

### National Hearing-aid

SIR.—In a letter (June 12, p. 1154) "Hearing-aid Wearer" gives examples supporting her claim "that very great changes are required in the training of those who fit hearing-aids to new wearers and of those responsible for their maintenance." She cites several preventable difficulties leading to acute distress which she and others have met with in their endeavour to mitigate their great handicap.

It is because I sympathize with her so sincerely that I call her attention to an article by Mr. R. Scott Stevenson (May 22, p. 990) on the "Working of a Hearing-aid Clinic." She will there learn that a hearing-aid clinic such as she demands is actually in existence. To quote the article in question, "The Metropolitan Ear, Nose and Throat Hospital started its Hearing-aid Clinic in the spring of 1937 in conjunction with one of the afternoon out-patient clinics." In spite of the setback occasioned by the outbreak of war it has met with such success that, the article continues, it "at present occupies four rooms, works to an appointment system, and is open every day from 9.30 a.m. to 5 p.m. (often later), except on Saturdays, when its hours are 9.30 a.m. to noon." Since no one can do good audiometry "without knowledge of the methods available and the problems to be met" (ibid.) the hospital has not only its own trained audiometricians, it also trains others. This instruction entails in addition to a sound technique a real understanding of the special problems of the deaf and wisdom in their handling. It follows that the audiometricians trained in this way have a practical grasp of the best method of helping the patient to choose the best hearing-aid. As Mr. Scott Stevenson pertinently remarks in the same article, "Comfort in hearing is as important in making a choice as is clearness."—I am, etc.,

London, W.1.

HILDA WEBER.

### Biography of Banting

SIR.—The review of the biography of Sir Frederick Banting (June 5, p. 1084) I read with considerable distaste. In the first place as a review and criticism it is of no literary merit whatsoever, and secondly it gives the intending reader no idea of the real substance of Lloyd Stevenson's book. I have recently read this book and found in it all that I could possibly want to know of Banting and his achievements. In particular I feel that Dr. Stevenson has given us a very clear picture of the basic character of Banting and has revealed him as a simple human being with many of the faults and a few of the virtues that go to make up the average type of individual. Dr. Stevenson, I feel, has stressed this particularly because it must be remembered that at the time of, and for a while after, the discovery of insulin Banting was a national hero and was acclaimed as a saviour of mankind, particularly by the western world, and he describes so well the reactions of Banting to the exalted position in which he was placed. He also gives us a clear insight into the non-scientific side of Banting's mind, and the descriptions of the painting expeditions and the editing of Banting's travel diaries are a delight.

None of this has been mentioned by your reviewer and is, in my opinion, a serious omission, for apart from his discovery of insulin Banting was a most interesting and very human character.—I am, etc.,

London, S.W.19.

GEOFFREY FRENCH.

### Viennese Twilight

SIR.—May I say a few words in support of Dr. B. Aschner's constitutional therapy, which he defends in a letter in the *Journal* of May 22 (p. 1002)? Approximately 15 years ago, after his *Technik der Konstitutionstherapie* appeared, he was invited by the Medical Society in Bratislava (Czechoslovakia) to give a lecture, and there he was strongly attacked by two leading physicians for his "unscientific" views. Then I rose to speak, reporting on some successes which I attained by Aschner's methods in a few cases of psychosis and nervous organ complaints. Official psychiatry in Vienna deemed it a scientific duty to reject Aschner's suggestions, as well as to deny his right to discuss the treatment of mental disorders, since he was lecturer in gynaecology. Nevertheless, not a few neuro-psychiatrists and physicians did employ some of his methods.

However small the number of cures achieved by Aschner might have been, they concerned patients of a large variety in whom customary clinical treatment had utterly failed. We may or may not accept the view that emetics, drastic laxatives, hydrotherapy, and bleeding rid the organism of toxic substances; undeniably, for the unbiased observer, these measures do seem to work in some cases.

For the psycho-analytically minded physician an alternative or additional explanation offers itself. All the procedures mentioned stimulate organs and functions which we must regard as the somatic contributors to emotionality. The significance of affective cathexis of organs need not be particularly stressed in this era of psychosomatic medicine. Likewise, the fundamental role of the affect-ego (the perception of the self by feeling) in mental health will be before long generally acknowledged. So it is possible to approach Aschner's suggestion from an angle that strikes one as more modern than the idea of crude detoxication.

No doubt the impression made by Aschner's publications on the mind of a modern physician might create confusion; one can hardly rid oneself of the feeling that what he advocates is a return to primitiveness. This, however, is perhaps an emotional reaction rather than an intellectual; and the psycho-analyst is suspicious of such responses, even if they come from excellent physicians.—I am, etc.,

London, W.1.

S. Lowy.

### Test of Death

SIR.—In Dr. A. P. Luff's *Textbook of Forensic Medicine and Toxicology*, London, Longmans, 1895 (vol. 1, p. 40), what I have found a very useful test is described—that it is impossible to press the pupil out of its circular shape during life. A medical man is not often present at the actual time of the death of a patient, but I have found this test very useful when I have been there. On one occasion a nurse said to me, "He has gone," but as I could not press the pupil out of its circular shape I said "No." The patient breathed again once and then I could press the pupil out of its circular shape. There was no further respiration.—I am, etc.,

Nailsworth, Glos.

G. P. BLETCHLY.

### Chicken-pox with Paralysis of Leg

SIR.—I think that this unusual combination is worthy of record. A male child, aged 4, started with a mild attack of chicken-pox, which is epidemic in this area at present. There were apparently no constitutional symptoms. Six days after the onset of the rash he complained of inability to stand up, and examination revealed an almost complete paralysis of the left quadriceps group of muscles. The knee jerk was normal throughout. There was no rash to suggest an associated herpes zoster with motor paralysis. Pain was not complained of and there were no constitutional symptoms. The following day there was considerable improvement, and on the next day motor power was apparently normal. A lumbar puncture was not done. Three weeks later there was no evidence of motor weakness.—I am, etc.,

St. Helens, Lancs.

JAMES KAY.

### Doctors and Clergy

SIR.—The subject of co-operation between doctors and clergy was discussed at the Annual Conference of the Church of England Hospital Chaplains Fellowship which was held recently at St. Leonard's L.C.C. Hospital, Shoreditch. The Rev. F. S. Sinker, himself a doctor, pressed for a closer understanding among the rank and file of the two professions. While he admitted faults on the part of the Church, notably in giving insufficient training for hospital chaplains, he claimed that the priest's ministry is concerned not only with giving consolation but also with the actual conquest of disease. Doctors could help the work of chaplains by discussing cases with them, giving them the prognosis, indicating anything that might retard recovery, and agreeing on the chaplain's lines of treatment. The chaplain might come across facts concerning a patient's social background or moral condition which might have considerable influence on the course of treatment prescribed. By conversation and by the use of the Sacraments in