

Medical News

A series of twelve weekly lectures on "The Psychology of Frustration and Fulfilment" will be given in Caxton Hall, Caxton Street, S.W., at 5.15 p.m. On Oct. 5, 12, 20, and 27 Miss Anna Freud will lecture on "Instinct Fulfilment and Frustration in Education." On Nov. 3, 9, 16, and 23 Miss E. N. Rooker (late principal of Dr. Barnardo's Staff Training School) will lecture on "Practical Application in Childhood." On Nov. 30, Dec. 7, 14, and 21 Prof. John MacMurray (London University) on "Social Sources of Frustration and Fulfilment." Tickets for the course, £1 (seats reserved until 5.10 p.m.), should be secured in advance from the Lecture Secretary, Provisional National Council for Mental Health, 39, Queen Anne Street, London, W.1. Single tickets (so far as accommodation permits) 3s. 6d. each. These lectures are especially addressed to those with social and educational interests.

The nineteenth Norman Kerr Memorial Lecture will be given before the Society for the Study of Inebriety on Tuesday, Oct. 5, at 4 p.m., in the Meyerstein Lecture Hall of the Westminster Hospital Medical School, Horseferry Road, S.W. The lecturer is Dr. A. Ninian Bruce and his subject is "Alcohol and Avitaminosis."

The annual general meeting of the Middlesex County Medical Society will be held at the Middlesex Guildhall, Westminster, S.W., on Tuesday, Sept. 28, at 5.15 p.m., when Dr. T. O. Garland will give an address on "Changing Medicine," which will be followed by a short discussion. Visitors, including members of the American and Canadian Forces at present in this country, will be welcome.

On Tuesday, Sept. 28, at 4.30 p.m. in the Council Room at Peter Jones', Sloane Square, Dr. J. Ramsbottom, Keeper of Botany, British Museum (Natural History), will give a talk on edible fungi, illustrated with coloured lantern slides.

A film of medical field work in the Russian Army will be shown at the Royal College of Surgeons of England, Lincoln's Inn Fields, on Friday, Oct. 8, at 4 p.m. Prof. S. Sarkisov will explain the main features of the film, and members of the medical profession are welcome to attend.

A series of lectures on national health has been arranged by the Royal Institute of Public Health and Hygiene, at 26, Portland Place, W., on Wednesdays, Oct. 13 to Nov. 17, at 3.30 p.m. Those wishing to reserve seats should apply to the Secretary at the above address.

The editor of *Transatlantic* satisfactorily answers all the questions that come to mind on seeing an entirely new periodical at a time when paper is severely rationed, and that is high praise from a contemporary. More than that, the first issue promises to achieve its object, which is to help the British public to a better understanding of American affairs and American life, but not by making propaganda. The material is presented objectively, even in the two articles on Mr. Cordell Hull and Senator Ball. Contributions like "What Geography does to America," "America and the Pacific," and "Who Speaks for America?" not to mention the excellent illustrations of "Small Town America," should do much to counter the impression engendered by the cinema that Hollywood is America. *Transatlantic* is an independent journal; it has no subsidy and is subject to no outside controls. Mr. Geoffrey Crowther is the editor, and it will be published each month by Penguin Books, Ltd., 110, St. Martin's Lane, W.C.2, price 1s. We have one complaint, and that is against the appearance of such a monstrosity as "beautician" in the caption on page 30 of the first number; it cannot be excused on the ground that it is copied from the illustration.

Manufacturers of insulin, in consultation with the Diabetic Association, have decided to standardize the colour and style of the packings so that in future type and strength will be uniform irrespective of maker. Steps have also been taken to eliminate unnecessary deterioration in pancreas during transit from cold storage to manufacturing plant. The number of diabetics in this country shows a yearly increase, and is now estimated at 200,000, but they do not all take insulin. The Ministry of Supply states that adequate supplies of insulin have been ensured both for the home market and for liberated countries.

The Ottawa Correspondent of the *Times* reports that the Dominion Government has approved expenditure for establishing plants and equipment in Montreal and Toronto for the production of penicillin. The appropriation just made will cover the cost of creating the industry and that of the production of the first 26,000,000,000 units of penicillin for use by the Canadian armed Forces. The new industry, employing 250 men and women, will come into operation next February.

Dr. Elliott Proctor Joslin, the eminent authority on diabetes, has been awarded the Distinguished Service Medal of the American Medical Association.

Letters, Notes, and Answers

All communications in regard to editorial business should be addressed to THE EDITOR, BRITISH MEDICAL JOURNAL, B.M.A. HOUSE, TAVISTOCK SQUARE, LONDON, W.C.1.

ORIGINAL ARTICLES AND LETTERS forwarded for publication are understood to be offered to the *British Medical Journal* alone unless the contrary be stated.

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ANY QUESTIONS?

Bismuth for Threadworms

Q.—*Treatment of oxyuriasis by bismuth meal would appear to be the best course, since the bismuth, by finding its way into every sacculle and crevice of the intestine, is able to reach the immature forms in the duodenal mucosa; whereas other remedies, like gentian violet, only exert their effect in the caecum. But there is great variation in the dosage recommended. One authority suggests giving 1 to 1½ oz. bismuth to a child of 5, and 2 oz. to older children; the meal to be repeated once a week for 3 or 4 weeks. At the other extreme I find a dose of 20 gr. t.d.s. recommended for adults. Now what is the optimum dose? How many doses are needed for a cure? And, in the case of the larger "meals," how are they best administered?*

A.—Infestation with threadworms may be treated with bismuth oxycarbonate 120 gr. stirred up in water. A second dose is taken three hours later and a purge—e.g. calomel—is given at night. The process is repeated the next day. The dose for children from 7 to 15 years is approximately three-quarters of the above. For children under 7 it is half the adult quantity. Strict accuracy in the dosage of bismuth given by mouth is quite unnecessary because the drug is not absorbed. Diphenan or phenothiazine treatment is much more efficacious, though with the latter drug the danger of toxic effects is considerable.

Tremors: Diagnosis before Treatment

Q.—*What is the diagnosis, prognosis, and treatment in the case of a man aged 69 years who has intention tremors and jactitations of his arms and hands. He has none in repose, no rigidity, festinant gait, or mask facies, is able to exercise freely, and his mentality is normal. The symptoms were at first more in the left than right arm and hand, but have gradually in the course of years become so bad that he cannot now raise a cup to his lips steadily and has trouble in shaving with a safety razor. Any excitement makes matters much worse, and he feels trembling all over. He has taken phenobarbitone on occasions, but does not think it gave him much help.*

A.—It is quite impossible to make a diagnosis here, for it would depend upon observation of the nature of the abnormal movements and the elicitation of physical signs of abnormality in the central nervous system, which must certainly be present. Most involuntary movements are made worse by excitement and eased by repose, and many of the conditions which give rise to involuntary movements late in life are progressive, so that it would be foolish even to hazard a diagnosis. The differential diagnosis would include arteriosclerotic Parkinsonism, cerebellar atrophy, olivo-fronto-cerebellar degeneration, and many of the degenerative processes which affect the basal ganglia. This is the kind of case where an expert diagnosis is essential before prognosis and treatment are discussed. I suggest a second opinion.

Frigidity

Q.—*A married woman aged 31 is complaining of loss of sexual desire and coldness towards any form of sexual intercourse. Her periods are normal. She has one child aged 2 years and is happily married. Stilboestrol seems to have no effect. In the male I have treated this sort of case with testosterone propionate and with success, but I should like advice regarding treatment in the female.*

A.—The condition is probably psychological, and might respond to psychotherapy. Testosterone therapy in the female tends to stimulate libido by increasing the size and sensitivity of the clitoris, but large doses over a long period produce hirsutism. Incidentally, though testosterone is useful in the male suffering from organic hypogonadism, it is of no value for psychological impotence.