the few that were left untouched were removed next morning. In the course of one year three million such baits were distributed. The exploration of certain burrows revealed many dead rats, whose bodies had dried up without smelling of decomposition. Though no exact figures could, of course, be quoted, it was the unanimous opinion of the inhabitants that the rat population had been greatly reduced. During 1933 there were only four human cases of plague—a result which the authors are inclined to attribute to their vigorous campaign against Beyrouth's rats.

"Revue de Rhumatisme"

Recently a new periodical, devoted to the study of rheumatism, has been started in France, under the title of *Revue de Rhumatisme*. The policy of the editors is to include authoritative articles, by well-known specialists, on rheumatism, reports of societies and abstracts of articles on rheumatic subjects, and reviews of appropriate books. The first number contains a long article by Drs. Fernand Bezançon and Mathieu-Pierre Weil on the pathology of joints. This must prove a most valuable summary of recent views on the subject. Among other things, Pemberton's theories on the influence of capillary circulation and the autonomic vascular control are summarized, and the differences in the pathological process underlying osteoarthritis and rheumatoid arthritis are described. From these considerations the rationale of modern treatment of chronic rheumatism is deduced, and a hopeful outlook is held for the future success even in this chronic and disheartening disease. We welcome this venture, and hope that it will contribute to the relief of the social scourge which is its subject.

A Family Record of Hospital Service

There has recently been issued a revised list, alphabetical and local, of the old students of St. Thomas's Hospital, S.E.1. The compilation of this book has been the work of Robert S. Hopkins, School Bedell, and this number represents his last effort before retiring, on August 11th, after fifty-four years of service to the hospital. A London correspondent writes: Hopkins's family holds a remarkable record at St. Thomas's: in 1880 he himself was appointed as a messenger at the age of 14, his father served as porter from 1843 to 1880, while his grandfather, who worked in connexion with the medical school at the old hospital in St. Thomas's Street, was employed from 1823 to 1843. The combined services of the family thus cover 111 years. During his fifty-four years Robert Hopkins has worked for six medical secretaries, while a wealth of student material has passed through his hands. He is rightly credited with an almost infallible memory for names and faces, and it is recorded that however much time may have elapsed since he last saw an old student he never fails to recognize him. One mistake is, however, alleged in the case of a twin brother, but even this has been denied.

High Carbohydrate Diets and Insulin Efficiency

A Correction

Dr. H. P. HIMSWORTH writes: In my article on the above subject, which appeared in the *Journal* of July 14th, 1934 (p. 57), I have unfortunately made a mistake in the references. The second reference, concerning the glucose equivalent of insulin, I attributed to F. M. Allen; it should really have been attributed to F. M. Allan of Lahey Clinic, Boston. Dr. Allan has drawn my attention to this error, and I should be grateful if you could publish a correction of my mistake.

Correction

Professor F. J. BROWNE writes: Will you please let me, in justice to the Central Midwives Board, correct an error that has crept into my paper "Are we Satisfied with the Results of Ante-natal Care?" published in your issue of August 4th, on page 196. The percentage of failures in the examinations of the Central Midwives Board is there stated as ten. This should be seventeen.

Vacancies

Notifications of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 34, 35, 36, 37, 38, 39, 42, and 43 of our advertisement columns, and advertisements as to partnerships, assistantships, and locum tenencies at pages 40 and 41. A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 148.