Medical News

Papers on "Some Soviet Contributions to War Surgery" will be read by Dr. Janet Vaughan and Mr. Ruscoe Clarke, F.R.C.S., on Friday, July 25, at 7.30 p.m., at the Medical Society of London, 11, Chandos Street, London, W.1. Invitation cards may be obtained from the Society for Cultural Relations with the U.S.S.R., 98, Gower Street, London, W.C.1 (Euston 2315).

Owing to the large numbers of wounded German officers and men arriving back from the Russian front, the German Government has ordered the mobilization of Jewish doctors and nurses in the Third Reich to assist in the care of the wounded. Similar mobilization orders have been issued in Hungary, Rumania, and Slovakia.

The Association of Special Libraries and Information Bureaux (ASLIB) is undertaking a national survey of the present position concerning enemy and enemy-controlled publications. especially the current issues of periodicals. Previous inquiries have confirmed the impression that since the early part of 1940 only very limited supplies have been arriving in this country; that they consist mainly of imperfect sets of a few periodicals restricted very largely to departmental libraries that are not accessible to the general public; and that only a detailed survey can reveal the inadequacy of the present supplies. Through the good offices of the Royal Society, the Rockefeller Foundation has now provided funds for such a survey, which will be completed by a committee of the association by the autumn. A memorandum is being circulated to some two thousand institutions and individuals to ascertain what publications they need and the extent to which they are locally available. Those who do not receive a copy of the memorandum and are interested to do so should communicate with the ASLIB Foreign Periodicals Committee, 31, Museum Street, London, W.1.

A Venezuela Society of Microbiology, Parasitology, and Tropical Medicine has recently been founded at Caracas.

In 1940, 5,715 taxi-drivers in Germany had their licences withdrawn, in 1,672 cases owing to being drunk while driving.

Letters, Notes, and Answers

- All communications with regard to editorial business should be addressed to The EDITOR, British Medical Journal, B.M.A. House, Tavistock Square, W.C.1.

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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.
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- ADVERTISEMENTS should be addressed to the Advertisement Manager (hours 9 a.m. to 5 p.m.). Orders for copies of the Journal and subscriptions should be addressed to the Secretary.

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QUERIES AND ANSWERS

Urticaria

"B. M. E." (Middlesex) writes: In reply to "H. S." (June 28, p. 922), a case of severe urticaria some years ago in which drugs were of no avail cleared up after a few doses of an autogenous intestinal vaccine, the organisms found being of the Gaertner group. There has been no return—the case had lasted some months.

Dysmenorrhoea

Dr. A. C. F. Halford (Brisbane) writes: I was very interested to read Mr. A. J. Hobson's advice (February 1, p. 182) to use calcium lactate for the relief of dysmenorrhoea. His prescription is the formula of the late Dr. Blair-Bell, mistura calcii lactatis recentis, under which name Mr. Hobson's prescription may be written. I have used this preparation for many years, and have always

regarded calcium as a very useful drug for many conditions described in its pharmacology, notably in that valuable publication the Extra Pharmacopoeia. It is very effective at all stages of pregnancy, especially during the latter months, to remove oedema, albuminuria, headache, and cramp—pre-eclamptic states, in fact. Liquor calcis lactatis (Martindale) is claimed to be a more stable preparation and so should be remembered. Calcium, combined with tinct. cannabis indica, both in full doses, should be tried out in all cases of menorrhagia before any surgical procedures are undertaken. And so also for dysmenorrhoea hot baths and plenty of exercise should take first place in therapeutics. Proprietary preparations are in no way superior to calcii lactatis recents, which is much cheaper.

Exercises for Arteriosclerosis

"J. B." writes: I should be grateful for advice in the treatment of the following case. A man aged 77 suffers from arteriosclerosis, chiefly in the right foot and leg, accompanied by some coldness, slight redness, numbness, and loss of sense of light touch in the toes. The pulse in the arteries at the ankle is imperceptible. Other symptoms are: claudication, pain, cramp, weight, and tired feeling in the calf on walking 150 to 200 yards. The kidney and liver are in good condition; blood pressure is 142/90; slight angina pectorion on exertion for seven years. Two years ago I saw it stated that Buerger's exercises were of "definite value." I should be glad to know if these are really useful. They require forty-five minutes thrice daily, and include: (1) raising and blanching the foot; (2) hanging and reddening it; and then (3) placing the limb in a horizontal position for three minutes in each cycle.

LETTERS, NOTES, ETC.

Nurse Anaesthetists

Dr. J. R. J. BEDDARD writes: Having read with great interest the correspondence concerning nurse anaesthetists in the Journal, I hope you may find space for a few further remarks by way of postscript. Those surgeons who support the retrograde step taken at Addenbrooke's Hospital do not seem to realize that their own art lends itself to division among trained technicians. Might it not be beneficial to the patient if he were under a physician who could prescribe all treatment, treating the patient as a whole and calling in the technicians when indicated? The day of the "hernia nurse," the "whitlow nurse," and the "haemorrhoidal porter" may yet come! I think the real answer is that a person who is doing one job all the time will always be better than one who does it occasionally, or one who is recently qualified and is exploring vast new territories in the continent of medicine and surgery. In a given case the type of anaesthetic to be employed in the best interests of the patient can only be accurately assessed by the physician-anaesthetist; surgeons are apt to be parochial in this matter. If mere technicians are to be employed in surgery or anaesthesia it is an end to progress, and this branch of medical science will remain stationary

Coined Medical Words

Dr. W. A. Brend writes: I am grateful to Dr. Sutton for pointing out (July 5, p. 38) that hyperphobesis is preferable to hyperphobosis as a term for "excessive fear reaction." I do not, however, care for $\phi p \ell \kappa \eta$ (shuddering) as an alternative, since hyperphobesis is more likely to be readily understood and memorized by those already familiar with the significance of the prefix "hyper-" and of the word "phobia" in psychiatry.

The Golden Rule in Reception Areas

The National Baby Welfare Council (29, Gordon Square, W.C.1) has produced a sensible and simply worded leaflet (No. 87, "To Hosts and Guests") which it hopes will help to solve some of the difficulties caused by evacuation. The key phrase of this leaflet is "Give and Take." Supplies may be obtained from the Council at 2s. a hundred. A specimen copy will be sent on receipt of a penny stamp.

Corrigenda

- An error occurred in Captain R. E. Burkitt's article "Flat-foot in Recruits" at page 967 of our issue for June 28. In the paragraph dealing with alterations to boots, the phrase "I had a rise of one-quarter of an inch or one-third of an inch put on the under side of the heel and sole of both boots" should have read: "I had a rise of one-quarter of an inch or one-third of an inch put on the *inner* side, etc."
- In Captain WILLIAM E. SMITH'S paper on the control of gastric hyperacidity and peptic ulcer published in the *Journal* of July 5 (p. 13) two corrections were received too late owing to delay 1 the post: (1) Page 13, column 2, line 39—for "reference" read "inference." (2) Page 14, column 1, line 15—for "9" read "10"; and column 2, lines 1 and 8—for "4" read "5."