Correspondence

Pseudo-Original Articles—The Case of Dr. Arthur E. Gue.*

LIBRARY OF THE SURGEON GENERAL'S OFFICE,
WASHINGTON, D. C., July 30, 1907.

To the Editor:—The library of the Surgeon's General's office of the War Department endeavors to index all original matter in medical periodicals, unless of an absolutely trifling nature. As a matter of course, memory can not be relied on to determine whether an article has already been marked, and its inclusion by the editor of a periodical among "original articles" is, therefore, accepted. Occasionally a paper appears in several journals marked as "original" in each, with no note to show that it has appeared or is to appear in any other. As this practice causes useless work in carding until it is detected, and also smacks somewhat of disingenuousness, it is thought that a particularly glaring example will be of interest to your readers and to the editors of many medical journals. The article in question is entitled "The Mechanical and Chemical Effect of Milk on the Human," by Arthur E. Gue, of Detroit.

Before the title became familiar to the eye and so instantly distinguished among the hundreds of articles marked daily for carding, the above named production was noted here during the last few months in the following publications, always included among "original articles":

1. *Chicago Medical Times*, 1907, xl, 204-207.
2. *Colorado Medical Journal*, Denver, 1907, xiii, 45-48.
3. *Louisville Monthly Journal of Medicine and Surgery*, 1906-7, xiii, 367-369.
4. *Medical Bulletin*, Philadelphia, 1907, xxix, 168-171.
5. *Medical Council*, Philadelphia, 1907, xii, 138-140.
6. *Milwaukee Medical Journal*, 1907, xv, 76-79.
7. *Physician and Surgeon*, Detroit and Ann Arbor, 1907, xxix, 120-123.
8. *Toledo Medical and Surgical Reporter*, 1907, xxxiii, 161-163.
9. *Virginia Medical Semi-Monthly*, Richmond, 1907, xli, 33-35.

As soon as the opening words "Milk is the normal secretion of the mammary glands of mammals," etc., became as familiar as the first words of Genesis or of the Declaration of Independence, the weary examiners ceased to affix the mystic sign calling for carding, and so it is believed the article has escaped record in at least as many more journals as I have already named.

WALTER D. McCaw,

Major, Surgeon, U. S. Army, Librarian, S. G. O.

[COMMENT: Some time ago THE JOURNAL, under the heading "Cumbering the Record," editorially called attention to this same evil which was then rather prominent in medical literature, both here and abroad, viz., the reprinting of the same article in different medical publications, some in identical form, sometimes disguised in title.

The instance of multiple publication referred to above by Major McCaw is not comparable in the number of journals utilized by many authors. Some five years ago we called attention to an article written by a Dr. H. Plympton of Brooklyn, which appeared as original in some twenty-eight different journals, including four weeklies. However, the above paper was offered to THE JOURNAL and was refused, and probably Dr. Gue sent his remarkable contribution to many journals that did not accept his offer and publish it.

Undoubtedly this practice insures a wider circle of readers, but each needless repetition—and almost all such repetitions are needless enough—diminishes the value of the aggregate of the medical literature of the day, and it makes matters uncomfortable for the bibliographer. If the titles are slightly changed, as is sometimes the case, a fraud is practically consummated on the medical reading public. Most of the transgressors are not among the eminent of the profession, but there are some honored names that are not specially honored by their multiple appearances in this way. If an article is really valuable it will command attention and secure a wide circulation by reproduction in honest reprints and excerpts much better than by this multiplication of spurious first appearances. It is also an imposition on medical editors and publishers, who are not desirous of publishing as original mat-

*According to the American Medical Directory Dr. Gue is a graduate of the Chicago Homeopathic Medical College, 1891.

ter what has already appeared elsewhere. The amount of set up matter that has to be "killed" on this account is not insignificant. In fact, the practice is morally inexcusable. As matters are and as our correspondent shows, it is still one of the standing evils in medical periodical literature.—EDITOR.]

Personal Surgical Errors.

NEW YORK CITY, Aug. 8, 1907.

To the Editor:—It is doubly gratifying to read such an article as that with the above title in THE JOURNAL, July 20. The world is full of honest men, but not so full of brave men, for it takes such a man to own and proclaim his mistakes publicly. Among these errors is one to which I desire to call particular attention; namely, the employment of the catgut purse-string suture in dealing with the stump of the amputated appendix. The patient died suddenly on the third day. The postmortem showed that the suture had given away, and that the bowel contents had escaped into the peritoneal cavity, causing the patient's death. The author continues: "I then commenced to use linen thread; many of these patients, however, complained so bitterly of pain in the region of the stump for several months that I later made use of two separate catgut sutures, the outer strand hardened either with formalin or chromic acid." In my opinion the operator has gone from one danger to another. There is already a long list of accidents, a number of them fatal, from the use of this purse-string suture method. Since I read my paper before the Association in June, other cases have come to my knowledge. If every operator were as courageous as Dr. MacLaren, I doubt not that I could swell the list of accidents to a considerable extent.

I earnestly call the attention of surgeons to what I believe to be a grave error in technic. The simple silk or linen ligature applied to the stump, one-quarter of an inch from the cecum, with disinfection, by carbolic acid, of the small bit of mucosa beyond the ligature, does away with the danger of hemorrhage, and, so far as I can inform myself, the danger of leakage. I have failed to find a list of accidents from its employment. As yet I have not a single one, and I have made wide inquiry, and I would be greatly obliged for any reports of such cases. I am of the opinion that any method which requires the traumatism of a suture in the cecum, or in the stump of the appendix, is faulty in that it is entirely unnecessary, as well as unsafe, when compared to the ligature.

JOHN A. WYETH.

Dr. Knopf and Morphin in Tuberculosis.

NEW YORK, July 30, 1907.

To the Editor:—On the day following the meeting of the National Association for the Study and Prevention of Tuberculosis there appeared in the *Philadelphia North American* a sensational article, reporting that I advised the killing of dying consumptives quickly and painlessly by heavy doses of morphin, and that I admitted that it was my daily practice to do so. It was furthermore said that there had been a bitter debate and that the session adjourned in confusion. These false statements were copied by nearly all the newspapers in the United States, were cabled to Europe and made the rounds in the papers and magazines of England and the whole European continent. In spite of explanations and denials I sent to the Associated Press, in spite of a strong letter written by Dr. George Dock, the presiding officer of the meeting, and sent to the leading medical journals of America, giving the true version of my remarks, the false statement has continued to be published and republished and commented on to the great detriment of the anti-tuberculosis crusade all over the world. For example, ignorant consumptives in St. Louis, who had read the sensational lie, refused the visit of the nurses sent to them by the Society for the Relief and Prevention of Tuberculosis. The *St. Louis Republic*, which published this item, said: "Consumptives, since they read that report, apparently have a dread that the visit of the nurse may mean morphin to end their suffering." It thus became necessary to issue the following statement, by order of Prof. Frank Billings,

president of the National Association for the Study and Prevention of Tuberculosis:

Various daily newspapers published on May 8, what purported to be a report of the remarks of Dr. S. A. Knopf of New York, before the National Association for the Study and Prevention of Tuberculosis, in which he was made to say: "It is my practice and your sacred duty when you see a dying consumptive before you to give the sufferer morphin in plenty that the end may come quickly and painlessly."

No such statement was made by Dr. Knopf, but since, in spite of an immediate explicit denial by the doctor, a great many newspapers in this country and Europe continue to publish the false report as authentic news, Dr. Frank Billings of Chicago, president of the National Association for the Study and Prevention of Tuberculosis, authorizes the following statement:

Quite apart from the false position in which the speaker was placed and the injury done him, the publication of such a piece of sensationalism can not fail to have a very deleterious effect on impressionable tuberculosis patients throughout the country, and may keep others from seeking needed medical aid.

The following statement, made by Prof. George Dock of the University of Michigan, who presided at the meeting at which Dr. Knopf spoke, should preclude all further misunderstanding:

I heard clearly what Dr. Knopf said. I am sure that I know what he meant, and am sure that everybody in the room must have understood what he said. His words could not possibly be converted into the meaning given in the public press. It was perfectly clear that he meant to relieve patients in the last stages. Everybody knows that this prolongs life, while making it very much easier for the patient.

LIVINGSTON FARRAND, Executive Secretary.

I had hoped that this statement would stop all further comments on and circulation of the sensational falsehood. I confess that I have longed for the lie to die out, or, in spite of the loyalty manifested by my professional friends during these hours of trial, for which I beg them to accept my most heartfelt thanks, the ordeal had become almost unbearable.

Equally untrue was the report of the alleged "adjournment in confusion" and the "lively and bitter debate" which followed Dr. Flick's report, condemning the use of morphin and its compound. In refutation of this reflection made by Mr. Beamish on a body of scientific men, composed of many of the leading American physicians, who have devoted their lives to the study and prevention of tuberculosis, permit me to submit an extract from a letter which was received recently by Dr. Joseph Walsh, the secretary of the section:

I was present as secretary of the section at which you spoke, and instead of the section breaking up in confusion, as was stated in the newspapers, the section closed in the perfectly regular way, and your statement as generally understood by the medical men seemed to be generally agreed with.

I beg THE JOURNAL of the American Medical Association to publish and the medical press of the United States in general to copy this communication in the hope that it will help individual members of the profession to refute once for all the inconceivable proposition that any physician true to his calling could possibly propound such a doctrine as shortening the life of any patient entrusted to his care. To the individual members of the profession in this country and abroad I address a personal appeal to embrace every opportunity to disabuse any individual who may labor under the misapprehension that I or any other member of the American medical profession recommended shortening the lives of consumptives or any others by the administration of morphin, chloroform or any other drug. I make this appeal not merely for my own sake, but, above all, for the sake of truth and for the sake of consumptive sufferers in this and in other countries.

S. A. KNOPF.

Queries and Minor Notes

STATUS OF HYOSCIN-MORPHIN ANESTHESIA.

BROOKLYN, N. Y., Aug. 8, 1907.

To the Editor:—In the July number of the *Therapeutic Gazette* I find an article taken from the *Medical Record* advocating the use of hyoscin-morphin hypodermatically to relieve labor pains.

1. Will you tell me if it is considered safer than the scopolamin-morphin preparation?

2. If you consider it safe, what dosage would you advise, and how often repeated?

3. Do you consider the addition of cactin, as in the Abbott Alkaloidal Co.'s tablet, of any decided benefit? J. A. N.

ANSWER.—The article referred to in the *Therapeutic Gazette* is an editorial abstract of an article which appeared in the *Medical Record* Jan. 12, 1907, in which hyoscin-morphin-cactin was ad-

vocated to relieve pain. The *Therapeutic Gazette*, however, wisely omitted mention of the cactin in its abstract. The article in question, by Dr. W. H. Birchmore, bears all the earmarks of the class of articles known as "writeups." We make this statement on the character of the article itself and partly because this author, whose name we are unable to find in any directory, seems to have the habit of writing articles favoring proprietary remedies. We have a record of several, in some of which he praises other of Abbott's preparations.

1. Since hyoscin and scopolamin are recognized as being practically identical, both from a chemical and from a pharmacologic point of view, the combination on the market as hyoscin-morphin is presumably just as safe as, and no safer, and just as valuable as, and no more so, than the scopolamin-morphin combination which has been so much used in Germany, and to a less extent in this country, during the last six years, and concerning which a number of articles have appeared in THE JOURNAL.

2. Gauss (*Centbl. of Gyn.*, Jan. 12, 1907), who has elaborated the technic of this use of scopolamin, gives as the initial dose 0.01 gm. (1/6 grain) of morphin and 0.003 gm. (1/200 grain) of scopolamin and gives an additional dose of 0.00015 gm. (1/400 grain) of scopolamin at the end of from 30 to 45 minutes if the patient shows signs of returning memory as tested by her recognition of some object or experience, and repeats this dose of scopolamin as often as is necessary to prevent the return of memory, but almost always without an additional dose of morphin. Bass (*Munch. med. Wochschr.*, March 12, 1907), states that 0.01 gm. (1/6 grain) of morphin and 0.0003 gm. (1/200 grain) of scopolamin are sufficient, and the results are not materially improved by increase of dose. He reports the death of one child which he attributes to scopolamin (hyoscin) of which 0.00075 gm. (1/90 grain) were injected into the mother.

3. No. Cactin is a proprietary article put out by the Abbott Alkaloidal Co., and claimed by them to be a concentration—whatever that may mean—of *Cactus grandiflora*, which is usually designated by pharmacologists as inert.

ROCHE'S EMBROCATION.

EASTON, PA., Aug. 1, 1907.

To the Editor:—Can you give me the approximate composition of a preparation called "Roche's Herbal Embrocation," widely exploited for whooping-cough and many other conditions, and put on the market by E. Fougere & Co. of New York?

DAVID H. LUDLOW.

ANSWER.—Roche's Embrocation is a nostrum and its exact composition is not known. From published formulas it appears that it is prepared by digesting a fatty oil with asafetida. The following formula for a similar preparation has been published: Coarsely powdered asafetida and alkanet, each 5.0 gm. (75 grains), are digested, with olive oil, 180 gms. (6 fluidounces), during eight days and then filtered. To the clear filtrate are added oil of caraway, oil of turpentine, each 9.0 gm. (2.25 fluidrams), oil of pine needles, 1.2 gm. (18 minims), and oil of bergamot, 0.8 gm. (12 minims). Another published formula directs that 2.5 gm. (38 grains) asafetida be digested for a few hours with 60 gm. (2 ounces) olive oil; the clear oil is decanted and mixed with 2 gm. (30 minims) each of oil of caraway and oil of turpentine, and a few drops of oil of bergamot.

CYSTOGEN.

CLARKSON, KY., Aug. 6, 1907.

To the Editor:—Will you kindly state whether or not the Council on Pharmacy and Chemistry has passed on the merits or demerits of the remedy called Cystogen, made by the Cystogen Chemical Co., St. Louis. It is claimed by the manufacturers that it is a remedy, *per se*, for cystitis. They claim this remedy to be: "A definite chemical compound with the formula of $C_6H_{12}N_4$, and when eliminated by the kidneys it decomposes to some extent, forming formaldehyd." Will you kindly give your opinion as to the correctness of these claims?

B. C. WILSON.

ANSWER.—Cystogen is a trade name applied to hexamethylenamin (hexamethylenamina U. S. P.) This article is included with the list of "New and Non-Official Remedies" under the trade names, formin, methaform, uriform and urotropin. It has also been called hexamin, hexacystin, aminoforn, cystamin, metramin, vesalvin, urisol, and gonocystin. These products are chemically identical but vary widely in selling price. Thus, the official hexamethylenamin is sold at about 20 cents an ounce, while Cystogen is sold at \$1.00 an ounce.

LYSOL.

LEAD, S. D., Aug. 7, 1907.

To the Editor:—Has there been published an analysis of Lysol? If so, can you tell me the constituents? F. E. CLOUGH.

ANSWER.—Lysol is a solution of cresol in soft (green) soap, the solution containing 50 per cent. of cresol, and is practically identical with Liquor Cresolis Compositus, U. S. P.