

In spite of the fact that the medical profession has been apprised of the fraud and deceit connected with its exploitation, this preparation is still advertised in several medical journals. Some of these are:

Medical Record
Therapeutic Gazette
Medical Times

New York Medical Journal
American Journal of Surgery
Interstate Medical Journal

RHEUMATICIDE

Inquiries have been received regarding the so-called Wallace treatment for rheumatism marketed by the Rheumaticide Company, New York City. It is advertised in the newspapers, and those who write for information are sent a booklet entitled "Rheumatism Cured" together with a circular containing testimonials. The Rheumaticide Company is said to have for its president one George E. Burroughs, while Dr. Thomas A. Wallace is referred to in the company's advertising matter as its "consultant," and a Dr. James C. von Spiegel, it is claimed, administers the nostrum in New York City.

Some of the claims made for this nostrum are:

"It is the only treatment that cures."
"Gout, Lumbago, and Sciatica promptly and permanently cured by our treatment."
"The only bona-fide cure for rheumatism."
"No treatment can permanently arrest and cure Rheumatoid Arthritis, Arthritis Deformans or chronic Gouty Arthritis, except our treatment."
"The Wallace Treatment neutralizes the toxins and kills the germs, thus effecting a permanent cure."
"The Wallace Treatment . . . is absolutely up-to-date."
"No specific treatment for rheumatism, worthy of the name, had ever existed until the introduction of our remedy."

Many other statements equally false appear in the Rheumaticide booklet. The booklet of testimonials carefully avoids giving the name and address of the individuals supposed to have been cured.

Contrary to the common run of "patent medicines," Rheumaticide is for hypodermic use and is supposed to be administered by a physician. The stuff comes in sealed tubes, each tube containing enough of the preparation for one "treatment" and costing \$2.50. The Association's chemists examined Rheumaticide and reported as follows:

A sealed tube containing a preparation called Rheumaticide was received. The tube contained about 1 gm. (15 grains) of a dark brownish-red, viscid liquid, which had an odor like iodine and somewhat like phenol (carbolic acid). The quantity of material was so small as to preclude anything more than a cursory examination, but a titration with tenth-normal sodium thiosulphate indicated the presence of about 9 per cent. of free iodine; a determination of the total iodine indicated the presence of about 40 per cent. From this it was concluded that the essential constituents of Rheumaticide are uncombined iodine and iodine-phenol with traces of hydriodic acid. A preparation obtained by mixing the following was found, after standing twenty-four hours, to have properties quite similar to those of Rheumaticide:

Carbolic acid	2 parts
Glycerin	4 parts
Iodine	4 parts

And yet the exploiters of Rheumaticide call their nostrum a "serum" and inveigh against the use of drugs in this disease! For example:

"Drugs—confessedly useless even by those who prescribe them."
"It relieves the pain rapidly, but the relief thus obtained, unlike that from drugs, is permanent."
"Introduces no substances foreign to the economy."

In short, the exploitation of Rheumaticide is merely an impudent attempt to foist a nostrum on the public with the aid of such physicians as are willing to become partners to such a scheme. The annual report of the counsel to the Medical Society of the County of New York for 1911 stated that the Rheumaticide Company was found guilty of practicing medicine and that a fine of \$250 was imposed.

KOSINE

"What," asked a correspondent, "is Kosine, made by the Kosine Company of Washington, D. C., and sold as a cure for epilepsy?" No examination of "Kosine" has been made in the Association laboratory. According to an analysis by the New Hampshire State Board of Health (*New Hampshire San. Bull.*, October, 1909, p. 138) Kosine contains antipyrin 0.64 per cent., ammonium bromid 4.97 per cent., and sodium bromid 2.4 per cent. From this it appears that "Kosine" is similar in composition to many other "epilepsy remedies" on the market.

Correspondence

American Society for Physicians' Study Travels

To the Editor:—The German Central Committee for Physicians' Study Travels, an organization that recently visited a number of the leading medical centers of the United States in connection with its attendance on the Congress on Hygiene and Demography at Washington, D. C., in September, 1912, was organized with the avowed object of visiting institutions in foreign countries by making a trip to but one of these countries annually. The committee does not confine its studies and observations to medical universities and colleges, but also aims to obtain information regarding purely scientific, hygienic and municipal institutions, as well as historic places of leading interest, model department stores and manufactories. On the basis that only one country is visited each year and that everything in the way of entertainment and scientific and practical demonstrations is arranged for in advance, it is found that much valuable information is gained, not to speak of the pleasure that is afforded by such a tour.

In view of the fact that a large number of American physicians make an annual pilgrimage to foreign shores in quest of medical and scientific knowledge, the newer methods of dealing with sanitary problems and a more intimate acquaintance with the leading health resorts, it has been deemed timely to organize an American Society for Physicians' Study Travels on the plan of that described above, which has been in existence for a period of fourteen years abroad. To this end, a local committee composed of nine Philadelphia physicians has been formed, as you mentioned in *THE JOURNAL*, Dec. 21, 1912, page 2268. This committee proposes to invite the assistance and cooperation of well-known members of the medical profession throughout the United States and Canada, especially those holding college and university professorships, and representatives of the medical service of the United States Army, Navy and Marine Hospital Service, as well as heads of state and municipal health departments, believing that the only feasible plan by which the movement can be made truly successful is to have every part of the country, every medical center, and all the chief professional interests of America, represented in the membership of the organization. In this way the local committee shall endeavor as a preliminary step to form a general committee of arrangements not to exceed 200 members, from which an executive body composed of a number to be determined will later be chosen. No physician shall be eligible to membership who is not a member of a county medical society.

Having been assured by the president and secretary of the German Central Committee for Physicians' Study Travels that a body of American physicians similarly organized would be accorded a warm welcome in Germany and other foreign countries, it would seem to me that neglect of so great opportunities for combining the acquisition of practical knowledge and health-giving recreation would be unwise.

This is not the time to state either the aims or advantages of such an organization in an ambitious form. With regard to the question of the benefits conferred by the proposed society, however, it is not saying too much to express the hope that in addition to increasing our positive knowledge of medicine, surgery and the specialties, such visits might lead to the formation of new and truer conceptions of medical education, to

fundamental changes in the conduct of health departments, both municipal and state, and to clearer ideas regarding the sphere of usefulness of leading foreign health resorts. It is also confidently believed that not only will the advantages offered be greater, but, if properly conducted, the cost per capita will be much less than if a single individual were to make a similar tour.

The organization would, therefore, work to the decided advantage of the individual members of the profession. Full information will be sent to THE JOURNAL just as soon as the committee on organization shall have completed its task.

J. M. ANDERS, M.D., Chairman,
1605 Walnut Street, Philadelphia.

The Safety-Razor Blade as a Scalpel

To the Editor:—As I have been using safety-razor blades in surgery for three years, I was interested in the article in THE JOURNAL, Dec. 14, 1912, p. 2127. The handle portrayed is an improvement over mine. The use of these blades was suggested to me by Dr. J. T. McDonald of Honolulu. When he was bacteriologist to the territory of Honolulu, he used blades to secure "snips" from those suspected of having leprosy. It came about in this way: Certain people contended that the physicians of the department of health were transmitting the disease by "snipping" different persons with the same knife. Of course, the knife had always been sterilized, but this did not satisfy the objectors. To do away with this prejudice, the law was made that every knife should be destroyed after a "snip" had been made with it. Dr. McDonald then hit on the idea of using the safety-razor blade and found it cheap and ideal for the work.

J. C. O'DAY, M.D., Portland, Ore.

[COMMENT.—Subsequent to the article referred to by our correspondent, another communication on the same subject appeared (December 28, p. 2325). In this Dr. Falker showed that no additional or specially devised handle or holder was necessary in order to use safety-razor blades as scalpels. In this connection it may be of interest to remark that nurses and interns use safety razors to shave patients whom they are preparing for operation, for childbirth, etc. They find it convenient to use a blade once and then throw it away.—Ed.]

The Prevalence and Mortality of Cancer

To the Editor:—In examination of the subject of the prevalence and mortality of cancer two points seem of interest to me which I have not seen treated in the literature of the subject.

First, it will be noted that since the disease is to a great degree confined to ages beyond 40 and since this is the age at which women commonly cease to bear children, it must follow, I think, that the prevalence of the disease will be to a very slight extent influenced by the process of natural selection.

While this is true of women it is not to so great a degree true of men, and examination of age incidence and relative frequency of the disease in the two sexes, by those better equipped for the work than I, may cast light on the degree to which characteristics transmit along lines of sexes rather than more broadly.

Finally, is not this an explanation of the fact that a disease which has up to the present been of so high a mortality has been unable to eliminate itself, no matter how strong the factor of heredity may be?

HENRY POWER, M.D., Spokane, Wash.

Grave of Jane Crawford, the First Subject of Ovariectomy

To the Editor:—The Kentucky Medical Society has been trying to find the grave of Jane Crawford, on whom Dr. McDowell performed his first operation for ovariectomy.

I am glad to say that I have found the grave in the Johnson Cemetery ten miles northwest of this city. It is marked by a small marble slab.

Jane Crawford, I believe, was the widow of Thomas Crawford, and came to this county with her son, the Rev. James Crawford, a Presbyterian minister, who owned a farm at that time just across the road from the cemetery. His wife, who died April 4, 1852, is buried near his mother.

I remember the Rev. James Crawford, for he was a frequent visitor in my father's home—the late Dr. John J. Thompson of this city—and I think he died at Sunrise, Iowa. His son Alexander was in Sullivan and visited my father some time in the eighties.

The secretary of our county medical society, Dr. J. B. Maple, is preparing a history of the medical profession of the county and has collected some very interesting facts as far back as 1817; but I consider this one of the most interesting that we have discovered.

W. N. THOMPSON, Sullivan, Ind.

[COMMENT.—After the preceding letter was in type, a letter was received from Dr. J. R. Hinkle, Sullivan, Ind., reporting a visit to the cemetery and enclosing a photograph of the gravestone. In addition Dr. Hinkle says: "None of the descendants is living in this locality at this time. There are relatives living in Iowa who are old enough to remember their grandmother. I have not their address at this time, but can procure it if you desire."—Ed.]



Grave of Jane Crawford, the subject of McDowell's first ovariectomy. The inscription on the tombstone is as follows:

JANE CRAWFORD
Died
Mar. 30, 1842
Aged 78 Years

Blessed are the dead who die in the Lord

Defense of Friedmann's Treatment for Tuberculosis

To the Editor:—It is only with the greatest hesitancy and decidedly against my own preference that I am addressing you in regard to two editorial comments in THE JOURNAL of Dec. 14, 1912 ("Friedmann's Inoculation Against Tuberculosis," p. 2158, and "Responsibility of the Newspaper," p. 2159). But as I am the brother of Frederick Franz Friedmann of Berlin, whose ethics you assail in the above mentioned issue, and as I have been a member of the American Medical Association for many years, I believe it to be my privilege, and my duty at the same time, to come to the rescue of one who is too busy and too far away to defend himself.

As to the "secrecy" of the process by which virulent live bacilli are made avirulent without losing their vitality, and which "secrecy" you call not in accord with the ethical