

## Correspondence.

"Audi alteram partem."

## THE PULSUS ALTERNANS.

To the Editor of THE LANCET.

SIR,—Dr. C. O. Hawthorne's interesting paper in THE LANCET of May 29th opens up a question that I have often asked myself: When is a pulsus alternans not a pulsus alternans, so far as its now usually accepted gravity of prognosis goes? Dr. Hawthorne, alluding to this, gives at the end of his paper the case of a young woman who has not died as she should have done, and his earlier remarks and the tracings given from sphygmograph and manometer seem to me to suggest the answer. In thus showing that a pulsus alternans is of quite a common occurrence, he describes what surely must be the common experience of us all. Everyone must be familiar with the fact that at the radial pulse at the wrist every heart beat need not have an equivalent value, and this variation may range from complete intermission down to a lessening of force that cannot be recognised by the finger. One had almost said when we are dealing with a muscular organ such as the heart with the variety of minor details that energise it and detract from its nervous supplies, it could hardly be otherwise. This in nowise detracts from the value of the observation that there is a pulsus alternans that has a grave significance; it does go to show that one may expect at times a pulsus alternans that has not such an ominous outlook. And surely there must be many who have lived—well! to pre-senility—who have met with this condition many a time, with a form but not the grave form of pulsus alternans. I have also met occasionally with a sort of double pulsus alternans, two full beats followed by two small beats, that had no serious meaning.

Then how are we to distinguish between the two? I may leave others to answer this question. For myself I shall only venture to suggest that the serious form generally goes with signs of cardiac failure, whilst the alternation to which I am directing attention comes and goes—sometimes the rhythm may change two or three times in one examination—and maybe in quite young people who have no signs whatever of any cardiac distress. It is clearly a neuromuscular eccentricity of action that has no serious meaning. There are other points in Dr. Hawthorne's paper quite well worth taking up, and chief of them, to my mind, is the comparative value of the sphygmograph and the manometer. It has always seemed to me that the latter is a much less precise and reliable instrument than the sphygmograph which has so much yielded place to it. There can be no doubt that the facts of the pressure gauge, if so I may call the manometer, require the most careful valuation before drawing inferences therefrom.

I am, Sir, yours faithfully,

May 31st, 1915.

JAMES F. GOODHART.

## THE USE OF ATROPINE IN GASED PATIENTS.

To the Editor of THE LANCET.

SIR,—I have just been reading Dr. Douglas V. Cow's article on this subject in THE LANCET of May 29th, and am particularly interested in his experiments. It had struck me that atropine might

be of use, for I have taken it for acute bronchitis with the typical tightness across the chest and difficulty in breathing, and the mixture which used to give the greatest and quickest relief was one containing liq. atrop. sulph. ℥ ix. (which must be fresh) ad ℥ vi.; dose, ℥ ss.

As a student, when making chlorine gas, although we used draught cupboards, I inhaled the gas rather too freely, and I well remember the tightness across the chest and uncomfortably difficult breathing it produced. The symptoms got worse after I had got home—about two hours after I should think. If I had to face chlorine, besides a mask I would provide myself with some liq. atrop. sulph., and I would take one dose before the cloud was on me. Dr. Cow's article would make me more inclined than ever to try atropine.

I am, Sir, yours faithfully,

IDA C. TENGELY, M.D. Lond.

Bishop's Stortford, May 29th, 1915.

## THE MEDICAL DEFENCE UNION AND THE NATIONAL INSURANCE COMMISSIONERS.

To the Editor of THE LANCET.

SIR,—The letter written by Dr. A. E. Larking in your issue of May 29th makes it clear to me that he has failed to understand the position which the Medical Defence Union has taken up in respect of the surcharging of panel practitioners. The Union, by raising certain actions on behalf of members who are panel practitioners, is not attacking the National Insurance Acts or seeking to hamper the working of the Acts, but is merely endeavouring to protect its members against the effect of certain regulations of the Commissioners which the Union is advised are not in conformity with the Acts and are therefore *ultra vires*, and also to defend them against any action of the Insurance Committees which may appear to be arbitrary and wrongful. The Union therefore desires to take the opinion of the court as to the regulations and the procedure of Insurance Committees in administering the Acts.

We have already obtained a decision by the Commissioners in the Sheffield case, whereby the proceedings taken by the Panel Committee in surcharging were quashed at our instance.

In raising test actions in the High Court we are merely seeking to confirm and to extend the scope of that decision of the Commissioners. We are not seeking to destroy the Act; Parliament alone can either amend or annul it. As long as the Act exists it is imperative that we should, on behalf of our members, see that it is carried out legally and impartially; and we shall continue this duty, I trust, as long as the Act or the Medical Defence Union lasts. Dr. Larking appears to consider that the administration of the Act is unassailable; well, that is his opinion, but it is not mine, which is based upon the record of past successes in the High Court and elsewhere. If Dr. Larking could only see and read my daily correspondence from panel practitioners he would realise that a rapid rise of discontent as to the working of the Act is setting in all over the country.

I am, Sir, yours faithfully,

A. GEORGE BATEMAN.

Trafalgar-square, W.C., June 2nd, 1915.

To the Editor of THE LANCET.

SIR,—With regard to the letter by Dr. A. G. Bateman appearing in your issue of May 22nd, it will be granted that for the moment conservation