

## Letters, Notes, and Answers

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### QUERIES AND ANSWERS

#### Lymphatic Oedema

"G.P." writes: I should be much obliged for information as to the treatment of this case of lymphatic oedema. The patient is a woman aged 35, both of whose ankles and legs swell very much on walking even a moderate distance; no pitting on pressure. The oedema subsides on resting for a time. She becomes very short of breath on slight exertion. Her height is 5 ft. 2 in. and her weight 12 st. 3 lb. In spite of a very small appetite and avoidance of everything that might put on weight she is getting stouter. Thyroid has been tried, but without benefit so far. The patient suffers from menorrhagia monthly. She used to work in a canteen, standing for twelve hours a day.

#### Facial Hirsuties in the Female

"RAYCUS" writes: Will any reader kindly give experience and details of treatment of facial hirsuties in the female by endocrine extracts?

#### Otitis Externa from Swimming Pools

Mr. ALFRED MERRIN, in reply to Dr. R. S. Gilchrist (*Journal*, August 21, p. 401), writes: Some years ago you published a letter from me in which I recommended the use of fibrous plasticine for ear plugs. I have used these plugs myself, and have found that they absolutely prevent water from entering the ears when swimming or diving. If Dr. Gilchrist will write to "Harbutts," 56, Ludgate Hill, London, E.C.4, enclosing 8d., and asking them to send a tin of fibrous plasticine, he will receive sufficient to last him many years. A portion of the plasticine should be fashioned into the shape of a tack and then inserted in the ear, the point foremost and the head well flattened against the ear. Pressure with the forefinger behind the ear will loosen the plug sufficiently to enable it to be withdrawn. The same plug can be used indefinitely.

Mr. L. A. RIDDELL (Cornwall) writes: When living on a little tropical island some years ago I became afflicted with a painful otitis externa due to frequent swimming in the open sea. Consultation of Castellani's *Tropical Medicine* suggested that it was a mycotic infection due to repeated maceration of the skin of the external ear. The treatment suggested was the application of "nascent iodine," formed (it was said) by the simultaneous use of sodium iodide and hydrogen peroxide locally. For some reason or other I tried to simplify the treatment and used a 1 in 3 watery dilution of tr. iod. mitis. This was applied with thin wisps of cotton-wool on a fine probe—the use of any stouter instrument being precluded by the great swelling of the skin of

the meatus, which is a noticeable feature of the condition. The treatment is painful at first but it gives speedy relief, and I treated successfully not only myself but several others. Swimming can soon be resumed, and any relapse (which is very common once the condition has been acquired) can be nipped in the bud as a rule by just one application overnight whenever the tell-tale itching or wetness of the meatus appears.

#### Income Tax

##### Loss on Professional Year

"FORD," writing from the Irish Free State, explains that he is allowed cost of replacement of a car instead of depreciation. If that allowance exceeds the profit, can a refund be claimed for past years?

\*\* No. The cost of replacement is regarded as a professional expense of the year in which the car was replaced and cannot be given effect as regards prior years. The loss—that is, the excess of the cost of replacement over the year's earnings—can, however, be carried forward against future years.

##### Honorarium

"A. B. C." has been acting as honorary consulting surgeon to a hospital, receiving annually a gratuity of £50, and has understood that acceptance of the "gift" did not in any way prejudice his honorary position. Is the £50 liable to income tax?

\*\* In our opinion—yes. The scope of the charge under Schedule E is wide: tax is assessable in respect of "every public office or employment of profit," and the section includes as income "all salaries, fees, wages, perquisites, or profits whatsoever." "A. B. C." undoubtedly holds an office or employment, and the honorarium appears to be within the above description. The £50 is apparently not specified in any contract of office, but the fact that it is paid annually, and that the office was accepted and held in those circumstances, takes it out of the category of a "gift."

### LETTERS, NOTES, ETC.

#### Buccal and Lingual Ulcers

Mr. HERBERT TILLEY, in replying to "Puzzled" (*Journal*, September 11, p. 564) writes: In the absence of any description of the ulcers one presumes that they are discrete, pale, superficial, and very sensitive to touch or even to the passage of liquids and semi-solid foods. Furthermore, perhaps it may be assumed that the ulcers have failed to respond to general treatment and to such local applications as silver nitrate, copper sulphate, etc. If these surmises be correct, it is more than probable that the lesions are caused by a deficiency of vitamin A and possibly D, in the patient's ordinary dietary. During the past two years three similar cases have come to notice, and, like "Puzzled's" patient, mine were also females who had proved equally resistant to medicinal and climatic treatment. But each of them responded quickly to preparations containing cod- or halibut-liver oils which are particularly rich in the first-mentioned vitamin. In addition to these remedies, the patients were urged to take an ample supply of egg-yolk and fresh green vegetables. In two of my patients intramuscular injections of campolton (Bayer)—a highly concentrated extract of cod and halibut oils—were followed by complete disappearance of the ulcers within three days! It may not be without significance that the four cases with which this note is concerned were females, and maybe their susceptibility to "buccal and lingual ulcers" is due to their addiction to the carbohydrate elements of foodstuffs, especially when presented in their most attractive forms and consumed frequently with ample quantities of tea. Man cannot live on bread alone!

#### Corrigendum

##### Cork Street Fever Hospital, Dublin

Our attention has been drawn to the omission of reference to Cork Street Hospital in the summary of Dublin teaching hospitals in our Educational Number (September 4). The hospital, founded in 1801, is one of the oldest fever hospitals in the British Isles, and is the largest teaching fever hospital (280 beds) in the Irish Free State. It is recognized by the National University, Trinity College, and the Irish Conjoint Board for undergraduate and postgraduate instruction, classes for medical students being held each term, and for D.P.H. students during the winter term.