

THE TREATMENT OF PNEUMONIA.

DR. CLAUDE A. P. TRUMAN (Exeter) writes with reference to Dr. Martland's note in the issue of October 26th: I was in the habit of using the first two drugs of his prescription (creosote and potassium iodide) continually for pneumonia and other pulmonary affections during my term of practice in Reading (1891-1906), and I found them most useful. I often used, however, guaiacol instead of creosote for various reasons; and I have found in many drugs, combined with nux vomica, equally useful in many disorders of the stomach and bowel.

SCARLATINIFORM RASH IN INFLUENZA.

DR. H. CAMERON KIDD (Medical Superintendent, Bromsgrove, Droitwich, and Redditch Joint Isolation Hospital) writes: The scarlatiniform rash described by Dr. Robert Kirkland in the JOURNAL of November 2nd (p. 504) has evidently been occurring in this district. In my report to the committee at the end of September I mentioned that three cases had recently been admitted to the hospital from different districts with a bright rash suggesting scarlet fever but without other symptoms of that disease, and that two of these children had developed true scarlet fever within a fortnight of admission. My own idea was that the rash must be a result of some mixed influenzal infection. On October 26th I was asked by Dr. W. H. Rowlands, who had not seen my report, to see five children in the Guardians' Cottage Home who had simultaneously developed a similar rash just five days after mixing with a first case which Dr. Rowlands had very properly decided not to be true scarlet fever, and had kept isolated for a fortnight. In all these cases the rash, though vivid and typical in appearance, was unaccompanied by any other symptoms except a slight initial rise of temperature.

INFLUENZA IN THE LAY PRESS.

DR. J. McOSCAR (Buxton) writes: Are we not now going through enough dark days, with every man, woman, or child mourning over some relation, lost owing to one man's aggrandisement? Yet we read in our daily newspapers the enormous fatalities due to the "influenza epidemic." When epidemics occur deaths always happen. Would it not be better if a little more prudence were shown in publishing such reports instead of banking up as many dark clouds as possible to upset our breakfasts? Some editors and correspondents seem to be badly needing a holiday, and the sooner they take it the better for the public moral.

THE SPRAY CHAMBER IN THE PREVENTION OF INFECTION.

SOME time ago we received from Captain E. C. Thwaites, R.A.M.C., a note on the use of a spray chamber in checking the spread of measles. On an outbreak of the disease in a cadet school all members, officers and cadets and permanent staff, were passed through the spray chamber, and no further spread of the disease occurred. As the disease was dying out this experiment was not conclusive, but later another experiment was made. The members of a cadet unit in process of formation came from an area infected with measles, and five cases occurred a few days after arrival. These were promptly segregated and the whole unit, numbering 389, was at once passed through the spray chamber, as were subsequent arrivals from the infected area. No further cases of measles occurred. The spray used was the Levick, which consists of two boiler chambers, an open copper bowl, and a ring burner with asbestos, the whole contained in an iron receiver. The circular boiler is filled with 2½ pints of warm water, the centre boiler with 2½ pints of disinfecting solution (chloramine-T 0.5, 2 per cent. dissolved in water), and the copper bowl with cold water. Half a pint of methylated spirit is poured on to the asbestos ring and lighted, and the boiler placed on top of it. The jets soon begin to emit a fine spray. The apparatus is placed in a room of approximately 1,000 cubic feet and capable of thorough ventilation; while the spray is working it must be tightly closed. Such a room will have accommodation for about thirty men; these should inhale the spray for about eight minutes, and they are then quickly evacuated and another thirty admitted. At the expiration of the second period the spray will have become exhausted. While recharging the spray the room should be thoroughly ventilated. By efficient organization 150 men can be passed through the room in a few minutes over the hour.

EASY CAR STARTING IN COLD WEATHER.

DR. JULES F. REY (Bognor) writes: For years, like many others who do not possess a heated garage, I have experienced the greatest trouble in starting up my car in frosty weather, going to the length sometimes of draining off all the water in the radiator and introducing hot water, flooding the carburettor, injecting petrol in the compression taps, and, in desperation, placing a lighted paraffin lamp under the engine for some hours. These methods are all satisfactory, but require time, and cause a good deal of annoyance, especially when, as usual in the morning, one is in a hurry. Having reached the limit of my patience with the possession of a self-starter car, and determined not to misuse the accumulators, I sat down and devoted a quarter of an hour to thinking out the problem, and, to cut a long story short, proceeded to put my theory into practice. Triumphant carrying out a kettleful of boiling water (about a pint), at first I cautiously poured the contents over the induction pipes, carburettor, and spraying chamber, putting first of all a small tin cap over the

hole on top of the float chamber. I was gratified that at the first turn of the handle, or the first push of the self-starter, the engine started as though on a hot summer's day. One need not be afraid of pouring boiling water over the induction apparatus, as these are all hollow tubes of metal, and no harm can come to them, nor is there any fear of water getting into the carburettor with the engine at rest and a small plug or plate placed over the small hole of the float chamber. I am certain that this simple method will save thousands of motorists untold miseries and curses.

ADMIRALTY SURGEONS AND AGENTS.

MEDICUS writes: Readers of the JOURNAL will have observed an appeal of the Medico-Political Committee to the medical referees under the Ministry of Pensions to state their opinion as to the adequacy of the fees paid by the Ministry for the nature of the work done. Has it not been a cardinal policy of Government departments to exploit the medical profession? Could there be a more glaring example than the petty fees paid to Admiralty surgeons and agents? Yet nobody seems to voice their cause. Can it be that they are themselves supine to the injustice under which they suffer? And yet it only requires a ventilation of their grievances and a combination of effort to have these grievances redressed, to bring the department concerned to acknowledge the just claims of a deserving body of men.

"AN EIGHTEENTH CENTURY QUACK."

A PARAGRAPH with this title, dealing with Sir James Jay, an eighteenth century quack curer of gout, was published on September 21st. Dr. Clippingdale informs us that a most extraordinary coat of arms was granted to Jay: Three Midas heads, black, crowned gold, upon a white field. A Midas head, in heraldry, is, he adds, the head of a man with the ears of an ass.

ERRATA.

IN a portion of the issue of last week's JOURNAL a misprint occurred in the second line of page 494, column one, the figure 49 appearing by mistake for 46. The error was corrected in the latter part of the edition. Another misprint occurred in Dr. Hope Grant's note on the treatment of pneumonia (p. 504); the word "lobar" in the seventh line should be "lobular."

THE BELGIAN DOCTORS' AND PHARMACISTS' RELIEF FUND.

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Subscriptions to the Fund should be sent to the Treasurer, Dr. H. A. Des Vœux, at 14, Buckingham Gate, London, S.W.1, and should be made payable to the Belgian Doctors' and Pharmacists' Relief Fund, crossed Lloyds Bank, Limited.

THE appointments of certifying factory surgeons at Llanfair-caereinion (Montgomery) and Ballyfeard (Cork) are vacant.

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