

a competent person and examined within a reasonable time of collection, steps should be taken to determine the cause of the contamination and correct it. Even if the public health did not suffer the finished product might do so.

Effects of Swimming on Otitis

Q.—*In what otorhinolaryngological conditions should diving into a swimming-bath be prohibited?*

A.—The main effects of diving as opposed to swimming are those due to changes in pressure. The changes are effected mainly upon the middle-ear cleft via the eustachian tube and on the paranasal sinuses via their ostia. No one with an acute upper respiratory infection should ever dive, and it is to be discouraged in those who show an unusual tendency to recurring attacks of sinusitis and otitis media. In cases of chronic otitis media with perforation the infection is more likely to be reactivated by diving than by surface swimming.

Faded Ishihara Plates

Q.—*Ishihara charts for testing colour vision in school-children appear to fade after a few years. Is this detrimental to the results obtained?*

A.—Undoubtedly fading of Ishihara plates will decrease the accuracy of the test, but, unless the deterioration has been severe, the plates will still be useful for screening purposes. However, it would be advisable to retest any doubtful cases on a new set of plates or by some other method. The reliability of pseudoisochromatic plates is discussed by Sloan and Habel.¹

REFERENCE

- ¹ Sloan, L. L., and Habel, A., *Arch. Ophthalm.*, 1956, 55, 229.

Selective Weed-killers

Q.—*Are there any recorded cases of anaphylaxis or other disabilities caused by the inhalation of selective weed-killers for grass? I understand that many of these contain hormones which might perhaps have a physiological action if inhaled.*

A.—The weed-killers used on grass are normally watered on or applied mixed with a coarsely powdered fertilizer. The chances of direct inhalation are therefore very small. Many of these preparations smell strongly because they contain traces of chlorophenols. The "hormones" present are chlorophenoxy acetic acids which affect the growth of the plant cells but are without any such action on either mammalian cells or whole animals. An alternative and much better name is plant-growth-regulating substances.

It is possible that some of the thousands of people who handle this type of preparation in their own gardens may become sensitized to one or other of the ingredients of such selective weed-killers. However, these chemicals are among those used in the largest quantities in agriculture and they certainly have not gained a reputation as causes of sensitization.

Contact with Rubella in Pregnancy

Q.—*Should women under 12 weeks' gestation who have had rubella receive gammaglobulin if they have been in contact with a case of rubella?*

A.—This is a difficult question to answer, because, first, a patient's history of having had or not having had rubella in childhood may be inaccurate; secondly, the incidence of second attacks of the infection in adults is not known, but that second attacks do occur is becoming known to the lay public; and, thirdly, the amount of gammaglobulin at present available is limited. Gammaglobulin is generally not given to women in the circumstances detailed, but if ample supplies were available many, including myself, would feel that it should be given in order to prevent anxiety and to obviate

even a very small chance of the necessity of a therapeutic abortion having to be considered.

NOTES AND COMMENTS

Evidence of Mental Condition in Divorce Cases.—Dr. P. H. ADDISON (The Medical Defence Union, London W.C.1) writes: While not disputing your Expert's opinion (*Any Questions?* October 20, p. 1072) that a doctor in charge of "informal" patients may be expected in the interests of justice to give in these cases the bare facts necessary for the petitioner to pursue the divorce, I must point out that it is the doctor's ethical duty first to obtain the patient's consent. In most cases the patient will be rational enough to understand the meaning of consent, but in others the doctor must obtain the consent of the patient's guardian *ad litem*. To obtain the consent of the patient or his representative is not only an ethical duty but also a commonsense precaution. There is no doubt that if a patient could show that his medical adviser had, by breach of professional confidence, brought upon him a loss which could be assessed in money the patient would have a right of action. I realize that should consent be refused the doctor can be compelled to give evidence under subpoena. Justice must be done. But a doctor giving evidence under subpoena is protected. A doctor voluntarily disclosing medical information without the patient's consent is breaking the rule of professional secrecy and is vulnerable.

OUR EXPERT replies: Dr. Addison's interesting supplementary is further evidence of the wide context of the original question on the extent of co-operation which divorce petitioners are entitled to expect from consultants in charge of "informal" patients. My answer still stands that the bare facts necessary for the petitioner to pursue the divorce should be given. I do agree that whenever the patient is rational enough to understand the meaning of consent, or has a guardian *ad litem*, consent is a desirable protection. I would not go so far as to say that the doctor who without consent gives no more information than he can be compelled to give on subpoena would be liable to the patient in damages.

Sudden Immersion in Cold Water.—Dr. R. THOMPSON (Pinner, Middlesex) writes: With reference to the reply to the question on this subject ("*Any Questions?*" November 17, p. 1342), it is I think generally recognized that the dangers of sudden immersion in cold water can be almost entirely obviated by a preliminary douching of the head and neck before diving into or entering the sea or swimming baths. This is due to the fact that sudden immersion of the body, especially the head and neck, in cold or even lukewarm water may cause acute respiratory embarrassment (or even apnoea) with the grave danger, even in strong swimmers, of a sudden inhalation of water and further embarrassment, apnoea, or panic. The head and neck and face should be thoroughly doused until breathing is completely easy and regular.

OUR EXPERT replies: This is indeed sound advice, but it is by no means certain that all cases of death from sudden immersion in cold water are due to the inhalation of water following respiratory embarrassment. Experimental immersion on volunteers in cold water has resulted in cardiovascular changes without such inhalation. Facilities for cold douching may not always be available and would rob the plunge of its invigorating stimulus. One cannot imagine this practice being introduced between the steaming-hot phase of the sauna bath and the dive into the ice-cold fjord.

Correction.—In "*To-day's Drugs*" of December 8 we stated incorrectly that triacetyloleandomycin was not marketed in the United Kingdom. It is in fact on the market under the name of "evramycin" (Wyeth).

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