

LETTERS, NOTES, AND ANSWERS TO CORRESPONDENTS.

COMMUNICATIONS FOR THE CURRENT WEEK'S JOURNAL SHOULD REACH THE OFFICE NOT LATER THAN MIDDAY POST ON WEDNESDAY. TELEGRAMS CAN BE RECEIVED ON THURSDAY MORNING.

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

In order to avoid delay, it is particularly requested that all letters on the editorial business of the JOURNAL be addressed to the Editor at the Office of the JOURNAL, and not to his private house.

AUTHORS desiring reprints of their articles published in the BRITISH MEDICAL JOURNAL are requested to communicate beforehand with the Manager, 429, Strand, W.C.

CORRESPONDENTS who wish notice to be taken of their communications should authenticate them with their names—of course not necessarily for publication.

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.

A. W. asks if there is any book on the management of workhouses, etc., from the medical superintendent's point of view.

A MEMBER asks at what London houses Unna's plaster muslins can be obtained.

M.B., M.A. asks which is a good book on the subject of urine analysis—one that goes fully into the quantitative estimations, and gives some hints on the significance of the presence of abnormal constituents.

MEMBER B.M.A. writes: Will any of your readers kindly assist me in the following case: A perfectly healthy lad, aged 17, suffers almost nightly from incontinence of urine. He has been circumcised. There are no symptoms of worms, and the usual drugs appear to have no effect. I should be glad of suggestions.

DIET IN OBESITY.

R. M. M. writes: Will any of your correspondents kindly furnish me with a diet chart for obesity?

ANTHRAX.

J. H. BELL, M.D. (Bradford), writes: If any of your readers who have seen cases of malignant pustule (anthrax) and internal anthrax (without pustule) in Russia, Turkey, Persia, South Africa, South America, Australia, and other countries that export hides, hairs, wools, etc., would kindly favour me with any particulars as regards infective material, prevalence of this disease, and protective precautions against it in these countries, I should be much obliged.

HYPERTROPHIED HEART IN HODGKIN'S DISEASE.

ENQUIRER asks whether any one has met with an instance of largely hypertrophied heart in a case of Hodgkin's disease. The following are the chief points: Female, aged 44, died; there was well-marked enlargement of the glands on both sides of the neck and in both axillæ; pneumonia of right side (which was the cause of death); great hypertrophy of the heart (18½ ounces); liver and kidneys healthy; spleen large (8 ounces), bright scarlet colour, no evident disease; lymphatic glands in thorax and around bronchi enlarged; mesenteric and inguinal glands not enlarged.

There was nothing to account for the large heart: all the valves were competent and healthy; there was no nephritis, no circulatory obstruction; nothing in fact which could be set down as the cause except the enlarged lymph glands and spleen, which, being defective in function, may, by altering the quality of the blood, have led to the cardiac hypertrophy.

THE RADICAL CURE OF HYDROCELE AND STERILITY.

DR. J. V. ABRINES (Fortess Road) writes: Not having been successful in getting any definite information from the several authorities I have questioned, nor in any of the standard works on the subject, I venture to ask your efficient aid in inquiring whether there are any statistics for or against the radical cure for hydrocele having any bearing at all on the subsequent reproductive powers of the patients? I bring this interesting subject to your notice to invite reference to further cases, for I can furnish you with details of eight cases where the operation has resulted apparently in subsequent sterility. I may mention that all the patients have been under 30 years of age at the time of the operation, perfectly healthy, and capable of copulation. In six of these cases the operation has been performed before marriage, whilst in two of them it has been subsequent to it. In the first of these two cases the patient had a child eighteen months after marriage, and shortly after the birth of the child, ten years ago, the operation was performed, whilst in the second case the operation was performed after the birth of the second child, eight years ago. The injection used has invariably been iodine. Is this a coincidence? *Quien sabe?*

ANSWERS.

INQUIRER.—We are advised that £5 5s. would be a proper charge.

LINGUA.—A skilled teacher for the boy with defective speech, described by our correspondent, might be obtained from the College for Training Teachers of the Deaf, Castle Bar, Ealing.

NURSING.

MISS LÜCKE'S *Lectures on Nursing*, or Dr. Laurence Humphry's book on the same subject, would probably answer our correspondent's purpose.

THYMOL IN TYPHOID.

IF J. H. W. will refer to Dr. Burney Yeo's *Manual of Medical Treatment*, or to Hare's *System of Practical Therapeutics*, he will find in the chapters on typhoid fever that thymol has been largely used as an intestinal antiseptic, especially by Professor F. P. Henry, of Philadelphia.

TEA TABLOIDS.

PENFOLD; W. C.; C. H.; T. U.—The tea tabloids referred to in the lecture at the National Health Society, are manufactured by Messrs. Burroughs, Wellcome and Co., Snow Hill Buildings, Holborn Viaduct, E.C., and may, we suppose, be obtained through any grocer.

MEDICAL SICKNESS ASSURANCE.

M.D. writes: For some time I have been looking out for an assurance association, which provides against sickness, suitable for medical men, paying, say, from £2 to £6 per week, but have not been able to find one. Is there such an association?

** Where can our correspondent have been looking? Evidently not in the columns of the BRITISH MEDICAL JOURNAL, which have contained reiterated reports of the Medical Sickness Assurance Society, 33, Chancery Lane, which makes precisely the provision which he seeks. *Vide* BRITISH MEDICAL JOURNAL, March 24th, page 611, *et passim*.

NOTES, LETTERS, ETC.

ERRATUM.—In the description of Fig. 6 in Dr. Octavius Sturges's second Lunnleian lecture in the BRITISH MEDICAL JOURNAL of March 17th, p. 562, the word "no" was accidentally omitted before "cardiac lesion."

A MYSTERIOUS OFFER.

CORRESPONDENTS in various parts of the country keep sending us letters received by the porters at the local hospitals, all apparently written by the same person, giving the same address, and having the same object. Query—What is the object? Do these letters emanate from an enterprising instrument maker, or what? The following is a copy of one of them: "Sir,—I propose sending you a 2s. postal order for every address, occupation, etc., of anybody over 15 and under 55 who from this date leaves in reasonable health the place where you are employed after the amputation of a limb. The information being wanted for a good purpose I trust there will be no objection. Kindly let me know, signing your full name, and oblige yours very truly."

PASSAGE OF THE CATHETER IN PROSTATIC DISEASE.

DR. J. M. MILES (Dingle) writes: If Dr. W. Donovan will look at Vol. 2, page 91, of the 4th edition of *Bryant's Surgery*, he will read the following:

"To arrive in the introduction of any instrument into the bladder, the passage of the index finger of the surgeon's left hand fully into the rectum is an excellent aid, and under all circumstances the pelvis of the patient should be well raised on a pillow."

It is evident Mr. Bryant's meaning is for the surgeon to tilt the point of the catheter with his finger over the so-called middle lobe of the prostate. I do not in the least mean to detract from Dr. Donovan's kindness in reminding the busy practitioner of the very useful suggestion, but he will now see that the profession were not deprived of the treatment, as it is so fully described by Mr. Bryant.

MEDICAL EXAMINATION FOR LIFE ASSURANCE.

M.D. writes: I was recently asked to examine for insurance a healthy well-developed mechanic by a company which pays a half-guinea fee when the amount insured for is under £500, and one guinea if the amount is above that sum. The examination form, which was of a most searching and precise nature, requested the examiner to test the insurer's urine, and give the result of a detailed analysis thereon. Seeing no reason for giving the analysis in question I omitted it, but a request came from the office requesting me to furnish it. This I refused to do unless I had at least a guinea fee. Why should a medical man, for a sum like half a guinea, spend an hour over the examination of a case, and in addition be called upon to analyse the urine, when chemists will not conduct such analysis under less than a guinea? Surely it is time that the question of insurance fees should be placed upon some more remunerative basis than that on which it now stands.

** The question of the rate of remuneration for the examination of applicants for life assurance is constantly cropping up, and we think that the recently formed "Association of Medical Officers to Life Assurance Companies" would be doing a public service in eliciting a discussion on the subject, and formulating suggestions for the guidance of the various offices. "M.D." will, of course, bear in mind that an examination of a specimen of urine to detect the presence or absence of albumen and sugar takes less than five minutes, and that no report on an applicant for life assurance is complete without this information.

MEDICAL WOMEN AS WORKHOUSE DOCTORS.

M.D. writes: With regard to Miss Dickson's three questions, may I be allowed to urge the following for her consideration and as a reply? To the Question 1 the answer is of course there is no difference in the abstract, but this question and the next one calmly assume that women prefer the attendance of a woman doctor, whereas it is a well-known fact that by far the greater proportion of women, even though suffering from a gynaecological complaint, would consult a male