

approximately 72% water, which renders it highly incom-  
bustible: a temperature of 1,500° C. is required for the  
destruction of the body at cremation.

It is probable that the greatest publicity to the theory of  
spontaneous combustion was given by Charles Dickens in  
*Bleak House*, but in the preface to that volume, dated August,  
1853, he admits that "the possibility of what is called  
spontaneous combustion has been denied since the death of  
Mr. Krook." Dickens stated at that time that there were  
about thirty cases on record, and cited several instances  
occurring in the eighteenth century. There is some support  
for the theory that bodies which have undergone extreme  
fatty degeneration are possibly unusually combustible and  
may act as the tallow of a candle, the wick being provided  
by clothing.

Death as a result of a conflagration is undoubtedly com-  
moner in chronic alcoholics than in the general public, but  
this is owing to the fact that the alcoholic does not take  
ordinary precautions against fire, such as extinguishing  
cigarette ends, guarding the fire, etc., and he is of course  
more liable than ordinary persons to fall into a fire. But  
the detailed investigations carried out by fire brigades into  
the cause of individual fires have not confirmed the belief  
that the chronic alcoholic has, of himself, been the site of  
origin. Spontaneous combustion has been put forward as  
a defence in murder cases, and on one occasion at least  
in the eighteenth century it succeeded, but the theory is  
now quite contrary to all scientific knowledge.

Gases may be formed within the intestinal tract which  
can be ignited on the application of a flame, but there is  
no evidence that such gases are spontaneously combustible.

#### Mepacrine for Rheumatoid Arthritis

**Q.**—Is mepacrine of value in the treatment of rheumatoid  
arthritis?

**A.**—Mepacrine has been reported to be of value in rheu-  
matoid arthritis in several papers which have appeared in  
the United States. No controlled series has yet been  
reported, but preliminary observations which have been  
carried out in this country have not proved to be encourag-  
ing. Such improvement as has sometimes been reported  
by patients has, on examination, seemed to be subjective  
rather than objective.

#### Percussion for a Painful Stump

**Q.**—What treatment is advised for constant pain and pins-  
and-needles in a forearm amputation stump? On inspec-  
tion the stump appears healthy. Local injection of the  
cervical sympathetic (with the production of a Horner's  
syndrome) has failed to benefit the patient, and he is now  
weary of hospital treatment. Would tapping the stump  
with a rubber hammer do any good, and, if so, could you  
please give details?

**A.**—Many of the paraesthesiae and pains experienced in  
amputation stumps or phantom limbs undoubtedly originate  
in neuromata in the stump. This is demonstrated by the  
temporary disappearance of such sensations when the nerves  
to the stump are blocked by local analgesia. Percussion  
treatment to the end of the stump is often effective in  
relieving these pains (see *British Medical Journal*, 1950, 2,  
68). It seems to render the neuromata insensitive and  
gradually converts them into painless scars. The patient  
must at first treat himself several times a day. For the  
lower limb a short length of broom handle (15 cm.) is  
fitted with a metal applicator at one end which is then  
pressed firmly against the tender neuromata and hammered  
with a heavy wooden mallet, gently at first, for 10 to  
15 minutes. The relief experienced is often quite startling  
to both patient and doctor. For the upper limb the  
patient may slap the end of the stump repeatedly on a  
smooth wooden table, but the better way is to use an electric  
vibrator, and these have become so popular that the Minis-  
try of Pensions now issues them on loan to certain patients.

This causes the neuromata to become insensitive—a trau-  
matic local analgesia—and the effects of such repeated per-  
cussion or vibration seem to be very effective in most cases.  
Incidentally the local analgesic effect of a vibrator used in  
this way makes it useful for a variety of other conditions  
in which local tenderness or even pruritus are prominent.

## NOTES AND COMMENTS

**Spinach.**—OUR EXPERT writes: Your correspondents Dr. J. E.  
and Mr. N. S. Bamji (March 21, p. 674) must be thanked for their  
useful review. Spinach is certainly rich in oxalic acid, and it is  
clear that it may adversely affect the absorption of calcium in  
rats when it is given in large amounts after concentration into the  
dry form. Indications that it is harmful to humans when con-  
sumed in reasonable quantities after cooking, however, are much  
less definite. The oxalic acid is largely soluble, and some may  
be discarded in the cooking water or exuded juice. Bonner *et al.*<sup>1</sup>  
have reported that a daily intake of 700 mg. of the acid has no  
ill effects on children receiving adequate amounts of calcium in  
their food, and less than this amount should be contained in a  
normal helping of the vegetable. From experiments with rats,  
Gortner *et al.*<sup>2</sup> have even suggested that oxalic acid may protect  
the teeth from etching caused by other acids, such as citric and  
phosphoric, which may be included in soft drinks. The teeth  
of Hawaiian natives are said to have deteriorated since they  
stopped eating taro, which is rich in oxalic acid. Iron is less well  
absorbed from spinach than from wheat, but the same finding  
appears to apply to kale and other green vegetables.

The progress of nutritional research has revealed objectionable  
features in many common foodstuffs. Wholemeal flour depresses  
calcium absorption on account of its high content of phytic acid.  
Cod-liver oil opposes vitamin E and can cause serious lesions of  
the muscles and brain in experimental animals. Cabbage contains  
a factor which opposes the action of thyroxine. Maize is asso-  
ciated with the incidence of pellagra. When eating a good mixed  
diet, however, we may include all these foods without ill effects,  
and the same immunity probably applies with spinach.

Perhaps the most alarming point raised by your correspondents  
is the tendency in some children for spinach to cause soreness  
round the mouth and anal region. It should certainly neither be  
given to young children in unreasonable quantities nor be forced  
upon them at all if not wanted. A watch should be kept for  
signs suggesting that it is poorly tolerated.

#### REFERENCES

- <sup>1</sup> *J. Pediat.*, 1938, 12, 188.
- <sup>2</sup> *J. Nutrit.*, 1946, 32, 121.

**Allergic Rhinitis.**—Mr. C. HAMBLEN-THOMAS (London, W.1)  
writes: I am sorry to see the proposal ("Notes and Comments,"  
March 7, p. 576) to revive the use of the long-discarded method  
of electric ionization in the treatment of hay fever. Apart from  
the suggestive effect with an electric method in this age of  
"electrotonics" I consider the treatment disappointing as well as  
harmful to the mucous membrane of the nose and likely to  
destroy the delicate hair cells which are so important; there is  
also often considerable pain. If an empirical treatment is to be  
used, simple cauterization with the electric point applied to a  
minimal area is preferable and considerably more effective. The  
area touched is not more than  $\frac{1}{4}$ -1 mm. in diameter and rapidly  
heals with normal tissue. But in all cases of hay fever a careful  
investigation of all factors is necessary and a correspondingly  
well-planned treatment carried out if the patient is to receive  
lasting benefit.

**Correction.**—Dr. S. D. MITCHELL has written to point out that  
he made no claims for the "curative" value of music at the  
recent conference on "Pictures, Books, and Music in Hospitals"  
(March 21, p. 683), but only gave examples of its value as an  
"ancillary in treatment."

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