

**PREPARATION OF DICHLORAMIN-T**

*To the Editor:*—I believe I have found a simpler method for preparing dichloramin-T than that described on the packages put out by the pharmaceutical houses. My method is:

Weigh out amount of powdered dichloramin-T, place in mortar and rub up with small amount of chloroform (carbon tetrachlorid may be used) until all is dissolved, then add chlorcosane to the dissolved dichloramin-T. The chloroform is easily evaporated and thus leaves the dichloramin in solution in the solvent. By this method can be prepared a fresh solution of dichloramin-T in a few minutes, whereas the heat and cold methods take a much longer time. In the heat method, there is danger of overheating, in which a precipitation is caused, which renders the dichloramin-T useless and very irritating.

V. J. ANDERSON, M.D., Chicago.

[COMMENT.—We can see no advantage over the heat method, if the chloroform or carbon tetrachlorid must be removed by evaporation. However, the use of carbon tetrachlorid (10 per cent.) has been recommended for lowering the viscosity of the chlorcosane (Dakin and Dunham: Solvents for Dichloramin-T, *Brit. M. J.* 1:51 [Jan. 12] 1918); therefore Dr. Anderson's note suggests the possibility of first dissolving the dichloramin-T in carbon tetrachlorid, and then adding the proper amount of chlorcosane to make the solution of the desired strength.—Ed.]

**"THE CAUSE OF INFLUENZA AND ITS BEARING ON TREATMENT"**

*To the Editor:*—In the current comment with this title (*THE JOURNAL*, Nov. 1, 1919, p. 1367), the work of Bradford, Bashford and Wilson (*Quart. J. Med.* 12:259 [April] 1919) is mentioned as the most convincing work on the filtrable virus of influenza. Evidently the writer of this comment had failed to see the paper of Arkwright (A Criticism of Certain Recent Claims to Have Discovered and Cultivated the Filter-Passing Virus of Trench Fever and of Influenza, *Brit. M. J.* 2:233 [Aug. 23] 1919) and the notes appended thereto by Sir John Rose Bradford (p. 236) and Capt. J. A. Wilson (p. 237). In these notes Bradford and Wilson withdraw the claim that their work has proved that the filter-passing organisms of the diseases in question have been grown in pure culture. The action of these authors in publicly withdrawing their claim is as commendable as it is unusual in scientific controversy. In fairness to them it would seem that their retraction should receive publicity at least as prominent as the discredited work for which they no longer vouch.

WARD J. MACNEAL, M.D., New York.

**"THE RANGE OF THE GENERAL PRACTITIONER IN PSYCHIATRIC DIAGNOSIS"**

*To the Editor:*—I have just read Dr. Southard's article in *THE JOURNAL*, October 25. I like to read and hear psychiatrists and neuropsychiatrists. It reveals stupidity, leads to investigation, and results in humiliation, and then there is hope for regeneration.

But why all this esotericism? Here in this astonishingly "informative" report made, it was discovered, by one of the doctor's own former psychopathic hospital interns, is the phrase, "ideas of a somatopsychic character." I went to my medical dictionary, a good one of recent issue, to find the word "somatopsychic," but it was not there. I consulted the Century and Webster, the very latest editions, with the same disappointment. Now I should like to know just what kind of idea it is that has a "somatopsychic character." Do these people have a little esoteric dictionary that they keep chained to the desk in the inner recesses of some sanctorum sanctorum? Again, why this word "disoriented"? Bishop Whately would say confused, and he is not bad authority. This pedantic terminology affected by some writers makes me tired.

If some of these writers would read Professor James a little more and supplement that with a little book not read

much in this country, written by an Englishman under the title of "The New Word," we bungling provincial general practitioners might be benefited a little in our ideation and orientation.

O. I. HESS, M.D., Scottsdale, Pa.

**Queries and Minor Notes**

ANONYMOUS COMMUNICATIONS and queries on postal cards will not be noticed. Every letter must contain the writer's name and address, but these will be omitted, on request.

**EFFICACY OF VACCINES IN PREVENTING INFLUENZA**

*To the Editor:*—Although there is no vaccine recognized as a real prophylactic against influenza, will you kindly say which, in your opinion, is the best one to try, and where it can be obtained? I presume influenza will probably come to this district again, if one can judge by past epidemics. I shall very greatly appreciate your valuable advice on this matter.

J. A. STANDRING, M.D., El Paso, Texas.

Medical Director, Southern Baptist Sanatorium  
for the Treatment of Tuberculosis.

ANSWER.—The efficacy of vaccines in preventing influenza was discussed in an editorial in *THE JOURNAL*, Oct. 4, 1919, p. 1064. It was there pointed out that when the available data on the results attained by prophylactic injections of various combinations of vaccines are carefully analyzed, the conclusion seems unavoidable that their value in the prevention of influenza is unproved. The question may then be raised whether vaccination has any value in preventing respiratory infections either primary or secondary to influenza, or in ameliorating their severity in case they are not prevented. It is understood that there are at present under way in various parts of this country certain investigations which it is hoped will furnish data in answer to this question. One factor in this problem which no doubt will be taken into consideration, but on which there has been thus far but little emphasis laid, is the diversity of the pathogenic organisms which are found in the pneumonias following influenza in different parts of the country. In one region a high percentage of Pfeiffer bacilli is found, and in another a very low one; in other places streptococci predominate and in still others pneumococci, and even in the same community the dominant group of organisms today is often not that of six months ago. It is thus evident that, granting that a vaccine adjusted to one locality should turn out to be effective, it would not necessarily be equally valuable elsewhere. Much has been written, but the number of adequately controlled reports is very small. Thus far hope and imagination have exceeded scientifically controlled facts. Many vaccines come highly recommended by their manufacturers, but very little dependable evidence is submitted to show just how much, if at all, the patient will profit therefrom. If the patient desires to try the experiment knowing it to be such, there is perhaps no serious objection to the trial. Under such circumstances, just which vaccine is "the best one to try" we are not at this time in a position to advise.

**ALCOHOL IN PRESCRIPTIONS**

*To the Editor:*—In writing a prescription for alcohol, and placing the patient's name and the purpose for which it is used on the prescription, is the pharmacist compelled to put a little phenol or other poison in it or can he dispense the alcohol pure? Kindly omit name.

J. A. M.

ANSWER.—Whether denatured alcohol is used in filling a prescription depends on whether the prescription is for internal or external use and on what kind of alcohol the prescription specifies. Alcohol can be prescribed like any other drug. The strength and degree of purity is usually indicated on the prescription. Nonbeverage alcohol, medicated or denatured so as to be unfit for beverage purposes, may be used for filling prescriptions if so indicated. Physicians' prescriptions calling for alcohol must be in duplicate, must be signed by the physician, and must be for a patient under the constant personal supervision of the physician. The prescription must give the name and address of the patient and the condition for which prescribed, and the name of the pharmacist to whom the prescription is to be presented for filling. The physician must keep a record giving a separate page to each patient and must enter it under the patient's name and address, the date of each prescription, the amount and kind of liquors dispensed, and the name of the pharmacist filling the prescription.