

A commencing hallux valgus can be so improved that operation is unnecessary, by mobilizing the whole foot, especially by raising the metatarsal arch and by teaching the patient to walk with it raised, by stretching the capsule of first metatarsophalangeal joint and closing the opened joint below on which she puts her weight at rest and in walking. In industry, for the sake of accuracy of eye and hand, a woman will for long periods take up a stance which is fatal for a sound walking foot. She must be taught that toes are not unnecessary appendages to the foot but part of the plantar arch. She should be encouraged to dance, because in dancing a woman must often walk backwards and she must then hold her foot with more respect for the natural function of the metatarsal arch and the toes. Better still, she should be advised to skate on ice. A woman cannot skate and cock her toes up. She is forced to hold her great toe down in line with the metatarsal, under which line the blade of her skate lies. Hallux valgus is usually accompanied by some loss of power in the peroneals and inability to evert strongly the foot. Skating will strengthen these muscles and improve the stance at work and the walking style. In general feet and hands are not cared for as they deserve.—I am, etc.,

Reading, Berks.

E. H. STRANGE.

### Strontium-90 in Bone

SIR,—In her letter (May 27, p. 1542) Dr. Frances M. Taylor inquires whether any research on the strontium-90 content of human teeth is being carried out in this country. This subject has been under investigation since 1958 by the director of dental research at the Royal Naval Medical School, Alverstoke, in conjunction with the United Kingdom Atomic Energy Authority Research Station at Woolwich.<sup>1</sup>

In this country it is felt that the analysis of sound permanent teeth which had been calcifying during the years that fall-out has been taking place would be more rewarding than that of deciduous teeth which are either carious or have their roots resorbed and crowns affected by attrition. As the calcification of deciduous teeth in some instances takes place before birth, the placental barrier might also influence the strontium-90 content. Regular samples of third molar and premolar teeth which are extracted in sound condition for orthodontic purposes are still being collected by the Royal Naval Dental Service and six-monthly analyses are supplied by U.K.A.E.A., Woolwich.—I am, etc.,

WILLIAM HOLGATE,

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(Dental Services) of the Navy.The Medical Department,  
The Admiralty, S.W.1.

## REFERENCE

- <sup>1</sup> Bryant, F. J., Henderson, E. H., and Holgate, W., *Brit. dent. J.*, 1960, **108**, 291.

### Headache and "Eyestrain"

SIR,—I was interested in Dr. Theodore H. Whittington's letter (June 3, p. 1607), but I would like to point out that I did not state that headache associated with refractive errors is due to wrong glasses; what I did say was I had come across instances where headaches had been caused by a patient wearing incorrect glasses.

I must confess that I have already reached the age of presbyopia, but I cannot remember ever having had a headache which I can trace as being even remotely connected with the necessity for an increase in strength of my presbyopic correction. As far as "decompensated heterophoria" is concerned, of course spectacles which so reduce the latent deviation that the heterophoria becomes fully compensated may entirely relieve the symptoms, of which headache is one of the most frequent.—I am, etc.,

London W.1.

T. KEITH LYLE.

SIR,—I wholeheartedly agree with Dr. David Rankine's letter (June 3, p. 1607); too many people wear unnecessary glasses too much. I believe the cost of glasses prescribed on the N.H.S. could be considerably reduced if very small errors of refraction were ignored.

Not only opticians are to blame for such prescribing either. Furthermore, it is not so much the error that is important but the symptoms of which the patient complains. These are so frequently nothing whatever to do with the eyes, although so attributed by the patient.—I am, etc.,

London W.1.

J. G. MILNER.

### Dermatitis Medicamentosa

SIR,—Dr. C. F. H. Vickers (May 13, p. 1366) uses the term dermatitis medicamentosa to mean "contact dermatitis caused by medicaments." This use of the term is unfortunate because it has always been employed as a synonym for drug eruptions. It is used in this sense in the textbooks by McCall Anderson,<sup>1</sup> Radcliffe Crocker<sup>2</sup>, MacLeod,<sup>3</sup> Stelwagon and Gaskill,<sup>4</sup> Ormsby and Montgomery,<sup>5</sup>, Sutton,<sup>6</sup> Pillsbury, Shelley, and Kligman,<sup>7</sup> Tobias,<sup>8</sup> and Schwartz.<sup>9</sup> To attempt to change the meaning of an old and well-established term can lead only to confusion.—I am, etc.,

London W.1.

E. LIPMAN COHEN.

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- McCall Anderson, T., *A Treatise on Diseases of the Skin with Special Reference to their Diagnosis and Treatment*, 1894, 2nd edition, p. 360. Griffin, London.
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- Schwartz, L., Tulipan, L., and Birmingham, D. J., *Occupational Diseases of the Skin*, 1957, 3rd edition. Kimpton, London.

### Sexual Offences Against Children

SIR,—In his interesting letter (June 10, p. 1686), Dr. J. N. Loring asks about the possible effect of publicity on the increase of the above crimes. That there has been a substantial increase is undeniable. Sexual offences (not all of course against children) increased from 5,000 in 1938 to 20,000 in 1959.

I scarcely think that the reporting of sexual crimes *per se* can have any substantial effect in causing an increase in these crimes. It could in fact be argued that such reporting might act as a warning or as a deterrent against such conduct. But I think it is an entirely different matter when promiscuity is glamorized in articles and in plays and films. In my