

## Medical News

Prof. Major Greenwood, F.R.C.P., F.R.S., will give a public lecture on "Civilian Hazard of Life in this War and in the Past: A Profit and Loss Account for 1915-16 and 1940-1" at the London School of Hygiene, Gower Street, W.C., on Thursday, July 16, at 2.30 p.m.

The thirty-first Long Fox Memorial Lecture will be delivered in the Lecture Theatre of the H. H. Wills Physics Laboratory (Royal Fort), University of Bristol, on Tuesday, July 7, at 8.30 p.m., by Prof. C. M. Yonge, D.Sc., whose subject is "The Experimental Study of Development."

The London and Home Counties branch of the Child Health Planning Group will hold its inaugural meeting at 13, Hill Street, Berkeley Square (British Dental Association headquarters), on Saturday, July 18, at 2.30 p.m.

The name of Col. Robert Bruce, D.S.O., M.D., Deputy Lieutenant for the County of Aberdeen and chairman of the Territorial Army Association for the County of Aberdeen, was omitted from the list of Birthday Honours published in the *Journal* of June 20. He received the C.B. (Civil Division).

The Heberden Society has awarded the Heberden Medal for Research in Rheumatic Diseases for 1942 to Dr. Philip S. Hench of the Mayo Clinic, Rochester, Minnesota, in recognition of his distinguished contributions to the subject over a number of years, and particularly of his most recent work on the effect of jaundice on the course of rheumatoid arthritis.

The 89th annual general meeting of the Governors of Epsom College was held on June 19 at 49, Bedford Square, London, W.C. In moving the adoption of the Council's report, Lord Leverhulme, the President, congratulated the Treasurer, Council, headmaster, and bursar for the way in which they had tackled the burdens of an exceptionally difficult year, which showed a reduction in numbers and a financial loss. The report was unanimously adopted, and the Governors received the announcement of Foundation scholarships, pensions, and educational grants awarded by the Conjoint Committee in May.

The Queen has allocated £2,000 from the "Bundles for Britain" Fund to the Belfast Hospital for Sick Children towards the establishment of a child guidance clinic.

## Letters, Notes, and Answers

All communications in regard to editorial business should be addressed to THE EDITOR, BRITISH MEDICAL JOURNAL, B.M.A. HOUSE, TAVISTOCK SQUARE, LONDON, W.C.1.

ORIGINAL ARTICLES AND LETTERS forwarded for publication are understood to be offered to the *British Medical Journal* alone unless the contrary be stated.

Authors desiring REPRINTS should communicate with the Secretary of the Journal Board, B.M.A. House, Tavistock Square, W.C.1, on receipt of proofs. Authors over-seas should indicate on MSS. if reprints are required, as proofs are not sent abroad.

ADVERTISEMENTS should be addressed to the Advertisement Manager (hours 9 a.m. to 5 p.m.). Orders for copies of the *Journal* and subscriptions should be sent to the Secretary.

TELEPHONE NO.—B.M.A. and B.M.J.: EUSTON 2111.

TELEGRAPHIC ADDRESSES.—EDITOR, *Aitiology Westcent, London*; SECRETARY, *Medisecra Westcent, London*.

B.M.A. SCOTTISH OFFICE: 7, Drumsheugh Gardens, Edinburgh.

### QUERIES AND ANSWERS

#### Coltsfoot

"TUSSILAGO" writes: Can any colleague put me wise about colts-foot, said to be good for asthma? Should the leaves be young or mature? How are they cured? I read that coltsfoot was smoked before the arrival of tobacco in this country, and that Pliny advised that the smoke from the burning leaf be inhaled through a reed. Information about the manufacture would interest me.

#### Blood Slides in Heat Pyrexia

Wing Commander S. B. S. SMITH (R.A.F. Medical Branch) writes: I note that Surg. Lieut.-Cmdr. Corr in his article on treatment of heat pyrexia by lumbar puncture (June 20, p. 761) makes no mention of blood slides being taken to exclude malaria. Hyperpyrexial malaria is not uncommon when high atmospheric temperature is combined with high humidity. Were blood slides taken at a later date, and if so with what result?

### Income Tax

#### Assistant's Accommodation

D. S. pays his assistant a salary, etc., "and £113 allowance for rent and rates of a furnished house which he has taken." He understands that if he pays the rent himself the assistant would not have to account for tax on the £113; but could he (D. S.) continue to deduct that amount as a professional expense?

\*\* The reply cannot be given in quite such simple terms. If D. S. had taken the furnished house and required the assistant to live in it, he could have deducted the £113 as a professional expense and the assistant would not have been liable to tax on it, as the benefit would not have been convertible by him into money. But as matters stand payment of the £113 is a monetary liability of the assistant, and if D. S. discharges that liability for him the effect is the same as if he had paid him that amount in cash. If the tenancy and service agreements are altered making D. S. the tenant and requiring the assistant to live in the house provided, the assistant will cease to be liable to tax on the £113 as from the effective date of the change, and D. S. will still be entitled to deduct that amount as a professional expense; but until such a change is made no difference in the legal position with regard to income tax would be created merely by the rent and rates of the premises being paid by D. S. instead of by the assistant.

### LETTERS, NOTES, ETC.

#### A Family History of Intussusception

Mr. JOHN J. LISTON, honorary surgeon to the Royal Portsmouth Hospital, writes: In May this year I operated on Sylvia X, aged 4 months, for intussusception. It was of the ileo-caecal type and early. She was the 14th child of the family. The mother stated that several of her children had suffered from the condition previously. On inquiry the following history was obtained. Reginald X died after operation for intussusception; age and date not known as the records have been "blitzed." Leslie X, aged 9 months, died after operation on April 5, 1930, for intussusception. Kenneth X, operation for intussusception on July 30, 1939, aged 3 years, alive and well. Ronald X, operation for intussusception on March 3, 1933, aged 5 months. Again operated on for intussusception on July 7, 1933; alive and well. Sylvia X, case quoted above, alive and well.

#### Blood Groups in Nullity Suit: Correction

We regret the clerical error by which, in the note under this title which appeared in our issue of June 20, p. 776, the child's blood group was given as ABN instead of ABMN. The mistake did not contradict the double exclusion of the husband (OM) from paternity which was the outstanding feature of the case, but had the effect of also excluding the mother (BM).

### MEDICINE 100 YEARS AGO

Extract from the *Provincial Medical Journal* of July 2, 1842:

"The peaceful but arduous labours of the medical man render peculiarly obnoxious to him the heart-burnings, jealousies, and strifes engendered by the present condition of medical affairs. To continue his way, quietly and respectably, in the exercise of his profession, benefiting mankind by his science, while he procures for himself and his family the means of honourable existence, is the main object of his ambition. To pursue this object in peace is impossible under the existing state of medical affairs. The conflicting interests of our rulers have entailed upon us the curse of the disobedient son; the hand of the medical man is incessantly raised against his brother; laws and regulations, with the enactment of which we have no concern, have created a diversity of interests in our community, and introduced confusion and strife into a commonwealth where harmony of feeling and identity of interests should have prevailed; the character of the medical man is thus lowered in his own eyes, while the public estimation which he enjoyed is deteriorated in a still greater degree. These facts are brought home to every member of the profession in all parts of the empire. At one time the demand for medical reform was but a low and confused murmur; it is now the voice of the many—strong in number, and confident in the justice of their cause. But what is the measure of reform which we ask?—what the amendment which the enemies of reform affect to represent as a destruction of ancient institutions, prompted by a vague and restless love of change? The majority of reformers—those with whom all prudent and true friends of the profession are prepared to act—require nothing very violent in action, or destructive in its effects; they simply ask, as a fundamental measure, the institution of an uniform qualification for all persons who shall hereafter enter the medical profession; and, as a necessary consequence, they demand an equality of privileges for all those who shall have thus obtained an uniform qualification."