

Letters, Notes, and Answers.

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QUERIES AND ANSWERS.

CHRONIC URTICARIA.

"A. F." writes: "Pruritus" should try small doses of thyroid, watching carefully the pulse. I had a similar case that went on for over a year, in spite of all treatment, including dieting, calcium, colloidal manganese, etc. I noticed a very minor degree of hypothyroidism, and gave thyroid and iodine, with a very satisfactory result.

MORBID SHYNESS IN A CHILD.

"K. H. G." writes: In reply to my letter in the **JOURNAL** of February 26th (p. 410) asking for suggestions as to the treatment of a case of morbid shyness in a child of 8, Dr. R. MacD. Ladell (March 19th, p. 551) states that to treat the cause of the shyness one must be aware of what is passing in the child's mind, and this can only be done by a process of psychological analysis. This hardly seems practicable to me in a case of this nature, where the presence of a stranger (even a strange girl of about her own age) causes her to run away, hiding her face with her hands—all entreaties being unavailing.

INCOME TAX.

Wife's Income: Letting of Unfurnished Rooms.

"OVERTAXED" inquires whether his wife can claim repayment in respect of her separate income of £40, and whether he is liable to tax on receipts from letting unfurnished a portion of his own house.

* * (1) No claim can be made in respect of the wife's income; the income of husband and wife are aggregated, and presumably all personal allowances have been made from the husband's income. (2) Any liability to tax on the receipts from letting is covered by the assessment under Schedule A—sometimes referred to as the Property Tax—and the item need not be separately declared.

Income from Irish Free State.

"H. S.," who resides in England, understood that double taxation was done away with in 1926, but is informed that English tax will still have to be paid on the Irish property, although the income has already borne Irish tax.

* * The change made was in the direction of simplification, and it was certainly understood at the time that it would reduce the number of cases where both payments would have to be made. Assuming that the year in question is 1926-27, we suggest that "H. S." should ask the local collector to arrange for the English assessment to remain in abeyance until the Irish tax can be reclaimed and set against the English liability. A call at the office of the inspector of taxes might prove helpful.

LETTERS, NOTES, ETC.

THE NEWSPAPER REPORTER.

The average newspaper reporter seems to be, in the strict etymological sense, incorrigible. In a report of an address to the Hammersmith Rotary Club a few days ago Sir Squire Sprigge was made to confuse the General Medical Council—a statutory body appointed in accordance with Acts of Parliament, and possessing, among other functions, certain penal powers with

regard to registered members of the profession—with the Council of the British Medical Association—the executive of a purely voluntary body. He was also made to say that Britain was the only country where a man could not practise as a doctor unless he was on the *Register*. Of course, Sir Squire Sprigge never made any of these blunders, but they were passed by the editor of a news agency and published by a great London daily newspaper. If a reporter were to make blunders on the same scale about the Lincolnshire Handicap or Grand National, what would happen to him?

COINCIDENT HERPES AND VARICELLA.

Two cases of the simultaneous occurrence of varicella and herpes zoster were reported in our columns on March 5th (p. 423), and an account of another case is published by Dr. R. L. Thorold Grant in the *Medical Journal of Australia* for February 5th, 1927. A woman, aged 37, had had Hodgkin's disease for four years; it was kept in check by deep x-ray therapy, and signs of enlarging mediastinal glands had recently been treated in this way; shortly after the last irradiation a severe attack of herpes zoster along the course of the left sixth thoracic nerve began and was followed a few days later by an equally severe attack of herpes zoster along the course of the right seventh thoracic nerve; eventually the complete encirclement of the patient with a ring of herpes. At the height of the eruption she developed a profuse generalized varicella rash on the chest, back, abdomen, and scalp, with scattered vesicles on the extremities and face, and within the mouth. There was at that time in Adelaide a mild epidemic of chicken-pox, which the patient had not had in childhood.

ENLARGED PROSTATE APPARENTLY CURED BY COLD WATER APPLICATIONS.

DR. J. CORBET FLETCHER (London) describes a case of reduction in size of an enlarged prostate following continued applications of cold water to the perineum. He states that four years ago a man, aged 58, consulted him for difficult and painful micturition, the urine being tinged with blood. In addition to a large prostate, a ring of external piles was present. For the bladder condition a mixture of potassium bicarbonate, hyoscyamus, and camphor water was prescribed, and the patient was advised to bathe the piles with cold water twice a day. Last month Dr. Fletcher re-examined him and found that the piles had disappeared and that the prostate had returned to the normal size and gave no trouble. The patient has now no bladder difficulty of any kind, and attributes the cure to the cold water applications. Dr. Fletcher adds that in a long medical career he has never encountered another case of enlarged prostate cured except by operation.

CO POISONING.

DR. CHARLES W. CRAWSHAW (Ramsbottom) writes: In your issue of March 5th last Dr. Douglas J. A. Kerr, referring to the extreme toxicity of carbon monoxide, states that an individual breathing an atmosphere containing 1 per cent. of carbon monoxide will have 50 per cent. of carbon monoxide in his blood in fifteen or sixteen minutes. Thirteen years ago I received an urgent message to attend a fireman who had been taken suddenly ill whilst on his way to a fire. On my arrival at the warehouse to which he had been taken I found that he was dead. I was particularly impressed with the bright red colour of his lips and the pink tint of his skin. His fellow firemen informed me that he was apparently well when he took his accustomed place on the engine, but collapsed when about half a mile of the journey had been covered. The fire engine was a horse-drawn vehicle with a low chimney, and the deceased, whose seat was immediately behind the chimney, would be in a likely position to inhale the fumes. The *post-mortem* examination revealed no obvious cause of death, and at the inquest I stated, as my opinion, that death was due to carbon monoxide poisoning, basing this opinion on the rapidity of death and the *post-mortem* colour of the mucous membranes and skin. The interesting feature in the case was the fact that it was possible to inhale a poisonous dose of carbon monoxide in such circumstances—on a moving vehicle in the open air.

A DISCLAIMER.

DR. ALEXANDER BRYCE (Birmingham) desires to disclaim all responsibility in connexion with a paragraph—misleading in substance—which appeared in the *London Daily Mail* of March 19th, referring to his article on "Anaphylaxis and ultra-violet light treatment" in the **BRITISH MEDICAL JOURNAL** for that date.

VISUAL IMAGERY: CORRECTION.

PROFESSOR T. H. PEAR asks us to correct a technical term in the report of his lecture on visual imagery published in the **JOURNAL** of March 12th (p. 471). In line 13 of column 2 for "ideatic" read "eidetic."

VACANCIES.

NOTIFICATIONS of offices vacant in universities, medical colleges, and of vacant resident and other appointments at hospitals, will be found at pages 39, 40, 41, 44, and 45, of our advertisement columns, and advertisements as to partnerships, assistantships, and locumtenencies at pages 42 and 43.

A short summary of vacant posts notified in the advertisement columns appears in the *Supplement* at page 103.