

Letters, Notes, and Answers.

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

CORRESPONDENTS not answered are requested to look at the Notices to Correspondents of the following week.

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 *Articology, London*. The telegraphic address of the BRITISH MEDICAL JOURNAL is *Articulate, London*.

TELEPHONE (National):—
2631, Gerrard, EDITOR, BRITISH MEDICAL JOURNAL.
2630, Gerrard, BRITISH MEDICAL ASSOCIATION.
2634, Gerrard, MEDICAL SECRETARY.

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.

MR. FRANK KENNEDY CAHILL, F.R.C.S. (Dublin), would like to find out whether there is a book in French corresponding to Deutsch's medical German, containing a list of medical terms in French, followed by conversations in the form of question and answer for each region of the body.

* * * We know of none. Perhaps some of our readers may be able to supply the information required.

H. W. asks for information in the case of a young man, with no history of bladder, kidney, or urethral disease, who suffers when at home from frequency of micturition, the bladder requiring to be emptied about every two hours. There is also marked urgency. On the other hand, he never requires to rise at night, and when on a visit from home, or when his daily routine of work is interfered with, so that his mind is off his bladder, he can carry his urine for a normal time. There is nothing abnormal in the amount or constituents of the urine. The condition is of about two years' standing.

MR. BOWLES, SURGEON, OF HIGH WYCOMBE.

S. D. C. writes: Dr. Martin Llewellyn of High Wycombe is said to have accompanied Charles I to the scaffold and to have received from the King the gloves he wore upon that occasion. The doctor is said to have transmitted these gloves to a great granddaughter, who married a Mr. Bowles, surgeon, of High Wycombe. Is anything known of this Mr. Bowles or of the present whereabouts of the gloves? The gloves recently obtained by a law suit have no documentary history, so I was informed by the gentleman who received them and who courteously gave me all the information he could about them.

INCOME TAX.

TAXED has professional earnings of £40, and untaxed income from interest amounting to £8. The proportion of his rent regardable as paid for professional purposes is £60. On inquiring whether he is bound to pay income tax on the £8, he is referred to various sections of the Income Tax Acts.

* * * Our correspondent has two means of obtaining relief. He may, if his total income from all sources be under £160 or under £700, claim total exemption or an abatement, as the case may be; or, if his income exceed £700, he may prove that he has made a loss on his profession after charging all expenses, and may claim to be relieved of tax on other income to the extent of that loss, under the Customs and Inland Revenue Act, 1890. He should communicate with the Surveyor of Taxes accordingly.

F. D. H. R. receives a salary of £150 and extra fees as district medical officer, and wishes to know whether he may return his salary for assessment under Schedule E and the extra fees under Schedule D, together with his income from private practice.

* * * The Revenue authorities will raise no objection to the inclusion in the general return under Schedule D of both the salary and the fees on the average of the three preceding years; they might, perhaps, demur to treating the salary under Schedule E and the fees under Schedule D, though there is much to be said for that course.

LETTERS, NOTES, ETC.

DR. A. A. WARDEN (Paris) writes: It is impossible to read without the greatest interest all that Mr. Leonard Hill writes on his experiences with oxygen as a therapeutic agent. One gathers that the usual method by which Mr. Hill has administered oxygen is by inhalation, the defects and uncertainty of which have led him to construct the ingenious apparatus figured on p. 71 of the BRITISH MEDICAL JOURNAL, January 13th. Mr. Hill states that "undue alarm as to the poisonous effect of oxygen has been felt by the medical profession," but our neglect has surely rather been due to our ignorance of its physiological action and therapeutic value, and to the fact that hitherto no apparatus save the clumsiest has been at our disposal for applying it. Mr. Hill points out that "in the struggle with the invading micro-organism (in pneumonia) oxygen helps to maintain the strength of the heart and so preserve the patient until the process of immunization is established and the disease arrested," the object evidently being to get the oxygen absorbed as quickly as possible. Surely then the subcutaneous injection of oxygen has many advantages over its inhalation, not only in diseases of the respiratory tract, but also in many other conditions—septic infections, tuberculosis, anaemia, etc. For many years Professor Thiriard, of Brussels, and others have thus used oxygen. In 1906 Dr. Albert Rouet published a case of ascitic tuberculous peritonitis successfully treated by the intraperitoneal injection of oxygen. In December, 1910, I injected several litres of oxygen in a patient with bad double pneumonia. The great difficulty hitherto has been that of accurately measuring and controlling the amount of oxygen injected, the only apparatus available being the large metallic reservoirs used in commerce, or the oxygen bag. (I used Professor Thiriard's instrument filled from a large cylinder under pressure.) This difficulty has now been overcome by the admirable apparatus designed by my friend, Dr. Raoul, Bayeux, and presented by him at the Academy of Sciences on November 20th, 1911. It consists of three parts: (1) A light but strong and accurate "détendeur" or decompressor. (2) A series of small cylinders containing the oxygen under a pressure of 100 atmospheres, so that a litre of the gas is about the volume of a cigar. (3) A sensitive tap that allows the oxygen to be distributed at rates varying from 1 c.c. to 1 litre per minute. I believe that in oxygen thus used we have a non-toxic and potent remedy likely to prove of use in many pathological conditions.

A STUDY OF "PSYCHICAL RESEARCH."

IN the review of Dr. Tuckett's book, *The Evidence for the Supernatural*, which appeared in the JOURNAL of February 10th, at line four from the bottom of the first column of p. 309, the title of the work by Mr. Whetham, F.R.S., referred to as "Recent Development of Psychical Research" is the *Recent Development of Physical Science*.

SHADOW TEST IN RETINOSCOPY.

DR. GEORGE HARDYMAN (Bath) writes: In calculating the spherical and cylindrical dioptric measurement by the shadow test in retinoscopy, I have found the following algebraic formula useful:

$$\frac{x-1}{(y-x)\phi}$$

x being the dioptric measure of the lens abolishing the shadow in the horizontal meridian, and y the dioptric measure of the lens abolishing the shadow in the vertical meridian. The calculation is made as if the axis was vertical, and afterwards corrected if it be not so. The above formula, I believe, holds good for all forms of regular astigmatism as well as for emmetropia, hypermetropia, and myopia.

ERRATA.

THE following corrections should be made in Dr. Crofton's address on the prevention and treatment of pulmonary tuberculosis, published in the JOURNAL for February 10th:

Page 295, col. 1, lines 36-38, for "13 (8 per cent.), in the case of males and of 15 (6 per cent.) in the case of females," read "13 to 8 per cent. in the case of males, and of 15 to 6 per cent. in the case of females."

Page 296, col. 1, line 50, for "neurones," read "hormones."

Page 298, col. 2, line 26, for "cases," read "causes."

Page 298, col. 2, lines 35-36, for "acts as an excellent stimulant and for the formation of antitoxin," read "acts as an excellent stimulant for the formation of antitoxin."

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Eight lines and under	0 4 0
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