Pharmacology

RADIO-SULPHO CANCER CURE

"A Bad Smell Capitalized for a Million Dollars"

Of "cancer cures" there seems no end. One of the latest humbugs in this line is known as "Radio-Sulpho" and is sold by the "Radio-Sulpho Company," of Denver. The company is incorporated for \$1,000,000 and has for its "consulting physician," E. H. Griffith, M.D., and for its president, one Philip Schuch, Jr., who modestly describes himself as a "chemist and cancer specialist."

Mr. Schuch, Jr., says that he has discovered that the vaccine used in vaccination is the cause of cancer and, further, that he is "able to culture the cancer germs direct from the vaccine." Schuch, Jr., "cures" cancer by means of a combination of "Radio-Sulpho," "Radio-Sulpho Brew" and Limburger cheese. This is not a joke but a "method" recommended by the Radio-Sulpho Company.

Incidentally, Schuch, Jr., has recently leaped into the limelight of newspaper publicity by proposing to introduce at the coming session of the Colorado legislature a bill making it a penal offense to perform an appendicectomy on any but a diseased appendix. Mr. Schuch's love for the medical profession has waned, apparently, since the State Board of Health of Colorado condemned his odoriferous "cancer cure," saying that it is "misbranded, of no medicinal value and that it contains sewer gas."

The patient is instructed to wash the cancer with dilute Radio-Sulpho solution and then apply the "cheese poultice." The poultice is to be made by taking one pound of "real imported" Limburger cheese and kneading it thoroughly with five ounces of pure glycerin. The poultice and washing are to be renewed every twelve hours. Says Mr. Schuch, Jr.:

"A person that has a weak constitution . . . should never use the Limberger [*sic*] cheese for a poultice, as it is too powerful a magnet. A person must be robust and healthy, aside from the cancer, to stand the powerful drawing of Limberger [*sic*] cheese, prepared as described."

This statement is certainly the most—and possibly the only—conservative one in the booklet which is sent out by the concern. The mere thought of plastering a sick person with such an indescribably nauseating mess as Limburger cheese and glycerin is enough to sicken one. Nor is this all! The nostrum itself has as vile an odor as the cheese. In fact, it reeks with sulphuretted hydrogen (the gas which imparts the distinctive odor to rotten eggs) and the state chemist of Colorado has aptly characterized the nostrum as "a bad smell capitalized for \$1,000,000."

The Radio-Sulpho Brew is to be taken internally at the same time that Radio-Sulpho is used as a "wash." Both these products were analyzed by the Colorado State Board of Health, and the state chemist, Dr. E. C. Hill, reports as follows:

"Radio-Sulpho itself consists of a strongly alkaline solution of sodium sulphid, with a little sodium carbonate and a decided odor of hydrogen sulphid (made presumably by heating together sulphur and commercial caustic soda in water).

"Radio-Sulpho Brew is a weakly alcoholic solution of Epsom salts disguised with a bitter vegetable."

The cost of this evil-smelling treatment is \$25.00 a month "and upward." Victims are told that "cancer of the womb and breast are the simplest, easiest and quickest cures made." Schuch, Jr., who apparently has no medical education and no legal right to practice medicine, states in his booklet: "I treat personally the white race only." His charges are: "\$100.00 per day or part of a day and all railroad expenses going to points east of the Mississippi, or west of Salt Lake, Utah. . . ."

An absurd falsehood, even for a nostrum concern whose stock-in-trade is deceit, is found in the booklet:

"When you buy our remedies at the prices we herein quote you, you are not paying the FULL COST of the manufacturing and the marketing of the remedies. You are only paying your share, and I, as a philanthropist, bear the remainder and the greater burden."

The thought of a million dollar quack organization selling its products at a loss would be amusing, if the business it is in were not such a cruel and heartless one. Of course those who are desperately or incurably ill with cancer will grasp at any straw, however worthless or dangerous. But that the

physical suffering and mental anguish of these unfortunates should be increased by the barbarous malpractice of "cancer cure" fakers and by the blasting of hopes falsely raised, is an outrage that civilized communities should not tolerate.

CHINOSOL—A CORRECTION

One of the most valuable pieces of original pharmacologic work done recently was that reported by Post and Nicoll in *THE JOURNAL*, Nov. 5, 1910. In general these experimenters showed that the efficiency of many germicides—proprietary and others—in common use, and for which broad claims are or have been made, is as a matter of fact practically nil. But in publishing the results of this work, *THE JOURNAL* unwittingly did the manufacturers of one of the products dealt with an injustice. Among the various preparations with which the investigators experimented was the proprietary antiseptic chinisol. This product was taken up with the others, because, at the time the experiments were made and the article was written, chinisol was advertised and sold as a germicide. In the interim between the acceptance of Drs. Post and Nicoll's article and its publication, however, the Council on Pharmacy and Chemistry proved to the satisfaction of its manufacturer that chinisol is but a very indifferent germicide, although it is an exceedingly powerful antiseptic. As chinisol has not for some time been advertised or sold as a germicide reference to that product should have been deleted from the article in question before publication, but by an oversight, the responsibility for which *THE JOURNAL* accepts, this was not done. With the present confused ideas on the subject of germicides and antiseptics and the very general misconception that there is little difference between these two classes of products, it is well to call attention to the fact that although a preparation may have little value as a germicide it can still be a powerful and useful antiseptic.

Correspondence

Opportunities for Physicians in Mission Lands

To the Editor:—Thirty vacant fields for medical men and twenty-two for medical women, with no competition and unlimited opportunities for original research, have been brought to my attention by various missionary societies. Some hospitals have had to be closed for lack of workers.

For men with pioneer instincts, there are great fields entirely unoccupied, while for expert surgeons there is work at hand which is already self-supporting. Several internships, from one to three years, are also open for recent graduates.

For women to whom the experience of Dr. Susie Rijnhart, of Thibet, appeals, there are great fields entirely unoccupied, while for experienced surgeons there are hospitals waiting.

All this work is under the missionary societies of the various Protestant churches of the United States and Canada.

The work requires men and women of good health and rugged constitution, not over 35 years of age, graduates of first-class medical schools (in some instances only those who have had both collegiate and professional training, together with either postgraduate or hospital experience), members of some Protestant church, and definitely interested in the religious motives and purpose of medical missions.

Comfortable support is provided by the missionary societies. This includes traveling expenses for physicians and their families, provision for outfit, living quarters, language teachers, etc., in addition to which a salary is paid which is based on what experience shows to be needed to maintain the worker in the highest state of efficiency. This varies in different countries. The net result is the same. It is not a work which will attract one who seeks large financial returns. The work demands those of heroic mold, who want to find the place where their medical skill is needed and where all their training will be utilized to the utmost. The work demands devotion, wide sympathy and earnest purpose. From a purely professional standpoint, these opportunities are unparalleled. A woman graduate of a Canadian university, who went to Arabia a few years ago, reported after a fort-

right in the only hospital along the coast of a thousand miles: "During my visit here we have had twenty operations on the eye, one amputation, the removal of a large tumor and numerous teeth extracted. In medicine we have had pleurisy, tuberculosis, tetanus, small-pox, leprosy, paraplegia, different varieties of heart-lesions and other interesting cases. In gynecology we have the usual run of inflammations and displacements, with atresia for a specialty. One of the peculiarities of the people here is that they never present themselves for treatment until the disease is far advanced, but of course there is an excuse for them in some cases, as they may have suffered for years before there was a hospital to come to. About 75 per cent. of the people seem to have eye trouble of some sort. Trachoma, trichiasis, ulceration and opacity are the commonest forms; yet inside a week one meets everything from simple ophthalmia to panophthalmitis. In fact, one would have to be a specialist in every branch of medicine and surgery to do justice to the amount and range of material."

Calls are now in my hands from great cities, as well as country districts of China, Africa, Persia, the Philippine Islands, Egyptian Sudan, Arabia, Mexico, Turkey and Korea.

I shall be glad to give further details to any physician to whom this opportunity for service appeals.

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Dr. Shepard and the Turkish Bath

To the Editor:—The death of Dr. Charles H. Shepard, of Brooklyn, Oct. 29, 1910, deserves more than a passing notice, from the fact that he was literally the founder and promoter of the Turkish bath movement in this country. He was born in Ogdensburg, N. Y., Sept. 25, 1825, and received a medical degree from the New York Medical College in 1848. In 1861 he opened, on a broad scientific basis, the first Turkish bath in America, at Columbia Heights, Brooklyn, and of this he continued in active charge up to the time of his death.

He was a member of the American Medical Association and was secretary in 1893 and 1894 and chairman in 1895 of the section now designated the Section on Preventive Medicine and Public Health. For many years he contributed articles to this Section, and was one of the earliest writers in this country on the medical use of water, particularly in the form of Turkish baths. Some of his papers were translated abroad and were widely circulated as graphic presentations of the value of baths in various diseases.

In 1876 he treated a case of hydrophobia with success at the Turkish bath; and this at the time attracted considerable attention, and was the subject of many theories and discussions. Dr. Shepard was one of the first men in this country to write with great positiveness on toxemias as active causes of disease, and he urged the elimination of toxic products through baths. Many of his early papers on this subject were practically forerunners of a literature that is growing constantly.

Dr. Shepard visited all the old and new baths of Europe, and made some studies of the Turkish and Roman baths, which were embodied in lectures and papers that were highly appreciated at the time. At one time he knew every bath in America as well as in Europe, and what was being done there, and was an adviser to the managers. His persistent efforts urging the use of the baths has brought them into popularity in all large sanatoriums and in some insane asylums.

It is understood that Dr. Shepard left a large mass of manuscript on the Turkish bath and on his experience of over fifty years, which will be published in the future. He died from heart failure, after a short period of invalidism, and his body was cremated, according to his wish.

T. D. CROTHERS, M.D., Hartford, Conn.

Electricity in Poliomyelitis

To the Editor:—Dr. Theodore Diller, commenting on Dr. B. Sach's paper of October 22, takes up the treatment of electricity (*THE JOURNAL*, Nov. 5, 1910, p. 1663), and condemns its use in poliomyelitis. If other medical colleges teach as much

about electricity and its medical uses as the one I attended their graduates had something to learn after leaving college. I wish to protest against the condemnation of this most useful agent, which at times gives almost magical results even when abused in its use. If one forgets the dose of a medication or takes up one with which he is unfamiliar, he looks in a "dose" book and prescribes accordingly. If the drug is a liquid it is usually dissolved in an alcoholic solution (and alcohol has been known to make people forget they ever had a pain).

When it comes to the use of electricity, either medicinally or commercially, there is more than one modality. In medicine the induced (faradic) current, the continuous (galvanic) current, given first direct and then make and break on the opposite pole, the static breeze and sparks, during the administration of which the little patient can be held in the nurse's arms; the motor wave current; then the high-frequency or step-up voltage from either the static or coil, give results that can be seen day to day.

Massage stimulates the nerves where they are kneaded; braces imprison already enervated muscles and thus diminish their size and use; transplantation of nerves or muscles helps in some instances. To use electricity requires time and patience; and if those who have neither of these condemn its use indiscriminately it shows lack of something. The fact that there are so many veiled references to it in literature is proof enough that there is virtue in the use of electricity.

The proper way to ascertain its value for definite presentation would be for the American Medical Association or the American Electrotherapeutic Association to appoint a committee to which scientists outside of medicine could furnish evidence and data not obtainable by the medical man and that would be authoritative.

ALMERIN W. BAER, Ph.G., M.D., Chicago.

The Nasal Spatiometer: A Suggested Name for Dean's Septimeter

To the Editor:—I have just read with interest an article in *THE JOURNAL* (Nov. 26, 1910, p. 1858) by Dr. L. W. Dean, on "Changes in the Nose After Widening the Palatal Arch." It seems to me that Dr. Dean would attract more attention to his septimeter and to his particular line of investigation were he to give his instrument another name. There are septometers on the market. In fact, I described a nasal septometer in the *New York Medical Journal*, July 13, 1901. A nasal septometer is an instrument devised to measure the nasal septum, its thickness at any point. Dr. Dean's instrument was designed to measure, not the septum, but the distance between the septum and the turbinate bone; it might just as well be called a turbinometer. Now were he to name his instrument a "nasal spatiometer" he would more definitely describe the use of his device. The coined word is derived from the Latin words, *spatium*, "a space or distance," and *metrum*, "a measure." I think that Dr. Dean is entitled to differentiate his new device from an instrument that has been on the market for years.

HENRY WALLACE, Glen Ridge, N. J.

Phenol in Herpes

To the Editor:—For the past four years I have treated herpes with an application of a 95 per cent. solution of phenol. As soon as the skin begins to turn white I neutralize the phenol effect with alcohol. In many cases one application suffices; in no case is it necessary to make more than three applications. After one application of the 95 per cent. phenol I dress the lesions with a simple ointment like zinc oxid. It is surprising how quickly it will relieve the pain, itching and burning. The vesicles shrivel and dry up in a very short time leaving a dry crust. I first used it in herpes progenerialis with such satisfactory results that I was led to try it for herpes zoster, in which it gave equally satisfactory results. Looking over the literature of herpes, I have not been able to find phenol mentioned in its treatment.

G. P. COOPERNAIL, Bedford, N. Y.