Letters, Notes, and Answers

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QUERIES AND ANSWERS

Treatment of Chronic Nasal Discharge

"M.S." writes: Could anyone suggest a hopeful line of treatment for this case of chronic rhinitis? The patient, a woman aged 25, has had the maxillary antra and frontal sinuses operated on, and, later, she tried a course of homoeopathic treatment. She states that the headaches are less severe and less frequent than they used to be, but there is still very copious nasal discharge. Should allergic reaction be tested, or would an autogenous vaccine or some form of light therapy be more helpful?

Age for Dick and Schick Tests

"O. M. H." writes: At what age should children be Dickand Schick-tested and, if positive, actively immunized?

Localized Flushing

Dr. R. K. Robertson (Sheffield) writes in reply to "H. H. B." (British Medical Journal, October 13th, p. 705): I once had a case of patchy areas of flushing in an otherwise healthy young woman, which responded quite well to the following mixture, taken thrice daily:

Quininae sulph. gr. j, acid hydrobrom. dil. m v, syr. aurantii q.s., aqu. q.s.

Treatment of Trichophyton Infection

A major of the R.A.M.C. writes in reply to "M.D.," who suffers from trichophyton infection: I have a brother who is a chemist. He was out East in a district where medical aid was not forthcoming, and he got dhobi itch. Using his knowledge that the skin is a colloidal membrane, and that glacial acetic acid is known to penetrate a colloidal membrane, he applied to himself pure glacial acetic acid, with an immediate cure. When told of this, I asked if it was painful, and how it was applied. It appears it was not very painful. The acid was dabbed on with a small piece of cotton-wool held in forceps, and there did not appear to be any burning of the skin. I applied this treatment to myself when a bald patch appeared in my hair. Several of the usual ointments failed to stop it spreading. An immediate cure resulted. This might therespreading. An initial cure resulted. This inight interfere be worth trying in the case of a trichophyton infection. I should advise a very cautious application to a small area, and watch the result before applying it liberally, as from the nature of the drug it is rather drastic.

Dr. WRIGHT LAMBERT (Brentwood) writes: If "M.D." and others infected with trichophyton will try painting the affected parts daily with I per cent. brilliant green in rectified spirit I think they will get more relief, if not actual cure, than by any other treatment.

Income Tax

Use of Private Residence

- 'E. J. N." owns the house in which he lives, and uses two rooms for consultation, etc. One maid is kept at the house, and "E. J. N." rents another house, where the main surgery is situated. What can he claim for the former premises?
- ** Seeing that most of the callers are apparently dealt with at the rented premises "E. J. N." will probably not be entitled to claim more than 1/3, or even 1/4, of the general expenses (rental value, light, maid's wages, etc.) of his residence.

LETTERS, NOTES, ETC.

Ernest Hart, 1836-1898

- Sir D'Arcy Power writes: E. V. Lucas, C.H., says in the October, 1934, number of the Cornhill (p. 410): "Ernest Hart was the founder of the Lancet and a great connoisseur of Japanese art." Surely the first statement should not go uncorrected.
 - ** Mr. Lucas would not have fallen into this blunder if he had read Sir D'Arcy Power's memoir of Ernest Hart in the Dictionary of National Biography, or Sir Squire Sprigge's Life and Times of Thomas Wakley. Hart was born in 1836, thirteen years after Wakley founded the Lancet.

Thrush and Pyloric Stenosis

Dr. Robert Craik (West Ealing) writes: A boy, born in a maternity home, was well till the twelfth day, when he vomited. This subsided, and mother and child were discharged on the fourteenth day. At birth the baby (a first one) weighed 8 lb. 3 oz., and on discharge 8 lb. 2½ oz. I first saw him on the eighteenth day on account of vomiting. On the twentieth day he was no better, was constinated and a swab from the mouth soon gave growth. constipated, and a swab from the mouth soon gave growth of M. albicans. Was it possible that his troubles were due to monibal gastritis? On coming home he was fondled by a large family, from one of whom he undoubtedly acquired the infection. His condition fluctuated, but there was no improvement in a week, and there was steady loss of weight. Suspecting pyloric stenosis, he was sent to hospital on his twenty-ninth day, weighing 5 lb. 15½ oz. on admission. He was operated on next day, made a good recovery, and was discharged at the age of 3 months, weighing 8 lb. 9 oz. At 7 months he weighed 16 lb. and had cut two teeth. Doubtless congenital abnormality is the important point, but the lumen is contracted to a varying degree. In this case I think the onset of serious symptoms was determined by the thrush infection, and possibly this is the explanation of the onset in not a few cases.

Myoidema

Drs. J. Ronald and N. C. F. Milne write from the Royal Infirmary, Stirling: We have just read Dr. Broadbent's interesting memorandum in the *Journal* of October 13th (p. 679), in which he draws attention to the physical sign of myoidema. As members of what he describes as the "younger generation of doctors" may we point out that myoidema (more generally known as "myotatic irritability") is familiar to most Edinburgh students—undergraduates and graduates alike. We venture to suggest that Edinburgh does not stand alone among the teaching schools in importing knowledge of the significance and discreptions. in imparting knowledge of the significance and diagnostic importance of this phenomenon.

The G.P.'s Nightmare

Dr. CHARLES J. HILL AITKEN (Kilnhurst, nr. Rotherham) writes with reference to the paragraph with this heading (October 20th, p. 754): I understand that, many years ago, the late Professor John Chiene had a cartoon of himself—a general surgeon—hanging on to the umbilicus, the only part left to the general surgeon by the receivile. the only part left to the general surgeon by the specialist surgeons.

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

A short summary of vacant posts notified in the advertisement columns appears in the Supplement at page 228.