# LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

COMMUNICATIONS respecting Editorial matters should be addressed to the Editor, 2, Agar Street, Strand, W.C., London; those concerning business matters, advertisements, non-delivery of the JOURNAL, etc., should be addressed to the Manager, at the Office, 423, Strand, W.C., London.

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ORIGINAL ARTICLES and LETTERS forwarded for publication are understoot to be offered to the British Medical Journal atone, unless the contrary be stated.
Authors desiring reprints of their articles published in the British Medical Journal are requested to communicate with the Manager, 429. Strand, W.C., on receipt of proof.
Correspondents who wish notice to be taken of their communications should authenticate them with their names—of course not necessarily for publication.

CORRESPONDENTS not answered are requested to look at the Notices to Correspondent of the following week.

MANUSCRIPTS FORWARDED TO THE OFFICE OF THIS JOURNAL CANNOT UNDER ANY CIRCUMSTANCES BE RETURNED.

IN order to avoid delay, it is particularly requested that ALL letters on the editorial business of the JOURNAL be addressed to the Editor at the Office of the JOURNAL, and not at his private house.

at his private house.

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TELEPHONE (National):—

EDITOR, 2631, Gerrard.

GENERAL SECRETARY AND MANAGER, 2630, Gerrard.

Queries, answers, and communications relating to subjects to which special departments of the BRITISH MEDICAL JOURNAL are devoted will be found under their respective headings.

### QUERIES.

WE would request correspondents who desire to ask questions in this column not to make use of such signatures as "A Member," "A Member B.M.A.," "Enquirer," and so on. By attention to this request much confusion would be avoided. Correspondents are asked to write upon one side of the paper only.

G. asks what would be the usual capitation fees for attendance and medicines at an industrial school five miles distant, the average number of boys being about sixty-five.

THE CAUSES OF FAECAL BALL-FORMATION.
AINSWORTH asks why in some cases of constipation the faeces assume the shape of hard, round balls?

\*\* This condition is believed to be due to (1) prolonged retention of faeces in the large intestine, causing (2) absorption of liquid and shrinking of the bulk of the faecal contents; and (3) moulding of the dry residue in the sacculi of the large bowel. It is often associated with the spasmodic form of constipation and the discharge of mucus.

THE TREATMENT OF PNEUMONIA.

DR. F. PORTER (Edinburgh) writes: I have read with interest the discussion on pneumonia in the British Medical Journal, and as the treatment is of great importance I should be pleased to hear from Dr. Lees or Dr. Barr why the ice treatment has superseded the treatment by hot linseed meal poultices, and if the former mode of treatment has diminished the death-rate from the disease, as to my mind the latter mode of treatment is the more physiological one. I should be also glad if Dr. Barr will state his reasons for applying an icebag to the abdomen rather than the chest, and if he would apply an icebag to the chest in a case of peritonitis?

Salivation in Paralysis Agitans.

D. R. G. asks for suggestions for the treatment of "continual running at the nese and mouth" in a case of paralysis agitans.

\*\_\* The treatment which is likely to be effective is that which on the whole gives as good, if not better, results than any other in the treatment of the general condition-namely, the administration of belladonna or duboisine. The former is, perhaps, best given in the form of the liquor atropinae sulphatis in doses of m2 three times a day, and the latter as duboisinae sulphatis in doses of  $\frac{1}{200}$  gr. three times a day, which may be gradually increased in each case.

TREATMENT OF OBSTINATE SCABIES.

F. Q. writes: About two and a-half years ago, a gentleman of independent means and well connected consulted me for scabies; he had the acari in almost every part of his body. He had been thus afflicted for two years. He had, he said, consulted every dermatologist of any note both at home and abroad, but no advice benefited him. I suggested various remedies, but he told me he had tried them all. I persuaded him to recommence his trials, he did so with no good effect, and after a few weeks I lost sight of him as he left my district. Now another case has cropped up like this—a lady, who, like the other patient is of exceptionally cleanly habits and moving in good society. She has been similarly afflicted for two years, and has been a paying patient in a hospital under one of our best dermatologists. She has given her complaint to several people, to her son on two occasions when he paid her a short visit, but a free application of sulphur ointment promptly cured him. I have tried "everything" with her, from mercurial vapour and potassium sulphide baths to Vlemincky's solution, the latter allays irritation temporarily only, but nothing kills the acari. At the present moment she is salivated (at her own request), but with no good results. I wonder if any member of the Association can suggest a cure for this case and assist me in curing a state that is almost on a par with that of being "a leper." being "a leper.

## ANSWERS.

SOUTH AFRICAN.—The information can be obtained from any book on elementary physiology, or from one of the many books on first aid. Warwick and Tunstall's *First Aid*, third edition (Bristol: John Wright and Co. 1903. 28. 6d.), will be found useful.

(A, A, -(1)) The mental condition of a cretin, aged 37, even if subjected to thyroid treatment, would certainly justify certification under the

designation of "a person of unsound mind," that is, a person whose mind does not act in a healthy manner. (2) An institution for imbeciles—such as Earlswood—would probably receive such a case on about the payment named: failing this, application might be made to St Tuke's Hesnital London F.C. St. Luke's Hospital, London, E.C.

W. D. G.—Aesculin, a glucoside obtained from the horse chestnut, yields a solution with a similar fluorescence to quinine, but we have no knowledge of its therapeutic properties. The fact that quinine hydrochloride and quinine hydrobromide yield non-fluorescent solutions may be noted. The bitterness of quinine may be imitated by means of infusion of quassia.

#### NOTES, LETTERS, Etc.

HORSE DUNG IN THE STREETS.

DR. PERCY NEWELL (Bexhill), while expressing his admiration of the ingenuity that Dr. Calantarients has displayed in designing his automatic dung-trap, writes to express the opinion that not one horse in fifty would permit such an apparatus to be attached to the britchen strap and that the system is impracticable.

ERRATUM.—In the paper by Professor Byers on Glandular Fever, in the British Medical Journal of January 9th, p. 71, line 4 from bottom, for "none of the cows" read "none of the cases."

BRITISH MEDICAL JOURNAL of January 9th, p. 71, line 4 from bottom, for "none of the cows" read "none of the cases."

LETTERS, COMMUNICATIONS, ETC., have been received from:

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# BOOKS, ETC., RECEIVED.

New Conceptions in Science. By Carl Snyder. London and New York: Harper and Bros 1994 7s. 6d.
The Full Solution of the Sewage Problem. By W. D. Scott-Moncrieff. Condon: Sanitary Pubhshing Company, Limited. 1994. 6d.
Permanent Cure for Stuttering By Theodore Jacobs. London: The Church Agency, Limited.
The Value of Ureteric Meatoscopy in Obscure Diseases of the Kidney. By E. Hurry Fenwick. London: J. and A. Churchill. 1994. 6s. 6d.

\*\*In forwarding books the publishers are requested to state the selling viscolar problems. New Conceptions in Science. By Carl Snyder. London and New York: Harper and Bros 1994 7s. 6d. The Full Solution of the Sewage Problem. By W. D. Scott-Moncrieff. London: Sanitary Publishing Company, Limited. 1994. 6d.

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