

## Letters, Notes, and Answers

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### QUERIES AND ANSWERS

#### Case for Diagnosis

Dr. E. S. HAWKES (Budleigh Salterton) writes: I should be grateful for any suggestions as to diagnosis and treatment of the following case. A schoolgirl aged 16½ years has for ten months been running a temperature of 99.2° to 100.2° F. about the middle of the day; the temperature then drops to about normal. There are no other physical signs, except a slight decrease in superficial and deep reflexes. The girl looks ill and has extreme lassitude. I am quite satisfied that there is no question of neurasthenia. A consultant physician and a skilled pathological examination failed to reveal any sign of disease; yet the girl is obviously ill.

#### Varicose Veins

"M.E.D." writes: A female patient of mine has had large varicose veins in both legs injected on about twelve occasions without any result. The solution used was quinine and urethane. Can anyone suggest the reason for this, and if it would be advisable to try some other solution?

#### Cattle Ringworm in Man

Dr. E. S. HAWKES (Budleigh Salterton) writes in reply to Dr. Stewart (*Journal*, November 12, p. 1027): Most of these cases can be cleared with ung. cuprosal (Duncan Flockhart and Co.). More severe lesions, with secondary sepsis, should be cleaned with frequent applications of eusol by day, the ointment being used at night. The only case that I have had that failed to respond to this treatment yielded to ultra-violet irradiation in increasingly strong doses.

#### Protection of Eczematous Face

Dr. R. V. MONAHAN (Navan) writes in reply to Dr. D. Braham (*Journal*, November 12, p. 1027): I would suggest that a close study of these cases will in most instances reveal some evidence of a lack of thyroid secretion—dandruff, dry or falling hair, outer half of eyebrows missing or badly nourished; dry, pale, thick, inelastic skin; slow pulse, etc. These patients will do remarkably well when the deficiency is corrected and they are kept on a maintenance dose of thyroid. I give them a three-weeks course, repeated indefinitely with an interval of one week between each course. The necessary dose of thyroid varies, but the pulse rate should be pushed to the region of 80 a minute and should never be allowed to exceed 90 a minute. A daily dose of 5 to 10 grains of fresh gland extract will usually be sufficient; later, when the symptoms of eczema have disappeared, a smaller dose will suffice to keep the patient at a normal level; possibly 1 or 2 grains a day will be ample.

## LETTERS, NOTES, ETC.

### A Jubilee Volume

We have received from Bayer Products Ltd. a copy of a jubilee volume entitled *Fifty Years (1888-1938) of Bayer Remedies*. The volume is beautifully produced and the illustrations are particularly noteworthy. Much information of general historical medical interest is given regarding the development of the synthetic drugs which to-day are of such dominant importance in therapeutics. The development in this field has been so rapid that everyone has been too busy testing new discoveries to spare time to write the history of their origin. This volume contains many interesting notes regarding the early work of Behring and of Ehrlich, laboratory notes on the discovery of plasmoquine and atabrin, the struggle attending the introduction of local anaesthesia, etc. Phenacetin was the first synthetic preparation introduced into medical science bearing the name of Bayer, and it is an interesting fact that only fifty years separates these early stages of synthetic organic drugs from the recent triumphs of organic chemistry in the synthesis of vitamins and hormones.

### Tuberculosis and Post-partum Haemorrhage

Dr. J. M. MACPHAIL (Middlesbrough) writes: I have noted that women who are not themselves tuberculous but who belong to a tuberculous family readily succumb to post-partum haemorrhage, or puerperal septicaemia, a short time after a confinement. To all appearances they may have been in perfect health, and this makes their deaths all the more tragic. I refer here not to the patients with an acute pleurisy which is the beginning of an acute tuberculosis, but to the apparently healthy young women who suddenly and unexpectedly succumb. Those who scoff should remember that irregular menstruation is very common in young tuberculous people.

### Diagnosis of Malaria

Dr. J. E. FOLEY (Sandown) writes: We have all our own methods for the diagnosis and treatment of malaria, but I would like to stress the importance of not placing too much faith in a negative blood slide and of remembering that each attack must be followed up with adequate treatment, irrespective of how much annoyance, unpopularity, and criticism one lays oneself open to. In cases in which a blood film is negative quinine is too often withheld or not given in adequate dosage. We have specific remedies for malaria, and it is of the utmost importance that these drugs should be administered as early as possible; malaria is, in fact, our most urgent medical emergency in the East.

### Choice of Careers

The Ministry of Labour has published new editions of the pamphlets on Librarianship (No. 11), Nursing (No. 17), and Secretarial Work for Women (No. 19), which are part of the series entitled *Choice of Careers* compiled by arrangement with the Incorporated Association of Headmasters and Headmistresses of Public Secondary Schools. Each of the pamphlets sets out the nature of the work, the qualifications needed, the methods and cost of training, and the prospects in the various branches of the occupation. They may be obtained from H.M. Stationery Office or through any bookseller, price 3d. (Nos. 3, 11, and 19) and 4d. (No. 17).

### The Ostermilk Book

The Glaxo Laboratories, Ltd., of Greenford, Middlesex, announce a new and revised edition of *The Ostermilk Book*, the third since its first appearance just over eighteen months ago. It is intended for the guidance of mothers in the care of themselves and their infants. Copies of the book will be sent on request to any medical practitioner.

### Corrigendum

Surgeon Lieutenant S. GAY FRENCH, R.N., writes: I much regret that through an error of typing the paper by Surgeon Lieutenant-Commander Horan and myself published in the *Journal* of November 5 (p. 942) was headed "Sulphonamide in the Treatment of Acute Mastoiditis." As the context of the paper shows, the heading should have been "Sulphonamide in the Prevention of Acute Mastoiditis." We know of no treatment of the acute disease, except the usual surgical measures. I apologize to any reader whom this error may have misled.