

as far as possible, to the consideration of the signs, symptoms, and treatment of injuries to the live-born.

As regards the question of the cause of wry-neck, there has been considerable difference of opinion, but I think most of the recent work on the subject shows that the condition is caused by vascular disturbances rather than by direct trauma to the muscle. The subject is discussed at some length by von Reuss¹ and Ehrenfest.²—I am, etc.,

Glasgow, Sept. 22nd.

GEOFFREY B. FLEMING.

SIR,—Mr. McFarland would be greatly interested to know what evidence I have that there is a rupture of muscle at all, but I hardly think it necessary for me to produce my evidence. In your issue of the previous week (September 19th) there is a letter from Dr. Herbert R. Spencer, the eminent obstetrician, referring to a paper by him in which he showed "that the haematoma is due to bruising, stretching, and rupture at the time of birth." His paper was based on the post-mortem examination of fifteen cases of haematoma occurring in newborn children. Is not this all the evidence Mr. McFarland can possibly require?

But, really, what is the argument about? If Mr. McFarland prefers to think that the muscle is *pinched* at birth, when I think it is bruised, stretched, or ruptured, are we not in agreement? Or, if we are not, could we not become so by saying that the muscle is *damaged* at birth, and leave it at that?—I am, etc.,

London, W.1, Sept. 26th.

PAUL BERNARD ROTH.

TREATMENT OF UTERINE HAEMORRHAGE NOT DUE TO UTERINE DISEASE

SIR,—In his excellent article on the above subject (September 26th, p. 556) Dr. James Young does not allude to the use of the galvanic current. In 1900 Dr. A. Zimmern of Paris wrote a lengthy volume on this method. The late Dr. Samuel Sloan of Glasgow discovered it quite independently, and employed it with great success for many years in his practice. He described his method in his *Electricity in Gynaecology*, published in 1917. Both these physicians taught me their technique, and I have found the method astonishingly successful. In the October number of the *Practitioner* I published full details of four severe cases which responded to the galvanic current after all else had failed. (X rays and radium had not been tried.) The most striking case of all which I have treated was that of a girl of 22, sent to me by the late Sir John Williams, with the report that she had never had a period in all her life without bleeding continuously for months. She had been twice curetted, once cauterized, and every possible drug and endocrine therapy had been tried. Sir John said that she was sent to me in a very weak condition, after seven weeks of continuous bleeding, and that, if electricity was not successful, hysterectomy was imperative. The treatment had to be begun when there was profuse bleeding and the patient so weak that she could scarcely stand. She was cured, and after eight applications had normal and regular periods for four years. Then she had a relapse, but soon responded to galvanism, and remained normal for over six years, in spite of developing tuberculosis of the lungs. Then a second relapse occurred, for which she is now having a few applications of copper ionization, and is apparently responding as favourably as in the past.—I am, etc.,

London, W.1, Sept. 28th.

AGNES SAVILL, M.D.

¹ von Reuss, A. R.: *The Diseases of the Newborn*, 1921, p. 177.
² Ehrenfest, H.: *Birth Injuries of the Child*, 1931, p. 231.

EPIDEMIC SORE THROAT

SIR,—The following brief account of some cases of sore throat in a country village may be of interest, when taken in connexion with the paper on acute tonsillitis and its sequels, which appeared in the *Journal* of September 19th.

In the latter part of July and the beginning of August there was an epidemic of diphtheria here. On August 6th a boy was brought to my surgery with a highly inflamed throat and a membrane on the right tonsil. I took a swab of his throat, and sent him to hospital as a case of diphtheria. The swabs on all occasions were negative.

Since then I have had some twenty cases of tonsillitis, none of them showing any membrane, but shall confine myself to the mention of eight, all related to the boy mentioned. (1) August 11th, *uncle*—tonsillitis; (2) August 13th, *aunt*—tonsillitis; (3) August 20th, *aunt*—tonsillitis, with transient rash, no desquamation, no complications; (4) August 25th, *grandfather*—tonsillitis; (5) August 28th, *uncle*—tonsillitis; (6) August 28th, *cousin*—tonsillitis, with marked rash, not typically scarlatiniform, desquamation, no albuminuria; (7) September 14th, *father*—tonsillitis; and (8) September 16th, *cousin* (son of Nos. 1 and 2)—scarlet fever. These eight people live in five different houses, mostly at a considerable distance apart; but I think it is obvious that all these cases are different manifestations of the same condition.—I am, etc.,

Isleham, Sept. 22nd.

J. W. McFEETERS.

CONSULTING FEES AND RENTALS

SIR,—I write, in view of the serious economic position, to make the following suggestion: that all consultants shall reduce their consulting fees to £2 2s. during the present stringency, provided that their landlords also reduce their rents to them by 20 per cent. Many of us are paying very high rentals, much in excess of the true present values—so much so that I should think that very few, if any, landlords could obtain such rentals for any fresh agreements or leases. I do not see how we can reduce our fees otherwise, a course that a large number of us would willingly follow were it feasible.

I think there is no doubt that a large number of persons who desire to seek our advice are debarred by the necessarily high fees, and I am sure that, as a consequence, they are seeking our help more and more at the hospitals, thus throwing an increased burden on these institutions. I write in no commercial spirit, for a true doctor will always consider his patient first and his own pecuniary reward second.—I am, etc.,

London, W., Sept. 24th.

WILLIAM IBBOTSON.

RHEUMATOID ARTHRITIS

SIR,—There is a suggestion in connexion with rheumatoid arthritis which, as it seems of some interest and practical importance, I venture to send to you.

A feature of this disease which has been little stressed is that, *when occurring in youth*, it is confined almost entirely to the female sex, and is rarely seen in boys. I am not alluding to Still's disease, which attacks children, but to that serious form of true arthritis which begins, in many cases, soon after adolescence. The above observation, which appears to have been little considered, would seem to have a bearing on one of the methods of treatment commonly tried at present—I mean the removal of dead and crowned teeth and tonsils, as being possible sources of the trouble. I would suggest that the virtual sex monopoly of the disease is a strong indication that toxic infection from these centres has no connexion with the causation of the disease, because such infection would