

Sir Henry Gauvain telephoned the next morning that there was no doubt whatever about the diagnosis, and I was able to supply him with the seventeen doses necessary to immunize the non-immune contacts, and no further case occurred.

I have been able in my own district not only, as I have said before, to keep the hospitals going, but also to deal with private cases where small children or invalids were at risk. My serum has on each occasion been supplied by volunteers from the Rover Scouts. They have been provided with a certificate over the seal of my council commemorating their good deed. I tried to arrange with Lord Baden-Powell that there should be some decorative reward for such services as these, which are of inestimable value but which were not contemplated when the scout movement was inaugurated. The committee of the Scout Association considered the matter, and despite an early enthusiastic reception of my approaches the final resolution was that until the profession itself made a call for the service there was not sufficient evidence for them to start a campaign.

Surely in the circumstances it is time the profession utilized the information at its disposal and also utilized the services which would undoubtedly be forthcoming from the Rover Scouts provided the mind was made up and the application made for assistance. Unfortunately it seems hardly to be recognized what a scourge measles really is. Those of us in the public health service have year after year to chronicle the fact that the deaths from measles and whooping-cough exceed those of all the other infectious diseases put together. It is time the profession made its voice heard in order to do something to wipe out the scourge of measles.—I am, etc.,

Public Health Department,
Hounslow, Oct. 1.

ELWIN H. T. NASH.

SIR,—The recent article by Sir Kaye Le Fleming (*Journal*, September 25, p. 612) and Dr. Sinclair Miller's letter (October 9, p. 725) are apt to give the impression that adult serum is useless in the prevention of measles.

My own experience with fifteen cases of children under the age of 8 is very much to the contrary. All were given from 7 to 10 c.cm. of parents' serum from blood taken the day before, and all had been in intimate contact with infected brothers or sisters in country cottages. One child developed the rash three days after inoculation, which in this instance was obviously given too late. Of the remaining fourteen two had very mild attacks with pyrexia for two days, and the rest escaped. The discrepancy may easily be explained by the difference in the ages, and therefore weights, of the subjects. I suggest that a dose of 3 c.cm. per stone weight would protect if given before the sixth day after exposure, and 2 c.cm. per stone weight might have prevented the occurrence of otitis in three of the nineteen cases inoculated early in the incubation period.—I am, etc.,

Finchampstead, Berks, Oct. 4.

E. BILLING.

Endotracheal Anaesthesia

SIR,—With some diffidence I enter the controversy regarding the use of endotracheal anaesthesia in thyroid surgery. As one of the anaesthetists who has given some thousands of anaesthetics for Mr. Cecil Joll for thyroid cases, the majority being by the endotracheal route, I can state that we have found that many of the disadvantages put forward against this method do not appear in actual practice. There is undoubtedly a division of opinion as to the desirability of using endotracheal tubes

in thyroid work as a whole, but most anaesthetists and surgeons would agree, I believe, on the advantages they offer in cases with obstruction to the airway by pressure on the trachea, and especially in cases of malignant goitre. It is possible that the prejudice against an endotracheal tube dates from the time when the stiff, unyielding type of tube was used, before Dr. Magill introduced the soft rubber catheter.

While I would make no claim that an endotracheal tube is essential for all thyroid work, it seems going to the opposite extreme to deny to all thyroid patients—as was suggested by Dr. Ivor Lewis in his article of September 25—the benefits which go with endotracheal anaesthesia.—I am, etc.,

London, N.W.3, Oct. 9.

CLAUDE W. MORRIS.

Spinal Anaesthesia for Caesarean Section

SIR,—I was interested to read Dr. Herbert Spencer's letter in the *Journal* of October 9 (p. 723), on spinal anaesthesia for Caesarean section, but I cannot let his opinion pass unchallenged. I have used spinal anaesthesia for Caesarean section for many years and am satisfied with its advantages, not only where ordinary obstetric indications are present but especially when heart disease or lung disease is present. My anaesthetist, Dr. J. C. A. Norman, and I have found it free from danger under the technique we have evolved. We have never yet found a fall in blood pressure. The technique includes (1) premedication, and (2) the use of spinocaine—lighter than cerebrospinal fluid—as the anaesthetic, which is given with the most rigid antiseptic precautions and with meticulous attention to many details. We are convinced of the safety and advantages of this method.—I am, etc.,

Bournemouth, Oct. 9.

S. GORDON LUKER.

Indications for Induction of Abortion

SIR,—I should like to add my support to Dr. J. H. Hannan's plea (October 9, p. 726) for legal sanction of induction of abortion in cases of incest and rape. The amount of wretchedness caused by these pregnancies has to be seen to be fully believed.

Some time ago I was asked for a second opinion on a girl of 16 who three months previously had been assaulted on her way home one evening by an unknown man. By her struggles she succeeded in preventing penetration, and the sexual act was limited to an extrusion of semen at the orifice, but pregnancy ensued. On examination the hymen was intact. The parents and the girl were distraught, but physically she was perfectly fit and, with the law as it stands, I had to decide against termination.

Admittedly, this was an unusual case, but it was definitely against the public interest for that pregnancy to continue, and yet the law makes no provision for such. Like Dr. S. W. Wright, I trust that the law will never be altered so radically as to include all unwanted pregnancies; but, in like manner as the law of divorce has recently been widened, so the law of abortion should, and indeed must, inevitably be amended to include pregnancies arising from incest and rape.—I am, etc.,

London, W.C.1, Oct. 11.

W. G. BURNS.

SIR,—If Dr. F. M. R. Walshe would restrict his letter (October 2, p. 678) to facts, his criticisms might be helpful. But when he reads my thoughts, not only "bluntly" but inaccurately, and comments on the result, he is on much less sure ground. In fact, the conclusions that he draws are entirely unwarranted. Far from there being "an