Letters, Aotes, and Answers.

COMMUNICATIONS respecting Editorial matters should be addressed to the Editor, 429, Strand, London, W.C.; those concerning business matters, advertisements, non-delivery of the JOURNAL, etc., should be addressed to the Office, 429, Strand, London, W.C.

TELEGRAPHIC ADDRESS.—The telegraphic address of the EDITOR of the British Medical Journal is Aitiology, London. The telegraphic address of the British Medical Journal is Articulate, London.

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ORIGINAL ARTICLES and LETTERS forwarded for publication are understood to be offered to the BRITISH MEDICAL JOURNAL alone unless the contrary be stated.

Queries, answers, and communications relating to subjects to which special departments of the BRITISH MEDICAL JOURNAL are devoted will be found under their respective headings.

QUERIES.

M. would be much obliged for advice as to treatment of "tumultuous" fetal movements, a condition not described in midwifery books consulted. Movements generally come on when mother goes to bed, excite "jumping" of one or both legs, the origin of which is referred to the insertion of psoas and iliacus muscles, and prevent sleep. Six months pregnancy. Similar condition with previous quite healthy child. Mother healthy, not neurotic. Bromides, chloral, trional in fair doses (gr. xx) apparently have no effect.

PAKEHA writes: Can any reader suggest a remedy for persistent pain in the following case: Widow, aged 65, hotel keeper. Had protracted illnesses in 1906 and 1909. Gouty diathesis, large flabby heart, enlarged liver, occasional trace of albumen, with also occasional shortage of urine; abdominal asoites, which varies in amount; frequent flatulence, occasional attacks of eczema. She has a rooted dislike to patiently trying any mixture which is not most palatable, and a firm belief that hot gin is her most useful remedy. During her illness last year she had agonizing pain below the left scapula; this has now moved inwards until it is almost central but at the same level. The left radial pulse is distinctly weaker than the right, but she has no tracheal tugging, nor cough. She would be fairly happy if her pain could be relieved, and "Pakeha" will be grateful for suggestions. suggestions.

ANSWERS.

"EQUITY," "G. P.," "Justice," and "M. A." have omitted to enclose their cards.

LETTERS, NOTES, ETC.

AN APPEAL.

OR. J. B. RICHARDSON (retired) of South Brent writes that Dr. Style, of that village, met with a very serious accident some weeks ago, fracturing the pelvis, and causing serious injury to the bladder and intestines. His motor is damaged beyond repair, and at a representative meeting here, at which Dr. Richardson was in the chair, the following motion was carried: "Following the strong feeling expressed throughout the district that some practical and tangible mark of the respect and esteem felt for Dr. Style should be shown him at this particular period, a public meeting was held in the council schools on Tuesday, July 12th, when it was unanimously resolved to invite subscriptions towards a testimonial, the character of which is to be decided at a later date." The pay of a country doctor is small, the work hard, and bad debts not unknown, and I think there must be many members of the profession who would be glad to help in a case such as this. I shall be happy to receive and acknowledge any subscriptions to this laudable object. DR. J. B. RICHARDSON (retired) of South Brent writes that Dr.

OPTIC NEURITIS IN CHLOROSIS.

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The writer of the note on optic neuritis, which appeared in the JOURNAL of July 16th, writes: In answer to Dr. Hawthorne's letter, published in the JOURNAL of July 23rd, I would point out that the annotation to which he refers is practically an abstract of the paper quoted taken from the Archives of Ophthalmology. It is unfortunately impossible to verify every reference when abstracting a series of papers. "Adducens paralysis" is a misprint for "abducens paralysis." The first object of the note was to draw the attention of medical men to the fact that optic neuritis is occasionally found in chlorosis, and to give the reference to an excellent case published in an American journal. I regret an excellent case published in an American journal. I regret that either through my mistake or that of the eminent American author, Dr. Hawthorne's name was incorrectly spelt.

MEDICAMENTS APPLIED TO UTERUS TASTED IMMEDIATELY.

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DR. R. H. KENNAN (Freetown, Sierra Leone) writes: I have just received the copy of the JOURNAL for July 2nd, in which I see a letter from Dr. Alexander Duke referring to patients recognizing by taste in the mouth what drug had been applied to the cervical canal by him. I well remember the late Sir Arthur Macan telling me in Dublin that many patients told him they "tasted kippered herrings" immediately after he had applied pyroligneous acid to the cervical canal. It seems to me that the smell of carbolic acid and iodine (so well known to the public) might suggest their "tastes" to the patients, but such would be less likely in the case of pyroligneous acid suggesting "kippered herrings."

VICARIOUS EPISTAXIS IN THE MENOPAUSE.

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DR. SHELTON DALY (Manchester) writes: Having read the short notice in the EPITOME of the JOURNAL for July 30th, Par. No. 65, upon vicarious epistaxis in menopause, by Macht, I thought the following note of a case of mine might be interesting to some readers: Mrs. L., aged 31, having had two children and one miscarriage, has suffered for the last two years from copious bleeding from the gums (which are not spongy), lasting two days, and filling three handkerchiefs. This is accompanied by headache and face-flushing; in two weeks afterwards, or at the time for her ordinary period, she has a very scanty discharge from the uterus, lasting three days. Her general health is good.

ACADEMIC COSTUMES.

SCARLET LIGHTNING writes: In your description of the different gowns and hoods of the British Universities you are not quite correct with regard to the M.B. of Bristol. The gown is stuff or silk. The hood is black foundation; "Bristol red" (a distinct and characteristic colour) lining; salmon colour edging.

C.P. writes: You are probably not aware that the Royal College of Surgeons in Ireland grants an academic costume to its Fellows and Licentiates, thus:

Fellows.—Black stuff Master of Arts gown, faced with St. Patrick's blue Irish poplin border, 5 in. in width, narrowing round the collar behind, and extending to each end of the gown in front. Inside of the blue poplin there shall be a crimson Irish poplin lining 5 in. in width and of similar extent as the blue. Cap: Black velvet college cap, with St. Patrick's blue and crimson tassel.

Licentiates.—Black stuff Master of Arts gown, faced with St. Patrick's blue Irish poplin border, 2½ in. in width, not extending behind collar, but continuous to each end of the gown in front. Inside the blue poplin there shall be a crimson Irish poplin lining, 2 in. wide, and of similar extent as the blue. Cap: A black cloth college cap, with black tassel.

tassel. Will Messrs. Eve kindly take note, as there are many Fellows and Licentiates in London and elsewhere who are proud of the old college in Stephen's Green?

The Edinburgh Royal College of Physicians has also an analysis of the college of Physicians has also an analysis of the college of Physicians has also and the college of Physicians has also an

academic costume, but I do not know particulars enough to

describe it.

CLIMATE FOR LATENT PHTHISIS.

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DR. JOHN P. ATKINSON, JUN., B.A., M.R.C.S., L.R.C.P. (Saffron Walden) writes: At page 239 in the British Medical Journal of July 23rd, I notice under the heading "Climate for Latent Phthisis," "M.D." writes. "the patient should avoid (2) a place where drinking water is drawn from the chalk." I presume this has reference more to the constipation than the latent phthisis, for from the rarity of phthisis in this chalky part of Essex, and the fact that cases imported here do well, I have been led to speculate as to whether a chalky water has not a beneficial effect on phthisis, and should be interested to obtain further information on the subject. The contrast in the number of cases and their favourable course when occurring is very marked compared with a previous experience in Devonshire, where the water was soft, peaty, and moorland. and moorland.

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