

HER MAJESTY'S HOUSEHOLD

THE MEDICAL APPOINTMENTS

A Supplement to the *London Gazette* of August 5 announces the following medical and dental appointments to Her Majesty's Household:

Physicians:

Sir Horace Evans, K.C.V.O., M.D., F.R.C.P.
Sir John Weir, G.C.V.O., M.B., Ch.B.
Ronald Bodley Scott, D.M., F.R.C.P.

Physician-Paediatrician:

Wilfrid Percy Henry Sheldon, M.D., F.R.C.P.

Extra Physicians:

Lord Horder, G.C.V.O., M.D., F.R.C.P.
Sir Henry Letheby Tidy, K.B.E., M.D., F.R.C.P.
Sir Daniel Thomas Davies, K.C.V.O., M.D., F.R.C.P.

Sergeant-Surgeon:

Sir Arthur Porritt, K.C.M.G., C.B.E., M.B., M.Ch., F.R.C.S.

Surgeons:

Sir James Paterson Ross, K.C.V.O., M.S., F.R.C.S.
Ralph Marnham, M.Chir., F.R.C.S.

Surgeon-Gynaecologist:

Sir William Gilliatt, K.C.V.O., M.D., M.S., F.R.C.P.,
F.R.C.S., F.R.C.O.G.

Extra Surgeons:

Sir Thomas Peel Dunhill, G.C.V.O., C.M.G., M.D.,
Hon.F.R.C.S., F.R.A.C.S.
Sir James Walton, K.C.V.O., M.B., M.S., F.R.C.S.
Sir Lancelot Edward Barrington-Ward, K.C.V.O., Ch.M.,
F.R.C.S.

Extra Manipulative Surgeon:

Sir Morton Smart, G.C.V.O., D.S.O., M.D.

Extra Surgeon-Apothecary:

Sir Frederick Stanley Hewett, K.C.B., K.C.V.O., K.B.E.,
M.D.

Surgeon-Oculist:

Sir Stewart Duke-Elder, K.C.V.O., M.D., D.Sc., Ph.D.,
LL.D., F.R.C.S., F.A.C.S.

Extra Orthopaedic Surgeon:

Sir Reginald Watson-Jones, M.Ch.Orth., F.R.C.S.,
F.R.A.C.S., F.A.C.S.

Aurist:

John Douglas McLaggan, C.V.O., M.B., Ch.B., F.R.C.S.

Surgeon Dentist:

Alan Cumbrae Rose McLeod, F.D.S. R.C.S.(Eng.), D.D.S.

Extra Physician to the Household:

Sir Arnold Walmsley Stott, K.B.E., B.Chir., F.R.C.P.

Surgeon-Oculist to the Household:

Allen John Bridson Goldsmith, M.B., B.S., F.R.C.S.

Extra Surgeon-Oculist to the Household:

Frank Anderson Juler, C.V.O., M.B., B.Ch., F.R.C.S.

Apothecary to the Household:

John Nigel Loring, M.R.C.S., L.R.C.P.

Surgeon-Apothecary to the Household at Windsor:

Richard William Legerton May, M.B., B.Chir.

Extra Surgeon-Apothecary to the Household at Windsor:

Edmund Claud Malden, C.V.O., M.B., B.Chir.

Surgeon-Apothecary to the Household at Sandringham:

James Lawrence Bunting Ansell, M.R.C.S., L.R.C.P.

MEDICAL HOUSEHOLD IN SCOTLAND

Physicians:

Alexander Greig Anderson, C.V.O., M.D., LL.D., F.R.C.P.
Sir John William McNee, D.S.O., M.D., D.Sc., F.R.C.P.
Professor Leybourne Stanley Patrick Davidson, M.D.,
F.R.C.P.

Surgeons:

Sir James Rognvald Learmonth, K.C.V.O., C.B.E., LL.D.,
Ch.M., F.R.C.S.Ed., Hon.F.R.C.S., Hon.F.A.C.S.
George Gordon Bruce, M.B., Ch.B., F.R.C.S.

Surgeon-Oculist:

John Marshall, M.C., T.D., M.B., Ch.B., F.R.F.P.S.

Surgeon-Dentist:

Robert Charles Scott Dow, L.R.C.P.&S.Ed., H.D.D., F.D.S.

Surgeon-Apothecary to the Household at Balmoral:

George Proctor Middleton, C.V.O., M.B., Ch.B.

Surgeon-Apothecary to the Household at the Palace of Holyroodhouse:

George Brewster, M.D., D.P.H.

Coroner of the Household:

Lieutenant-Colonel William Hilgrove Leslie McCarthy,
D.S.O., M.C., M.D., M.R.C.P., D.P.H.

Correspondence

Because of the present high cost of producing the Journal, and the great pressure on our space, correspondents are asked to keep their letters short.

Confused Nomenclature

SIR,—The letter of Dr. H. Gordon Oliver (August 2, p. 283) gives another illustration to a point I made recently in relation to the term "megacolon": the confusion caused in our profession by calling different things by the same name. Among the babies sent up to my clinics with the diagnosis of "talipes equino-varus," it is seldom that there is not one or more in the course of a week which I dismiss as simply "inversion spasm," needing no treatment. Yet, as the feet (though normal) are persistently held in equino-varus, the condition is congenital, and, as textbooks speak of "paralytic talipes" and "spastic talipes," they can certainly be described as "congenital talipes equino-varus." What they are not are club-feet, and it would be unfortunate if Dr. Oliver's letter should lead anyone to suppose that a true club-foot can be easily and quickly corrected. An experience of many thousands of such cases, beginning with the watching of such masters as Sir Robert Jones and Sir Thomas Fairbank, has taught me only too thoroughly that they cannot.

The optimism of those who claim to cure "talipes" by a few simple plasters or by massage is due to their experience being confined to inversion spasm; just as the optimism of those who "bring down testicles from the inguinal canal" by hormones is due to the results gained with normal retractile testicles. Of the latter I see about three or four a week throughout the year, and, like the inversion spasm of the feet, they give perfect results with or without treatment.

Another example of this type of confusion is supplied by the correspondence on pilonidal sinus. This is now running at complete cross-purposes, owing to grouping together (1) a rare and dangerous congenital deformity, which I personally class as a variety of spina bifida, and (2) an acquired condition, of various origins, resulting in hairs either getting into, or growing out of, a sinus. No one so far has brought in the result of Bucknall's operation on a hypospadias as an example of an acquired "pilonidal sinus," or the not uncommon dermoid of the nose as a congenital one.—I am, etc.

London, W.1.

DENIS BROWNE.

Peptic Ulcer and the Neurotic

SIR,—I read with interest and profit the article on peptic ulcer by Professor C. F. W. Illingworth (July 26, p. 206). I was, however, rather disturbed by the following statement which occurred in the paragraph under the heading of psychotherapy. He states: "In this connexion it should be recognized that, while many neurotics *invent* [italics mine] digestive disturbances, the ranks of genuine ulcer cases contain no higher proportion of neurotics than does the population at large. Most ulcer patients, indeed, are the reverse of neurotic. They may be anxious and worried, but they never *invent* symptoms, generally make light of their suffering, and rarely give up work unless the pain is intolerable."

I agree entirely with what he says about the temperament of the ulcer patient, but I cannot agree when he says that "many neurotics *invent* digestive disturbances." Such a statement implies that many neurotics deliberately and consciously lie in saying that they have pain or discomfort when in fact they have not. The effect of this is practically to equate many neurotics with malingerers. This, in my experience—and I believe I may say in that of most psychiatrists—is quite untrue. It is extremely rare for a neurotic to be a malingerer. They are in fact very different types of personality.