

LETTERS, NOTES, ETC.

Salyrgan in Cardiac Oedema

Dr. J. M. GREENWOOD (West Didsbury, Manchester) writes: A patient, aged 23 years, was admitted to the Withington Hospital on November 14th, 1934, suffering from cardiac failure, following mitral valvular disease. She was extremely ill, with dyspnoea and a massive oedema, and was passing very little urine. Digitalis was given by mouth until the 24th of the month, when, although the general condition was rather improved, she still had marked oedema, and was passing approximately 25 ounces of urine in the twenty-four hours. Salyrgan 2 c.cm. was administered intramuscularly without previous medication with ammonium chloride, and 305 ounces of urine were passed during the following twenty-four hours. The patient appeared rather weary after this effort, but generally much improved, with only a slight degree of oedema remaining. Is this a record?

Maternal Morbidity and the G.P.

Dr. MICHAEL H. DOBBYN (Southwick, Brighton) writes: Some ten years ago I, together with many others, passed my final examination, having learned my midwifery at the Rotunda. On buying a practice I also purchased an expensive bag and set of midwifery instruments, ready to take on all the "midder" I could get, and very keen I was. The years have gone and I am disillusioned; the cases which I hoped to get have been taken from me by organized and subsidized nurses, clinics, and hospitals, which I am expected to help to pay for. Having done about 250 cases in ten years with no maternal deaths, I hardly think my lack of cases is due to bad midwifery or bad luck. How can a G.P. become expert at maternity work when he only gets a few cases a year to do? Just picture a surgeon remaining skilled and keen with about ten to twenty operations a year! He would soon become out of date, and give it up as far as possible; and that is what the G.P. is doing with midwifery at present. The nurses, backed up by public health officials, have failed to reduce the death rate. Give midwifery back to the G.P., to whose province it rightly belongs, and relieve him of all the futile clerking work which is rained upon him from all sides, and I believe you will see a reduction in the maternal death rate.

Labelling Patients

Dr. CHARLES J. HILL AITKEN (Kilnhurst, nr. Rotherham) writes: I was called urgently to a man, not a patient of mine. From the history given to me, and as the result of my examination, I felt justified in saying there was nothing serious the matter. Some days later I heard that this man, a few hours after I saw him, had been operated on for perforated gastric ulcer. Presumably I had seen the patient in the "quiet" stage of perforation. To prevent such a catastrophe happening to any of my own patients I now, if they are diagnosed as "ulcer," hand them a card on which I have written: "I am supposed to have an ulcer of the stomach." An intelligent patient said: "I see. If I collapse among strangers they will know what's amiss with me." The "stranger" I had seen had a history of indigestion, but made no mention of it to me, although I gave him the chance of taking me into his confidence.

Allergy

Dr. H. S. RUSSELL (Bradford) writes: Dr. C. Paget Lapege's article (*British Medical Journal*, December 1st, p. 985) is interesting both for his review of allergy and for his new word "autophil." As regards the question of diet, I am pleased to find some support for Adam's condemnation of milk. As food for asthmatics it would be hard to find anything worse. Exercise, however, which he tends to "damn with faint praise," rarely does anything but good in asthma. Admittedly violent exercise carried to the point of producing breathlessness may occasionally precipitate an attack, in the same way as coughing, sneezing, or even laughing, though this effect depends not on "overloading of metabolism" but on forced expiration. An "autophil" who gives up motoring and takes to walking instead will find his tendency to asthma considerably reduced.

Cancer Research: A Suggestion

Dr. RICHARD KERRY (Montreal) writes: There is one method of attacking the cancer problem which does not seem to have been sufficiently explored. If the technique of the Canti film, or even high magnification, be used, and if,

instead of radium, which kills growth, the effect of modifying the electrical potential or pH of the fluid which surrounds the growing malignant tissue by other electrolytes be studied, such direct observation on the process of growth should yield valuable results. As mouse cancer develops in an acid medium one would use divalent alkalis to begin with, such as lime-water or a weak suspension of magnesium hydroxide, and then other compounds as indications may suggest. If positive results be obtained, repeated infiltration of the tissues surrounding any tumour presents no insuperable difficulty, and the method can easily be applied to practical treatment.

Chemically Bleached Flour

Dr. JAMES OLIVER (London) writes: Because flour—that is, white flour—as obtained by grinding and bolting wheat, enters so largely into the dietary of every one of us, and more especially of the children, as bread and other forms of food-stuffs, it should be as wholesome as possible, and it should in every sense of the word be in conformity with Section 2 of our 1928 Food Act, wherein it is decreed that "no person shall sell, to the prejudice of the purchaser, any article of food which is not of the nature and not of the substance and not of the quality demanded by the purchaser." Flour bleached by any one of the following four powerful chemical reagents—namely, benzoyl peroxide, nitrogen trichloride, chlorine, and nitrogen peroxide—when ingested and assimilated, is prejudicial to health, and should be prohibited by the Government. No commercial interest should be allowed to stand in the way where health is concerned.

Queen Alexandra Sanatorium Fund

Lord BALFOUR OF BURLEIGH desires to bring the above fund to the notice of the professional and middle classes, for whose benefit it was originally founded. The fund is primarily intended to enable those of small means who are threatened with consumption, or who may be suffering from consumption in its earlier stages, to obtain the benefits of mountain air in Switzerland. The fund is not intended for those who are suffering from chronic or advancing disease, or for patients who require surgical treatment. To selected cases grants are made at the rate of 50 Swiss francs a week during the late autumn, winter, and early spring, on condition that the recipient stays at an approved institution in Davos. Grants will also be made to parents or guardians of children of the professional and middle classes who may be suffering from consumption or other diseases of the chest, to enable them to stay in an approved home for children at Davos. In general, patients require about 100 francs a week in order to live in comfort at Davos, which means that they require a private income of £3 a week in addition to the grant provided by the fund. Forms of application may be obtained from the honorary secretary, Mr. A. Stanley Herbert, 25, Birch Lane, London, E.C.3. Applications will be considered by the Selection Committee, and, if necessary, an appointment will be made for the applicant to see one of the honorary examining physicians in London. If after this interview applicants are for any reason not considered suitable, a third-class railway fare will be paid to those residing over fifty miles from London.

"Ciba" Jubilee

The Society of Chemical Industry in Basle (Ciba) is celebrating the jubilee of its foundation, and has produced a handsome volume describing the history and present activities of the company. In 1859 the production of coal tar dyes was instituted in Basle by Clavel, who was a native of Lyons. This and other works were combined in 1884 to form the present organization. The chief activities of the company are the production of coal tar dyes and of pharmaceutical products, and to-day they have branch factories in many parts of the world.

The medical meeting of the Charterhouse Rheumatism Clinic, on December 13th, at 5 p.m., will be held at 15, Portland Place, and not at the premises of the Clinic (94, Hallam Street).

Vacancies

Notifications of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 68, 69, 70, 71, and 74 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 72 and 73.

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 292.