

Psoriasis and the Adaptation Syndrome

SIR,—I agree with Dr. F. L. Lydon (March 18, p. 668) in thinking that it would be wrong to adapt Professor Hans Selye's theories too completely to the problem of psoriasis, and agree, too, in thinking that infection (in predisposed persons) is at the root of the matter—with the accent on the sinuses. But I consider that infection acts on the calcium-vitamin D metabolism of the body and skin by impairing the action of the parathyroid glands, which are highly susceptible to this form of attack.

The undoubted familial incidence of psoriasis is, I think, concerned with place as well as race—the sunless place, the nervous race. For instance low lying, misty, sunless places, where little ultra-violet light struggles through to irradiate vitamin D into being on the sufferer's skin; and the insensitive, highly strung personality, with, perhaps, also a bony configuration of the face tending towards chronic sinusitis (a sinusitis easily acquired in the sunless place) and with an inherited inability, too, to absorb a sufficiency of vitamin D for his body's needs. This type of personality seeks, accepts, and stands up to responsibility, but shows the strain of this and also of repeated, but suppressed, irritation in waves of psoriasis at the sunless seasons of the year. It is hard to understand why this should happen unless repeated releases of adrenaline can also affect the parathyroids, or unless we accept the target-organ theory in its entirety, which I for one am not prepared to do.

I believe that freedom from strain, residence on hills, and vitamin D (in one large 150,000-unit dose)—not during the winter, but in the summer, when Nature gives it, from May to September—is the answer for the G.P., with of course all due attention to sepsis. The reason for the often disappointing results in vitamin D therapy is, I believe, due to the quick resistance-reaction of the body to this toxic vitamin, whether it is given externally or internally.—I am, etc.,

St. Neots, Hunts.

C. F. PATTERSON.

Definition of Senility

SIR,—Herewith some suggestions in answer to Mr. Fred Messer's letter (March 18, p. 674):

Senility—pathological exaggeration of the normal ageing process.

Senile—term applied to one who exhibits senility as defined above.

A certain degree of intellectual deterioration is the normal accompaniment of ageing; an exaggeration of this deterioration amounts to dementia. Those who are "pathologically" old can exhibit one feature of old age to a greater degree than other features, so that the term senility may well embrace both dementia or frailty, which are mentioned by Mr. Messer.

I feel that the word "senility" by itself should be used as a medical diagnosis as infrequently as possible. So often a more searching examination of a patient with this diagnosis will reveal pathological changes to which a more definite label can be attached.—I am, etc.,

London, N.W.1.

GERARD CROCKETT.

The Granny Racket

SIR,—It was with some misgivings that I noted on the cover of the *British Medical Journal* of March 25, heading the table of contents, "The Granny Racket," by Sir Heneage Ogilvie. My fears were only too well founded—the slogan meant what it said. Not being a *Digest* fan, I must plead ignorance of Harold Stassen's articles, so that they are not "meat and drink" to me and I have shed no glycerin tears over the particular imaginary Granny who died of pneumonia for want of a National Health Service bed. Nevertheless, it is impossible to let a caption of this type pass without comment, for if there is one part of the National Health Service which is crying out for criticism it is surely the case of the aged infirm. A nation deserves to be judged by the treatment that it accords to its old people.

It is just simply not true that "Granny could have got a nurse to look after her at home at the Government's expense." Many hospital beds are lying idle because of the shortage of nurses.

What use would "unlimited blood transfusions and unlimited chemotherapy" be to Granny? What Granny needs is someone to shake up her pillows, to give her a drink with her sulphonamides, and to lift her on to the bedpan when necessary. Any doctor who is at the present time trying to cope with a busy general practice could verify that the difficulty of getting aged patients who are ill adequately looked after is something very real and often pathetic in the extreme. The same statement holds good for the chronic sick of any age.

Last but not least, what is to be said for the provision for our senile? Has it ever reached the stage of a blueprint, or is it still merely an embryonic idea as yet barely stimulating the grey matter of some Civil Servant in a department of the Ministry of Health? Granny and Grandpa are even less likely than the horse to get grass, for their days are numbered. In conclusion may I suggest that readers should disregard the concluding sentence in this stimulating article? We *must* "worry over Granny," and keep on agitating about her treatment when illness overtakes her until what amounts to a national disgrace ceases to be.—I am, etc.,

Belfast.

E. M. HICKEY.

Mongolism

SIR,—Dr. A. R. Graham (March 25, p. 706) reports the case of a mongol, one of twins, who up to the age of approximately 2 years had been successfully treated with thyroid and anterior pituitary extracts. Unfortunately the present condition of this child is unknown. In the past, numbers of mongoloid children have been treated by various investigators with combinations of thyroid and pituitary extracts. Other hormonal combinations have also been used. In practically all these cases initial successes have been reported, which, however, did not last long, and in no case has hormonal treatment succeeded in achieving what thyroid extract does in cretinism.

As I have pointed out in my monograph on mongolism, we have to deal here with a condition of mal- or under-development of the various organs ("unfinished child"), including, of course, hypoplasia of endocrine glands. It is therefore only natural that thyroid and pituitary extracts will have some, if only transitory, success. Mongolism, however, is not due to a glandular dysfunction as is the case in cretinism, and so no permanent benefit will ever be derived from such treatment. If lasting success is reported, then the case was obviously not one of mongolism but of infantilism or cretinism.

As to the causation, Dr. Graham's case is quite illustrative. The mother was 40; there had been a gap of 12 years from the birth of a normal girl; and three miscarriages had occurred in the intervening period. Does one require more to illustrate that a pathological condition of the uterine mucosa was the responsible factor?—I am, etc.,

Caterham, Surrey.

M. ENGLER.

Training of Medical Artists

SIR,—I should like to express my admiration of the wise criticism by Professor Geoffrey Jefferson (March 25, p. 728) of the proposed training of medical artists at one school only. The demand for medical artists is growing and widening in its scope, and the medical profession will have little use for the "stereotyped idiom" in the near future. One position may require the traditional drawing of pathological specimens, but another may require knowledge of animation for films, moulage, and the designing of exhibitions. Such differing requirements need a far wider training than any one school can give. May I suggest that there are two solutions? The present custom could continue of training students as apprentices or assistants to established artists, where they learn the traditions of that particular hospital. This at least allows the student freedom of choice where and with whom he works, and when seeking a job he will be judged to some extent by the reputation of the department that has trained him. The second method is to establish a central body controlling the number of students trained each year and arranging their course of study to cover several different hospitals for perhaps four months at each. There they will come into contact with the widest range of medical illustration, have the advantage of working under several different teachers, and be able to discover their greatest