

performed painlessly without any other palliative measures, such as local anaesthesia. This may be due in part to diverting the attention of the patient from the dental procedure and in part to suggestion. Background music is being increasingly used in dentistry to hide the high-pitched whine of air turbine drills.

REFERENCE

- ¹ Gardner, W. J., and Licklider, J. C., *J. Amer. dent. Ass.*, 1959, 59, 1144.

Foetal Risk in Overt Maternal Rubella

Q.—*What evidence is there that a pregnant woman may transmit rubella to the foetus without herself manifesting the disease clinically?*

A.—Congenital malformations may follow maternal rubella of any clinical degree, whether mild or severe. It is possible that the same is true of subclinical infections in the mother. Thus Coffey and Jessop,¹ in Dublin, found a malformation rate of 3% in the babies of pregnant women exposed to rubella. This rate is higher than "normal," although very much less than the 30% they found in the babies of pregnant women affected by the disease. On the other hand, Lamy and Seror,² in Paris, did not find that exposure carried any such increased risk of foetal malformation, but it may be significant that the exposed but unaffected pregnant women in their series had a high abortion rate. The place of maternal rubella in the aetiology of congenital heart disease was fully discussed recently in this journal by Campbell,³ and his conclusion was that "probably a mother who is herself immune to any overt manifestations of rubella may acquire the infection enough to risk damaging the foetus."

REFERENCES

- ¹ Coffey, V. P., and Jessop, W. J. E., *Irish J. med. Sci.*, 1959, 397, 1.
² Lamy, M., and Seror, M. E., *Bull. Acad. nat. Méd.*, 1956, 140, 196.
³ Campbell, M., *Brit. med. J.*, 1961, 1, 691.

Hazards of Electric Blankets

Q.—*Would enclosing an electric blanket in a polythene bag make it safe for use by an incontinent patient?*

A.—Electric blankets should certainly be preserved from moisture. A polythene bag would serve for this purpose if care was taken to avoid leakage into the blanket itself. The fire hazard from electric blankets is appreciable; 2,600 fires arising in this way were reported to insurance companies in a recent year and 20 deaths have been reported during the last three years. The risks are obviously greater for old people; it is therefore important that the blanket should not be switched on while the patient is lying on it.^{1, 2}

REFERENCES

- ¹ *Brit. med. J.*, 1960, 2, 1300.
² *Which?* October, 1960, p. 215

De Quervain's Disease

Q.—*A healthy young man aged 30 developed a generalized swelling of the thyroid after a mild attack of influenza. Four weeks later the swelling had gone. He had no signs of hyperthyroidism. Is this unusual?*

A.—It sounds as if this patient may have had subacute thyroiditis (de Quervain's disease). The disease is relatively uncommon, though mild cases may be missed. It usually starts with fever and is sometimes preceded by sore throat. In the early stages it could easily be confused with mild influenza. Soon the thyroid gland becomes enlarged and tender. The swelling subsides within one to two months, leaving no after-effects. The patient remains euthyroid. Investigations show a raised E.S.R., leucocytosis, and greatly diminished uptake of radioiodine. Steroid therapy causes prompt remission. The disease is probably of viral origin, the virus of mumps having been incriminated in some recent cases.^{1, 2}

REFERENCES

- ¹ Eylan, E., Zmucky, R., and Sheba, Ch., *Lancet*, 1957, 1, 1062.
² Felix-Davies, D., *ibid.*, 1958, 1, 880.

Test for Pregnancy

Q.—*What is the rationale of Lugol's iodine test for pregnancy? What degree of accuracy may be expected?*

A.—I have not previously heard of a specific pregnancy test using Lugol's iodine, and can only presume that it refers to the application of this preparation to the vaginal epithelium. The vagina stains brown with Lugol's iodine because of the glycogen contained in the superficial cells. The intensity of the brown staining is roughly proportional to the glycogen content of the cells and the latter varies with the amount of oestrogen in circulation. During pregnancy the glycogen content is raised, so a deep staining is to be expected when Lugol's iodine is applied. However, the amount of glycogen in the vaginal epithelium during pregnancy does vary from one woman to another, and from one time to another during pregnancy in the same woman. It may be added that deep staining occurs in any state of hyper-oestrogenism. The conclusion is that any pregnancy test which depends on the assessment of the intensity of the staining of the vagina with Lugol's iodine must be unreliable.

Speech-shadowing in the Cure of Stammering

Q.—*Has there been any research into the cure of stammering by preventing the patient, by means of muffling earphones, from hearing his own voice? Is there as yet any practical application of the results of the research on these lines, and can treatment be obtained?*

A.—The method referred to is based on some extremely interesting work carried out at the Imperial College of Science by Professor Colin Cherry and his colleague, Dr. B. McA. Sayers. It is based on communication theory, and ingeniously manipulates external acoustic stimuli so that self-monitoring by the stammering person is interfered with. The devices employed to effect this include simultaneous reading, reversed speech, separation of bone-conduction from air-conduction pathways, high- and low-frequency noise-making, and—for therapeutic purposes, most effective—speech-shadowing.

Professor Cherry's suggestions have been applied by a number of people, particularly Miss Pauline Marland at St. Mary's Hospital. An account of the use of speech-shadowing and the results obtained by this method can be found in the excellent article by Cherry.¹ There was a reference to it in *Nature*.² Those interested in closer study of this ingenious and stimulating procedure should consult Professor Cherry's numerous other writings on auditory speech feed-back. Professor Cherry's work harks back to Kern's studies, published in 1932, to which Cherry and Sayers refer.

REFERENCES

- ¹ Cherry, E. C., and Sayers, B. McA., *J. psychosom. Res.*, 1956, 1, 233.
² — and Marland, P. M., *Nature (Lond.)*, 1955, 176, 874.

Correction.—Dr. LUCY ROCHELLE writes: I should like to make the following correction to my medical memorandum, "Meningitis Due to a Soil Organism" (April 15, p. 1089). A soil bacterium was reported by the laboratory, and I unwittingly assumed that this was an autotrophic nitrifying bacterium. It was in point of fact a heterotrophic organism, probably of soil origin.

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