

A single lesson in relaxation before sailing will produce the desired result. Augmentation of undesirable neurone energy is cut down in two ways: the relaxation of abdominal roof and wall minimizes sense impressions from, and circulatory disturbance in, the abdomen, and anxiety is diminished by the increased intellectual discrimination and by the sense of power to use a credible and provable means of diminishing discomfort. The same prescription applies to the discomfort of foetal kicks in late pregnancy, to vomiting in the first stage of labour, and to car-sickness.—I am, etc.,

Ilford, Oct. 25th. W. THOMSON BROWN, M.B., Ch.B.

Avitaminosis

SIR,—We note that Dr. E. J. Wright, in an article in the *Journal* of October 10th (p. 707), states that "no note of a vitamin A concentrate being used" was made in the paper by us to which he refers. That is so, but in point of fact we treated seven cases in the stage of subacute combined degeneration of the cord, three of which also showed the epithelial lesions of the early stages of the disease, with 2 oz. of cod-liver oil daily for seventeen days followed by injections of 2 c.cm. of radiostoleum daily for a further week. There was no appreciable improvement in any of the signs or symptoms, epithelial or other. Radiostoleum was the vitamin A concentrate recommended by Dr. Wright in a previous paper.

Dr. Wright also states that we made no allowance in a certain experiment for storage of vitamin A in the body. If he will refer again to our paper he will see we found that a sample sixty of the cases of the epithelial disease became quite well on the addition of marmite and of no special source of vitamin A to the diet, so we saw no reason for theorizing about the storage of vitamin A in the body.

We have little doubt, however, that Dr. Wright is often dealing in Sierra Leone with a "polyavitaminosis"; nor have we disputed this.—We are, etc.,

J. V. LANDOR.
R. A. PALLISTER.

London, S.W., Oct. 19th.

Blood Groups and Paternity

SIR,—As the one who carried out the blood-grouping tests in the case of disputed paternity referred to by Dr. John C. Thomas in the *Journal* of October 24th (p. 844), I am glad to have the opportunity of publicly expressing my disappointment at the fact that the requisite sera for testing for M and N types are not readily obtainable in London. When I found that both mother and child in the case in question belonged to group A, while the putative father belonged to group O, I decided to test for the M and N factors. I discovered that the only laboratory in London that had fresh sera for these tests was the Galton Laboratory at University College, but they refused to part with them for medico-legal purposes. I was referred by that laboratory to the pathological laboratory of St. Mary's Hospital, but I was informed by the latter that they had no fresh sera in stock, and that it would take some days to get such sera. As the appeal at the Hertfordshire Quarter Session was about to be heard before such sera would be ready the test had perforce to be abandoned.

Perhaps this letter would stimulate some of the more important laboratories to keep these sera in stock.—I am, etc.,

London, W.1, Oct. 26th.

W. M. FELDMAN.

Typhoid Fever Carriers

SIR,—Dr. W. G. Aitchison-Robertson (*British Medical Journal*, October 10th, p. 739) mentions the disgust of "some of our Eastern friends" at the "filthy habits of our people" who do not wash hands or anus after a visit to stool. In a paper in a health journal ten years ago I wrote:

"One lesson we might learn from the Indians: they are surprised at the lack of cleanliness among Europeans, who use nothing but dry paper to cleanse themselves after a visit to stool. Many years ago (in 1900) an Indian doctor told me this, and since that time I have always provided myself with a piece of well-wetted paper for use on these occasions. I strongly recommend this simple reform."

A few days after the appearance of this article a visitor called to show me a rough paper-wetter he had devised for use in w.c.'s. Together we worked out the details, and we evolved a simple and practical device to be fixed to the wall and to take the standard toilet roll. The paper is drawn over a roller that wets it (except the edges). If a dry piece is desired the paper is raised so that it escapes contact with the roller.

The inventor interviewed a number of firms that should have been interested—stores, makers of toilet rolls, etc.—but he was unable to induce any firm to take it up. Since that time (1927) I have had this paper-wetter in use; I should be sorry to be without it, but I am bound to admit that it has aroused practically no interest; persons using the w.c.'s in which it is installed seem to avoid using it as a paper-wetter; they prefer dry paper! The most hopeful way of introducing cleanly habits would be to teach young children, but any special apparatus would probably prove unsuitable for schools because the children would be sure to "play monkey tricks" with it. I am, however, strongly in favour of an educational drive, and I suggest it might be introduced as a part of the newly announced movement for physical training.—I am, etc.,

London, W.1, Oct. 20th.

A. C. JORDAN.

Sanatorium Treatment in England

SIR,—Dr. Gurney Champion's letter (October 10th, p. 740) was doubtless intended to correct a mistake, and to call attention to the services of Dr. Jane Walker, without any intention of belittling the good work of Dr. Bardswell, who already had a distinguished sanatorium record when appointed at Midhurst.

Although originally a British notion, first advocated (1747) in Scotland (Bulstrode, Report of the Medical Officer to the Local Government Board, 1908, p. 119), and first carried out by Bodington near Birmingham soon after 1840, the modern inspiration for sanatorium treatment came from Dr. Otto Walther of Nordrach Colonie, and from the rival school of Brehmer and Dettweiler. Dr. Jane Walker and Dr. F. W. Burton-Fanning deserve credit for their experimental sanatoria at Downham Market in 1892 and at Cromer in 1895 respectively, of which the former has resulted in the East Anglian Sanatorium with its satellites, the latter in the Mundesley and Kelling sanatoria.

Most of the sanatoria for the middle classes were more or less founded after Walther's ideas. He had far less to do with the "working class" sanatoria, as he did not believe in cure from a few months' sanatorium treatment. Several of the early British sanatoria for the middle classes were founded by his patients or assistants, including Nordrach upon Mendip (Dr. Thurnam, 1899), Linford (Drs. Mander Smyth and Felkin, 1899, *not* 1897), Pentyffryn Hall (Dr. Morton Wilson, 1900), the Vale of Clwyd Sanatorium (Drs. Crace-Calvert and Fish, 1901),