

colitis, and anorectal conditions such as dyschezia and spasm, whether idiopathic or secondary to local disease (fissure, ulcer, hemorrhoids). Any such obstruction to the fecal column, particularly when the effect is intermittent or recurrent, tends to throw back the contents to the head of the colon (exaggerated antiperistalsis), and thus brings on the usual sequence of hypertrophy and dilatation, with local irritation and subjective discomfort.

It is much to be desired that a wider recognition of this really common syndrome will lead to correct diagnosis and appropriate treatment, and so prevent not only the possible terminal stage of "perforating ulcers of the cecum," but also the injudicious and unhelpful removal of innumerable "chronically diseased appendixes" that do not exist in reality.

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### THE CASE OF WILLETTA HUGGINS

*To the Editor:*—I have no quarrel with Professor Jastrow, as I am neither a psychologist nor an oculist; but I presided at the meeting of the Chicago Medical Society when the case of Willetta Huggins was presented, and I believe that, in justice to the intelligence of the audience, those who read his article in THE JOURNAL of June 17 should know how the sight test was applied before the Chicago Medical Society.

A pair of ordinary dust goggles was used, and over each glass was placed a piece of dark paper, and then a heavy pad of cotton. I placed these over my own eyes first, and then over the eyes of Miss Huggins.

If this young lady read with a slit of vision as Professor Jastrow states when she performed the tests before our members, it is even more marvelous than his theory of the "will to believe."

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### MEDICAL TERMINOLOGY IN GERMANY

*To the Editor:*—Peculiar results of the European war continue to crop up in unexpected—or at least unforeseen—places, from time to time. This is true not only in politics, geography and finance, but in art and science as well. In 1920, the Vereinigung der deutschen medizinischen Fachpresse designated a commission to collaborate with the Deutsche Gesellschaft für innere Medizin in selecting German terms which might replace French and English expressions that have been so long in use in medical literature as to have become in many instances a part of the medical language of all nations. The *Deutsche medizinische Wochenschrift* (48:493, 1922), the *Münchener medizinische Wochenschrift* (69:454, 1922) and other medical periodicals from Germany report the results of this collaboration and give the list of the French and English phrases to be interdicted and their German equivalents. Of these new terms, many successfully convey their exact meaning at a glance; others require a little thoughtful investigation, while still others are composed etymologically of elements so nontechnical that their medical meaning is not easily arrived at—unless, perhaps, by a person "born in (the) two languages"—French and German, or English and German. Taking into account German unity and the German habit of discipline, we may assure ourselves that this terminology will secure instantaneous and universal adoption at the hands of writers on professional themes in Germany, and that such old friends as "contrecoup" and "tic douloureux" will disappear henceforth from German medical literature. It thus becomes important that those who avail themselves of the German periodicals—and especially those engaged in bibliography and the work of classification—

should have at hand the list (which is appended) of the new German expressions and their older French and English equivalents.

New Terms	Former Terms
Abwehrspannung	défense musculaire
äusserer Harnröhrenschnitt	boutonnière
Alopecia atrophicans	alopécie atrophante
Binnenverletzung (des Kniegelenks)	dérangement interne
Docht	mèche
Drehtick	tic rotatoire
Einkerbung (des Bruchringes)	débridement
Florentiner Seide	fil de Florence
Gegenstoss	contrecoup
gemischter Schanker	chancre mixte
Geräusch des gesprungenen Topfes	bruit de pot fêlé
Geschlechtsverwechslung	erreur de sexe
gewaltsame Entbindung	accouchement forcé
gewaltsame Richtigestellung	redressement forcé
gewaltsames Beweglichmachen	brisement forcé
Glanzhaut	glossy skin
gleichsinnige Abweichung	déviation conjuguée
Herzbuckel	voussure
kleiner epileptischer Anfall	petit mal
Klopfbehandlung, Beklopfung	tapotement
knotige parenchymatöse Hepatitis	hépatite parenchymateuse nodulaire
Kolbenfinger	ostéarthropathie hypertrophique
Kreisbogenstellung	pneumatique
Larva migrans	arc du cercle
Malum perforans	creeping disease
Massen- (reposition)	mal perforant
moralischer Schwachsinn	en masse
Mückensehen	moral insanity
Muskeltick	mouches volantes
Nachblassen der Haut	tic convulsif
Panzerkrebs	dermographie blanche
Peyersche Haufen	cancer en cuirasse
Pulsdruck	Peyersche plaques
Pulshöhe	amplitude
Rückansteckung	altitude
Rücklaufkatheter	choc en retour
Schleimhautpapeln	cathéter à double courant
Schmerztick	plaques muqueuses
Schwirren	tic douloureux
Sclerosis redux	frémissement
Syphilis ohne Primäraffekt	chancre redux
Tickkrankheit	syphilis d'emblée
unausgeprägte Basedowkrankheit	maladies des tics
unausgeprägte Formen	Basedow fruste
unbewusst erworbene Syphilis,	formes frustes
Syphilis insontium	syphilis ignorée
Vergleichsfarbe	teinte
Wandertrieb	Fugue-Zustände
warzenähnlicher Zustand	état mamelonné
Wasserkopfschrei	cri hydrécéphalique
Weissfleckenkrankheit, Leukoderma	white spots disease
zwanglose Behandlung	no restraint
Zwimilchernahrung	allaitement mixte
Zuckerstich	piqûre

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[COMMENT.—It remains to be seen whether language can be created by edict in the new Germany.—Ed.]

### "MEDICAL EDUCATION"

*To the Editor:*—I have just read (THE JOURNAL, June 3, p. 1743) certain reflections of a student relative to medical education. Now for some suggestions anent that topic from the practitioner's standpoint.

In my humble opinion (M.D., Columbia, 1904) too much study is required of a purely theoretical nature. The subjects of physiologic chemistry, materia medica, comparative anatomy, etc., while extremely interesting, have too many hours of the course devoted to them. Would it not be wiser to focus on twenty drugs and have a broad, indelible knowledge of these, rather than ramble along over all the pharmacopeia? One should learn twenty drugs thoroughly and well, and read up the other 999 as parallel.

What does the young graduate know of such topics as distribution of physicians in the United States; office equipment—how many rooms, where best to locate in a city or town, a roentgen-ray room, laboratory; bill collecting, how to go about it; how to collect difficult bills; office nurse; relation-