THE London office of the Italian State Railways and State Tourist Department (12, Waterloo Place, Regent Street, S.W.1) announces that the annual international visit of doctors to Italian health resorts will take place from September 5th to 21st. Among the places to be visited are San Pellegrino, to 21st. Among the places to be visited are San renegrino, Fonte Bracca, Acqui, Alassio, San Remo, Ospedaletti, Bordighera, Pietra Ligure, Nervi, Rapallo, Santa Margherita, Portofino, Viareggio, Montecatini, Monsummano, Chianciano, Fiuggi. The members of the party (limited to 200 in number) will travel by special train in Italy and will be accommodated at first-class hotels. A limited number of the families places in the tour are reserved for members of the families of participants. Italian doctors, speaking fluent English, accompany the tour and assist in the medical conference held at each centre. The charge for the tour, including cost of travel from Milan to Rome, railway and hotel expenses, will be lire 1,600 (about £15). Members will be granted reduced rate tickets from the Italian frontier to Milan and from Rome back to the frontier.

Ketters, Aotes, and Answers.

ORIGINAL ARTICLES and LETTERS forwarded for publication are understood to be offered to the British Medical Journal alone unless the contrary be stated. Authors desiring reprints of their articles published in the British Medical Journal are requested to communicate with the Financial Secretary and Business Manager, 429, Strand, W.C.2, on receipt of proof.

All communications with reference to advertisements as well as orders for copies of the Journal should be addressed to the Financial Secretary and Business Manager, 429, Strand, London, W.C.2. Attention to this request will avoid delay. Communications with reference to editorial business should be addressed to the Editor, British Medical Journal, 429, Strand, W.C.2.

Correspondents who wish notice to be taken of their communications should authenticate them with their names—not necessarily for publication.

for publication.

communications intended for the current issue should be posted so as to arrive by the first post on Monday or at latest be received not later than Tuesday morning.

THE telephone number of the British Medical Association and British Medical Journal is Gerrard 2630 (Internal Exchange). The telegraphic addresses are:

EDITOR of the British Medical Journal, Aitiology Westrand,

FINANCIAL SECRETARY AND BUSINESS MANAGER (Advertisements, etc.), Articulate Westrand, London.

MEDICAL SECRETARY. Mediscera Westrand, London.

The address of the Irish Office of the British Medical Association is 16, South Frederick Street, Dublin (telegrams: Bacillus, Dublin; telephone: 4737 Dublin), and of the Scottish Office, 6, Rutland Square, Edinburgh (telegrams: Associate, Edinburgh; telephone: 4361 Central).

QUERIES AND ANSWERS.

INCOME TAX.

Extension of Premises.

"H." bought a new house over a year ago, and, as there was no consulting room accommodation, had to build additional rooms at a cost of £700.

In our opinion, no portion of the £700 can be claimed as expenditure deductible for the purpose of income tax, Schedule D. Rule 3, applying to Cases I and II, Schedule D, is to the effect that "no sum shall be deducted in respect of . . . any sum expended for repairs of premises . . . beyond the sum usually expended for those purposes according to an average of three years. . . ." The exact meaning of that rule may be open to some doubt, but it is fairly clear that it would exclude by implication expenditure on adding rooms to an existing house. From a practical point of view, too, the £700 was capital outlaythat is, money invested to bring in returns over a future tract of time; "H." spent a certain sum in acquiring suitable premises, and it is immaterial that the total was laid out in two separate sums and not in a single payment for the final result.

LETTERS, NOTES, ETC.

IODINE IN WHEAT PRODUCTS.

IR. ALBERT E. PARKES, F.I.C., F.C.S., public analyst to the Metropolitan Borough of Poplar, has examined a number of specimens of wheat products to ascertain the amount of iodine present, with the following results:

White flour: Less than 1 per 5.00,000. Whole meal: 2.5 parts per 1.000 000 (17/100 gr. per lb.). Bran: 3.8 parts per 1,000,000 (27/100 gr. per lb.). Mid-ll.ngs: 0.6 part per 1 000,000 (1/50 gr. per lb.). Germ: 3 parts per 1,000,000 (26 100 gr. per lb.). Results expressed as iodine: Iodine × 1.2 = sodium iodide.

GALL STONES.

DR. DOROTHY A. DALY (Fairlight Sanatorium) writes: I have been interested in the correspondence regarding the age at which gall stones may be found. When a student in Trinity College, Dublin, a girl of 11 was brought into one of the Dublin hospitals as an emergency case of appendicitis. On opening the abdomen the trouble was located in the gall bladder, from which two fair-sized stones were removed. I almost think this establishes a record.

A NEW TUBERCULIN.

WITH reference to Dr. Lundie's paper, "A new tuberculin," in the British Medical Journal of February 28th (p. 405), Dr. A. W. Crawford (Bolton) has forwarded the following

Dr. A. W. CRAWFORD (Bolton) has forwarded the following criticism and queries:
(1) Which serum is used, human or bovine? (2) At what stage is it used—whether in the early stage, when bovine infection is predominant, or in the second stage, from 13 to 19, when there is a combination of human and bovine, or in the later stages, when the human only is found? (3) In one patient both were used with great benefit. To which preparation must the benefit be attributed? It is necessary to understand clearly the stage of the disease and the nature of the therefulin used. benefit be attributed? It is necessary to understand clearly the stage of the disease and the nature of the tuberculin used. (4) Dr. Lundie asks about a solvent for acid-fast substances associated with the bacillus. The coating of the bacillus consists of insoluble salts with animal matter, of which fat is a constituent. They are soluble in a solution of potash; acetic acid, in my opinion, is preferable to hydrochloric acid. (5) Dr. Lundie states that guinea-pigs are more susceptible to tuberculosis than man: which form, human or bovine?—a very important distinction. (6) Wherever tubercle is deposited there is associated with it the growth of fibrous material, which is nature's method of delimitation, and is of epithelial origin, as in cancer. If this encasing substance is sustained, calcification would ensue and tuberculosis receive a check. I should like to suggest to Dr. Lundie that this might be accomplished by the use of a properly selected tuberculin, combined with prepared juices of embryonic tissues. How far this may go to prevent the spreading of tuberculosis I cannot say, but I think it is a step on the way.

We have submitted this letter to Dr. Lundie, who writes:

We have submitted this letter to Dr. Lundie, who writes:

In reply to Dr. Crawford's very kind criticism, I use the word "tuberculin" in its original sense, which does not include serums.

(1) I have used both human and bovine preparations. (2) "Stage" here would be better expressed as "age incidence." I do not think it a useful guide to treatment, but agree that it is most important to understand both the type of infecting organism and the nature of the therapeutic agent. (3) Both preparations appeared to do good. (4) I did not ask, as I am sure about this point. The acid-fast material is mycol laurate, said to be held in the form of an emulsion in a protein substrate. I believe it is probably chemically united to protein. (5) I stated that man has a much greater natural resistance than guinea-pigs or rabbits. Bovine tuberculosis is always more virulent to these animals than to man, and I think the human type is sometimes so also. I believe that many children become immunized in course of time by a series of subinfective doses of tubercle bacilli, administered in all good faith in their milk. The majority of guinea-pigs or rabbits similarly fed would die. (6) There are no epithelial cells concerned in the process. Calcium salts penetrate tubercles with remarkable ease, despite their density and non-vascularity, but the impregnation with calcium experimentally has not been proved to have any beneficial value at all. I do not know what benefit embryonic extracts would confer, beyond causing protein shock, which would be better avoided.

GOATS AND COWS.

GOATS AND COWS.

DR. S. K. VINES (W. Hythe, Kent) writes: The old-style farmer has long believed that keeping a goat among the cows "prevents miscarriage." This is interesting in the light of recent contributions in your columns on the resemblance between B. melitensis and B. abortus. Goats would seem not to be subject to epizoëtic abortion. I do not know what proportion of them in this country carry, or have immunity from, B. melitensis. Probably the goat vaccinates the cow with, a dead culture.

WILLIAM LEVETT.

G. E. W. writes to point out that the last line on Levett by Dr. Johnson should run "His single talent well employ'd"—not "simple" as printed by inadvertence in our issue of April 11th (p. 705).

CORRECTION.

In our reference on April 11th (p. 722) to the fourth International Medical Congress of Industrial Accidents and Diseases at Amsterdam it should have been stated that the president of the Congress is Dr. P. H. van Eden of Amsterdam, and that Sir Thomas Oliver is president of the British executive committee. The Minister of the Netherlands is honorary president of the British executive committee. British executive committee.

VACANCIES.

NOTIFICATIONS of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 37, 38, 39, 41, 42, and 43 of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 40 and 41.

A short summary of vacant posts notified in the advertisement columns appears in the Supplement at page 183.