

Letters, Notes, and Answers

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QUERIES AND ANSWERS

Sterilizing Syringes Used for Solganal

Dr. E. ARMSTRONG (Prestatyn) writes: I should be glad if any reader would suggest an easy method of sterilizing syringes and needles used for injections of solganal B oleosum. The literature states that no moisture must come in contact with the preparation, and it is extremely difficult to dry syringes after boiling. Is the use of spirit for sterilizing needles also contraindicated with solganal?

Preventing Perineal Tears

F. C. G. (Yorkshire) writes: I wonder if some of the older obstetricians could advise their younger and less experienced colleagues how to avoid perineal tears; are there any ante-natal methods that might help? I am sure many of the younger practitioners would be glad of this advice.

** Some advice on the care of the perineum appeared in this column on March 14th (p. 566).

Climate for Pulmonary Tuberculosis and Anaemia

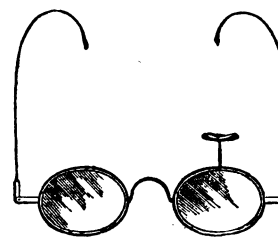
"A. B. C." (Surrey) writes: Can you tell me where I can obtain information about homes or hostels in Egypt where I can send a patient (a single woman) who is anxious to go there for her health? She is suffering from anaemia and general debility, with a certain amount of tuberculous lung trouble. Her means are small and anything very expensive would be out of the question. Could you inform me, too, if Egypt is a suitable place for tuberculous people, as I have heard contradictory opinions. What is considered the best climate where it is really warm? She cannot stand the cold—which really puts Switzerland out of the question?

** We have referred this query to Dr. R. FORTESCUE Fox, who replies: As a rule, with few exceptions, a hot climate is not to be recommended for pulmonary tuberculosis, whether incipient, or slight, or more advanced. The same observation usually applies to anaemia. Atmospheric heat and probably excess of strong sunshine may accelerate slow tuberculous processes in the respiratory organs, which in a cooler air should tend to recovery. On the Egyptian desert, also, hot days are succeeded by cold nights, and the extreme daily range of temperature (at Assouan 28° F. against 9° F. in the West of England) is unsuitable for those who are liable to chill. Much, however, depends on local circumstances. In cases like "A. B. C.'s" many good results are obtained in Great Britain. Fresh-air baths and exposure to sunshine interrupted by passing clouds produce an alternating stimulation, which is more beneficial than strong sunshine under cloudless skies. The fine air of North-East Scotland—for example, Deeside—seems to have much the same stimulating effect as that of much higher latitudes further south, and, with proper housing, can be recommended in winter as well as summer.

LETTERS, NOTES, ETC.

Mechanical Treatment of Ptosis

Dr. C. BYRON TURNER (Grimsby) writes: Under the heading "Magnetic Spectacles for Ptosis" (*Journal*, August 15th, p. 338) Dr. Charles Russ describes a way of relieving ptosis which, whether the adhesive or the implantation method of attaching the steel is used, may result in a good deal of irritation in the one case and probable extrusion of the foreign body in the other. I enclose a page torn from the *British Medical Journal* of August 5th, 1893, in which the illustration below of a gadget used by me for such cases appears, with the description: "... a pair of spectacles



with a concave crutch of thin wire projecting backwards from the upper part of the frame, so as to press back the upper part of the lid above the ball, and so raise its lower border." This gadget has answered well, is comfortable, almost invisible, and can be fitted by the optician or watchmaker for a few pence.

Treatment of Obesity

"GUYITE" writes: After reading Dr. Douthwaite's helpful article on the treatment of obesity (August 15th, p. 344) and recalling his former Delphic pronouncements on this theme, I feel he is too hard on the little man whose lesser basal caloric requirements have proved to be his undoing. Fortunately, most of our leading physicians who, literally, look down on their fellow-men, have a well-developed sense of humour, and Dr. Douthwaite is no exception to this rule.

Personal Experience of Barbiturates

Dr. ROWLAND JONES (South Wales) writes: I am an extremely well-preserved man for my 68 years. There being a small operation to be performed on me I was persuaded, against my will, to submit to an injection of sodium evipan. Immediately the upper bandage was loosened I lost consciousness. I am told that I then became very restless—shouting and struggling. This continued for about two hours, until I was given morphine, 1/4 grain. On waking up, four hours after, I found there was a tight bandage round my arm, which I loosened. I had great pain in the arm, and a peculiar dryness of the mucous membrane of my nose—so much so that I pushed lanolin up to my inferior turbinates. I was very short of breath; my heart became very irregular; I was restless for nights; and my speech became very slurred. In about two days a vesicle appeared at my elbow, and finally the whole of the bicipital fascia sloughed—a slough which I had to have cut away, the tendon of the biceps being fully exposed. This wound has only just healed, nine weeks after the injection. After four nights of absolute loss of sleep a fellow-practitioner suggested heberal sodium. I took two 3-grain capsules. I slept, or rather became unconscious, but was again restless, and my wife thought I was going demented. I have suffered from shortness of breath and irregularity of the heart for over six weeks, and was not able to do any work for over eight weeks. I am now getting back to my normal condition, and thoroughly believe that if it were not for my wonderful constitution I should have died.

Vacancies

Notifications of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 36, 37, 38, 39, 40, 41, 44, and 45 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 42 and 43.

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 143.