NOTIFICATION OF JUVENILE SUFFERERS
FROM VENEREAL DISEASE.*To the Editor of THE LANCET.*

SIR,—The entire lack of provision for the treatment of venereal disease occurring amongst natives in Durban has rendered it necessary to return them to their kraals, often in a highly infectious condition. It is probable that a large number of these recover without treatment of any kind, but there is always the danger that they may be instrumental in the spread of venereal diseases in outlying districts, especially when the obvious signs of their condition become less evident to themselves and their friends. Although this danger has been recognised by the Government, no suitable provision has so far been made, and the problem was aggravated when, in December, 1921, the Government hospital refused to treat any cases of venereal disease occurring amongst even Europeans who were resident in the borough. The matter has recently been taken up by the Juvenile Affairs Department who approached the Minister for Public Health, urging that facilities for early treatment should be afforded to all sufferers in the interests of juveniles, and, further, that venereal disease occurring amongst juveniles up to the age of 18 years should be notifiable to the medical officer of health for the borough. Although due consideration had been given to the reasons that had been advanced against the notification of venereal disease occurring amongst adults, it was felt that juveniles were unlikely to realise the seriousness of the disease so far as they were concerned, and that, in the interests of the young patient, his relations, and those who occupied the same dwelling-house, the necessary treatment should be undertaken in a suitable ward at the earliest possible moment after the condition had been diagnosed. This step may well meet with the approval of others who are interested in this aspect of disease prevention.—I am, Sir, yours faithfully,

F. G. CAWSTON, M.D. Camb.

Durban, Oct. 24th, 1922.

GASTRO-ENTEROSTOMY CLAMPS.

To the Editor of THE LANCET.

SIR,—Surgeons who use clamps in gastro-enterostomy will be interested in the suggested improvement in their design described by Mr. Norman M. Dott in your issue of Sept. 23rd. In a well-illustrated paper, which appeared in *Surgery, Gynecology, and Obstetrics*, August, 1916, vol. xxiii., p. 225, Dr. Joseph Eastman described a clamp on exactly the same principle under the title of "An Uncomplicated and Convenient Intestinal Anastomosis Clamp." In Mr. Dott's design, no doubt arrived at independently, the absence of the short handle, the separation of each element, and the bullet-shaped nut instead of a heart-shaped nut, appear to be improvements on Dr. Eastman's clamp.

I am, Sir, yours faithfully,

IAN MACDONALD, M.D.

Huelva, Spain, Nov. 10th, 1922.

NIGHT SWEATS.

To the Editor of THE LANCET.

SIR,—My friend, Dr. F. R. Walters, in his letter to THE LANCET of August 12th suggests that I was ambiguous as to the use of slumber mats. I think my reference to the "Shibboleths of Tuberculosis" made it quite plain that I only recommended these mats after hygienic means had failed to prevent the sweats; he also suggests that my experience is abnormal. He goes on to say that "one ought to regard 'night' sweats as presumptive evidence of insufficient ventilation or other hygienic blunder." As I had distinctly stated we had severe night sweats here, there would be no ambiguity in my taking this statement as a very severe reflection on the administration of Colindale.

I think, however, each of his points is answered by the following letter published in the *British Medical Journal* of Oct. 21st last (p. 780):—

"Irishman" asks for advice in the treatment of very profuse sweating in a case of pulmonary tuberculosis; the patient is 32; the area of lung involved is quite moderate, as also are the evening temperature and the amount of sputum; the hygienic conditions are superb and two nurses are in attendance; the routine remedies are futile. . . .

Here is the early case—to which type I referred—sweating in spite of the best possible conditions and therefore eminently suitable for a slumber mat.

I am, Sir, yours faithfully,

MARCUS PATERSON.

Colindale Hospital, Hendon, Nov. 13th, 1922.

AUENBRUGGER'S BICENTENARY.

To the Editor of THE LANCET.

SIR,—I think that it has escaped general attention that this year marks the bicentenary of the birth of the discoverer of the first important step in the clinical examination of the chest—namely, the method of percussion. This advance was made by Auenbrugger. The following extract from my grandfather's (Dr. Thomas Davies) lectures on "The Diseases of the Lungs and Heart," delivered at the London Hospital, and published in the *Medical Gazette* in 1835, states "that Leopold Auenbrugger was born at Graets in Styria in 1722—he became physician to the Imperial Hospital of the Spanish Nation at Vienna. There it was that he prosecuted, as he expressed it, his studies *inter taedia et labores* on the subject for a period of seven years, and in the year 1763 he published a work which he called 'Inventum Novum ex Percussione Thoracis humani ut signo, abtrusis interni pectoris morbo detegendi.' No notice was taken of his book until 1770, when Rozière de la Chassaque, of Montpellier, translated it, avowing he knew nothing of the subject practically, and the inference he would lead you to draw is that he did not think much of the discovery himself.

"The pamphlet seemed now consigned to oblivion. However, Stoll, Van Swieten, and Cullen in his 'First Lines' make some mention of it, but declared they knew nothing of it practically. Corvisart, when preparing his celebrated clinical lectures, first met with the subject on reading Stoll's work. He immediately commenced a series of experiments, which he continued for 20 years, and in 1808 published a new translation of Auenbrugger with his own commentaries, a work that has been translated into every European language."

It seems to me to be fitting and worthy of interest to recall these historic facts.

I am, Sir, yours faithfully,

ARTHUR T. DAVIES, M.D., F.R.C.P.

Tokenhouse Yard, E.C., Nov 11th, 1922.

THE MENSTRUAL CYCLE AND CALCIUM
CONTENT OF THE BLOOD.*To the Editor of THE LANCET.*

SIR,—Miss Widdows, B.Sc., in THE LANCET of Nov. 11th, p. 1037, states that the increase in the calcium content of the blood during menstruation "might be expected." Why during? Is it not more reasonably expected just antecedent to the period? May I also ask why Miss Widdows chooses the time midway to contrast with the menstrual time? Is she not aware of what is called on the Continent the *Mittelschmerz*? By choosing the time midway between the periods to contrast with the periods she chooses the one time in the cycle which is not a contrast, but is comparable. A realisation of the significance of the chart published some years ago in "Married Love" would have saved this confusion.

I am, Sir, yours faithfully,

MARIE C. STOPES.

Leatherhead, Surrey, Nov. 13th, 1922.

THE DIFFERENTIAL DIAGNOSIS OF SMALL-POX AND CHICKEN-POX.

To the Editor of THE LANCET.

SIR,—While I am in agreement with Dr. Sidney F. Fouracre's observations in his letter in your issue of Nov. 4th that there is value in the two signs of small-pox mentioned—namely, the vomiting in the stage of onset and the fall in the temperature on the appearance of the rash—the purpose of my letter in THE LANCET of Oct. 21st was to emphasise the four points which in the actual revision of some 11,000 cases had proved to be of the most practical value to me in revising those cases.

It is true that vomiting is a point in favour of small-pox, but small-pox occurs in this country in persons who have not vomited. The main thing, however, is that for one reason or another it is a point not always easy to establish, and this remark applies still more to the fall of the temperature at the appearance of the rash. In the majority of the cases which I have seen there has been no chance whatever of establishing this point. On the other hand, the four points I mentioned can almost always be established—namely, whether there has or has not been prostration, the relative density of the eruption, the relative depth of the lesions, and whether and how much the rash develops from day to day. These points have not only the value of commonly being available, but also of being among the most cogent evidence of all. That is why I mentioned them in my previous letter, and now again commend them to my colleagues.

I am, Sir, yours faithfully,

London, S.E., Nov. 14th, 1922. W. MCC. WANKLYN.

THE ACTION OF VACCINES.

To the Editor of THE LANCET.

SIR,—In THE LANCET of Oct. 14th I took exception to Dr. Pratt-Johnson's statement that my detoxication process weakened the antigenic properties of vaccines at least one hundred times. Dr. Pratt-Johnson in his letter of Nov. 4th now admits that this is merely his own opinion, and he does not give the scientific data (for which I asked) upon which he bases his belief. He evades my question and seeks to defend himself by asking a counter question—viz. :—

"Will Dr. Thomson state if he is able to furnish conclusive data of animal protection experiments with vaccine before and after treatment, in refutation of the statements that his detoxication process enormously weakens the antigenic value of vaccine?"

Dr. Pratt-Johnson claims to have read my researches, and if he will take the trouble to read them again more carefully he will find the information for which he asks. I will summarise my data briefly as follows :—

1. Immunity tests were carried out in four parallel series of cases : (a) received no vaccine ; (b) received small doses of gonococcal vaccine before detoxication ; (c) received larger doses of gonococcal vaccine before detoxication ; (d) received large doses of gonococcal vaccine after detoxication. These four series comprised at least 200 cases and showed clearly by immunity tests and by careful clinical observation by an independent observer that the detoxicated vaccine was much superior to the ordinary vaccine. The animals tested in this research were human beings, which give quite as reliable information as is obtainable from rats, mice, guinea-pigs, &c., vide, Thomson and Lees (1919).¹ Further confirmation of this work has been published by Corbett and Osmond (1920),² by Fraser and Duncan (1920),³ by Lees (1921),⁴ by Jenkins, Heywood, and others (1921).⁵

2. Animal experiments which Dr. Pratt-Johnson calls for will be found in Vaughan's work, "Protein Split Products" (1913), Lea and Febiger.

3. I gave details of careful experiments which proved that large doses of antigen were better than small doses in producing the formation of anti-substances—vide, Thomson, D. and R. (1922),⁶ and, further, I would call Dr. Pratt-Johnson's attention to the work of Balls and Korns (1918),⁷ who showed that when red cells were treated with alkalis and acids in a manner very similar to my detoxication process their antigenic properties were not injured.

I do not wish to trespass further on your valuable space, but would like to mention that I have experimented much and read very widely on this matter, and have an enormous mass of evidence at hand. All this evidence is based on experimental work by myself and others, whereas Dr. Pratt-Johnson's statements are apparently mere opinions.

I am, Sir, yours faithfully,

DAVID THOMSON.

Harley-street, London, W., Nov. 13th, 1922.

Medical News.

UNIVERSITY OF OXFORD.—The trustees of the late Sir William Dunn have made an offer of £100,000 for the establishment of a School of Pathology to be known by his name, on condition that a suitable site is provided by the University, which must also make itself responsible permanently for financing a chair in pathology and a full teaching staff. A further sum of £3000 is offered for the conversion of the present pathological department into a school of pharmacology.

UNIVERSITY OF GLASGOW.—The following degrees were conferred on Nov. 11th :—

M.D. (with commendation).—John Stewart, M.B., Ch.B., D.P.H. Thesis: A Clinical Study of the Action of Diphtheria Toxin in Relation to Paralytic Phenomena.

M.B., Ch.B.—William Morison and George Jackson Muller.

UNIVERSITY OF DUBLIN, SCHOOL OF PHYSIC, TRINITY COLLEGE.—At examinations held recently the following candidates were successful :—

FINAL MEDICAL EXAMINATION.

Part I., *Materia Medica and Therapeutics; Medical Jurisprudence and Hygiene; Pathology and Bacteriology.*—

*Robert F. J. Henry, *Lewis C. Brough, *John R. Bradshaw, and *Maynard A. Gerrard (equal), Gerrard A. Sloan, Alan J. Mooney, John McClelland, and Evaline Elizabeth Mooney (equal), Simon Wigoder, Desmond K. Lyons, Lucy M. Joly, Wentworth A. Taylor, Roy K. Carson, and Richard L. G. Proctor (equal), Henry Isaacson, Samuel E. Magowan, Francis V. Duke, and Isaac J. Isaacson (equal), Dorothy J. Booth, Philip B. Robinson, and Leslie M. Whitsitt (equal), James S. Armstrong, Louis M. Bell, Solomon Narunsky, William A. Redmond, Philip P. Van der Merwe, John E. Stokes, Lucy E. R. Pigott, and Herbert W. Strong.

Materia Medica and Therapeutics; Medical Jurisprudence and Hygiene (in completion).—William L. W. Smith.

Pathology and Bacteriology (in completion).—Samuel McDermott, Gladys Weatherill, and Angel Valentine B. Crawford.

Materia Medica and Therapeutics; Medical Jurisprudence and Hygiene only.—John E. Beatty, John L. Livingston, Christopher Lord-Flood, James Craig, and Pieter Coetzee de Plessis.

Materia Medica and Therapeutics; Pathology and Bacteriology only.—James L. Marshall and Alexander Hawthorne.

Medical Jurisprudence and Hygiene; Pathology and Bacteriology only.—Paul Douglas Piel.

Medical Jurisprudence and Hygiene only.—Herbert Birney.

* Passed on high marks.

DIPLOMA IN GYNÆCOLOGY AND OBSTETRICS.

Hubert Sydney Jacobs.

UNIVERSITY OF SHEFFIELD.—The Council of the University at its last meeting made the following appointments: Mr. G. H. Froggatt, L.D.S. Eng., to a lectureship in dental surgery; and Mr. C. T. Watson, L.D.S. Eng., to the post of lecturer in orthodontics.

ROYAL COLLEGE OF SURGEONS OF ENGLAND.—An ordinary Council meeting was held on Nov. 9th, Sir Anthony Bowlby, the President, being in the chair.

On the election of Members of 20 years' standing to the Fellowship, under Section 5 of the Charter of 15th of Victoria, Dr. Wilfred Thomason Grenfell was introduced, and after signing the By-laws and making the required declaration was admitted a Fellow of the College. A report was read from the Court of Examiners respecting candidates found

¹ THE LANCET, June 28th.

² Ibid., vol. ii., p. 346.

³ Ibid., Nov. 13th. ⁴ Brit. Med. Jour., June and Sept. 24th.

⁵ Brit. Med. Jour., June 11th, p. 846.

⁶ Ibid., May 20th, p. 796.

⁷ Jour. of Immunology, Baltimore, vol. iii., p. 375.