

that he died of starvation owing to want of the five pounds, and left no heir.

Substitute in my apologue "reaction" for "debt" and "painful stimulus"—or any other polysyllabic equivalent you please—for "creditor," and one is close enough for practical purposes to the topic under discussion.

How are we to decide whether (1) or (2) is the better line to follow? We shall obviously not derive anything but amusement from the spectacle of angry psychiatrists bandying such charges as lover of pornography or victim of a "complex" from side to side (the manner of all previous discussions). We shall derive very little, even of amusement, from dogmatic statements that this or that method "cures" patients, or from the spiritual autobiographies of eminent men (thus far the method of the present controversy).

What is meant by the term "cured"? Of those treated how many were "cured"? Were they *in pari materia*? Was the treatment uniform? Have any two of the rivals treated samples of a common population by their respective methods? If so, what are the results? Like Sir Robert Armstrong-Jones, I have asked six questions; unlike him, I have not framed them so that a Latin translation would require the use of the word *num* in each.—I am, etc.,

Loughton, Jan. 18th.

MAJOR GREENWOOD.

THE ORIGIN OF TUMOURS.

SIR,—In the annotation entitled "The Origin of Tumours," in last week's JOURNAL, it is stated that the hypothesis recently developed by Ribbert is not invalidated by the occurrence of *x*-ray cancer, because this type of growth arises as a single focus. This is far from being the case, for in a very high percentage of *x*-ray cancers there are two or more separate and distinct primary growths, two or three or even more fingers, the hand, and perhaps the chin, having all been affected in one individual.

The more one thinks of these cases the more difficult becomes the acceptance of Cohnheim's theory, or any modification of it, such as that now advanced by Ribbert; for in *x*-ray cancer we have a condition—that is, carcinoma of the finger—practically unknown under any other circumstances. Are we to suppose that Cohnheim's cell-rests are deposited only in the hands of those who happen to adopt *x* rays as their avocation? Or, to take another remarkable example, can we imagine that the Kashmiri is the only kind of individual in whom cell-rests occur in the skin of the thighs and lower abdomen—for these are the positions in which multiple kangri cancers are met with very commonly in Kashmir—and is cancer ever seen in these sites in other races?

In my view no hypothesis of the etiology of cancer can satisfy the facts unless it affords some sort of probable explanation of the origin, not only of such cases as cancer of the breast, about the precancerous stages of which we know nothing at all, but of such conditions as *x*-ray cancer, kangri cancer, soot and fuel cancer, or aniline, arsenic, and chrome cancer, all of which are specialized forms of growth occurring in peculiar situations, and never arising except as the end result of the action of a definite physical, chemical, or thermic agent.

To say that a hypothesis "contains at least as much probability as any other hypothesis that has been made regarding the etiology of tumours" is a damning criticism.—I am, etc.,

London, W., Jan. 14th.

CECIL ROWNTREE.

CHRONIC PANCREATITIS.

SIR,—Consequent on my article on this subject in your issue of November 15th, 1919, I have received a number of communications, several of which controvert my stated opinion that "on the surgeon rests in many of the cases the ultimate diagnosis by means of excision of a portion of the gland for microscopic examination" (by which I mean the removal of a small wedge), and suggest that the pathologist might be in many cases the person to undertake the task.

May I point out that the pancreas stands somewhat pre-eminent amongst the tissues in rapidity and intensity of *post-mortem* changes? Directly death has stopped the circulation in the gland active self-digestion begins, and in a gland examined twenty-four to forty-eight hours after

death autolysis has produced results so pronounced as to obliterate in portions of the gland histological distinctness of outline, and in others to simulate necrotic pancreatitis.

The value of the various methods of examination of faeces, urine and blood, at present under trial, must be decided in many cases by the microscopic examination of fresh sections taken by the surgeon from the living gland.—I am, etc.,

Glasgow, Jan. 16th.

JAS. H. NICOLL.

TICKS AND RELAPSING FEVER.

SIR,—Let me, in reply to Dr. Balfour's letter (January 17th, p. 97), where he says, "So far as I know we have no definite evidence that *Argas persicus* can transmit any human spirochaeta," state that in the summer of 1918 I definitely proved that it can. I was then with a small column in North Persia. All the troops were under canvas, with the exception of a section of engineers, who were billeted in a deserted house, where they slept mostly on frame beds.

During the first week of their habitation there they complained of being bitten by bugs. I asked them to secure a specimen, which they did. This tallied exactly with the description of the *Argas persicus* in Manson's *Tropical Diseases*. The interesting point is that every man in that billet developed relapsing fever. The spirochaetes were found in their blood and also in the tick itself. None of the other troops developed the disease, though many of them suffered from lice infection. On making inquiries amongst the Persian natives, I found that nearly every house in the town was infested with ticks and that they were considered to be carriers of some sort of fever.

The severity of the infection seemed to vary directly with the number of bites, which were sometimes very severe and healed with difficulty.—I am, etc.,

Ross, Jan. 18th.

J. LEEPER DUNLOP, M.B.,
Late temporary Captain R.A.M.C.

THE WORK OF A PENSIONS REFEREE.

SIR,—It is evident that there is a widely spread fear in the profession that a State medical service will have many objectionable features. My experience, as medical referee to the Ministry of Pensions, lends no support to that view. I have found, from both the Ministers under whom I have worked to the latest joined member of the Local Pensions Committee, a genuine anxiety to do the best possible to restore disabled men to health and working capacity. The medical referee is left with an absolutely free hand to recommend whatever he considers necessary to that end. I am sure my experience can be echoed by all the other medical referees when I say that I have been treated with the utmost kindness and consideration. Letters are answered promptly, and not in the perfunctory official manner usual in some Government departments. The work is worrying at times, as one has to hold the balance true between the State and the pensioners. Mistakes will occur, no doubt, but if the work is done to the best of one's ability, the sympathy and support of all the officials from the Minister downwards is assured. The terms are, in my opinion, generous, and I am pleased to state that genuine malingering is rare. One or two cases in which I suspected it, on further investigation proved to be suffering from very real maladies; and I have found the conditions of work under the Ministry a pleasure.—I am, etc.,

Falkirk, Jan. 12th.

GEORGE C. STEWART.

THE IRISH MOTOR DEADLOCK.

SIR,—It was hoped that through the good offices of Mr. H. G. Burgess of the Ministry of Transport a solution would be found of the deadlock which has arisen out of the Motor Permits Order, but it would seem that the *impasse* is to continue regardless of the consequences.

There is, perhaps, no section of the community which has adopted the motor as a means of locomotion to a greater extent than the medical profession, and one fails to see how the medical needs of the public can be attended to in the circumstances now existing.

Briefly the position is this:

1. The attendance of doctors is essential for the public good.
2. Motors are essential for the efficient discharge of the doctors' duties.
3. Doctors are prevented from using their cars.
4. Hitherto in all warfare the Red Cross has been respected, and belligerents who do not respect it alienate public sympathy.