

Correspondence

Pressure in Treatment of Hyperthyroidism

To the Editor:—I hasten to suggest the advisability of trying continuous pressure in case of hyperthyroidism. This plan has commended itself to me after a futile trial with other remedies in three cases of well-marked enlargement of the thyroid.

The first case occurred in a woman of 45 who had always enjoyed good health. The tachycardia was present some time before any enlargement of the gland was noticeable and at no time was exophthalmos distinguishable. Nervous symptoms, palpitation and air hunger grew more frequent and pronounced until the patient's life was made quite miserable; every medicinal remedy that had been suggested was tried without any benefit. Operation was advised but the patient did not take kindly to the measure. She was then told to use salt-bags over her neck while in the recumbent position. In two weeks the gland was so reduced in size that it was hardly perceptible; the heart quieted down and the nervous symptoms disappeared.

The second case was in a woman aged 38 who had always had good health. When first seen the patient had appreciable enlargement of the thyroid, marked palpitation, slight protrusion of the eyeballs, restlessness, nervousness, broken sleep, constipation and poor appetite. She was given eight or ten remedies in order of their rank but no benefit followed. Continuous pressure was tried and relief was obtained in a few days and the symptoms finally disappeared; the patient has been free from any trouble for two years.

The last case was that of a woman 36 years old. When I was first called to see the patient, she was pregnant three months, had had incessant vomiting for five days, rapid respiration, moderate tachycardia and considerable enlargement of the thyroid; she had become very weak from the prolonged vomiting. No remedies were given internally. A 2-pound salt-bag was placed over the thyroid gland and in six hours the vomiting had stopped; the respiration returned to normal and by the end of the second day the gland had been reduced one-half and the patient felt comfortable. The salt-bags were used on account of being readily obtained at the grocery store; shot or sand-bags would be just as desirable and probably more convenient of application.

My limited experience with this remedy does not justify any definite conclusion but I desire to report these results that others may try the treatment to determine the extent of its usefulness. The symptoms of hyperthyroidism are so distressing that any measure which offers relief is many times welcome.

The effect of the compression is reduction of the blood-supply to the gland and in this respect acts the same as ligation of the blood-vessels. Cold compresses and elastic constriction of the neck have been mentioned as useful measures to be tried in this affection, but neither of them is very practical. Compresses of cold are not judiciously carried out over any length of time and constriction is uncomfortable and makes uniform pressure around the entire neck.

EVERETT MINGUS, M.D., Marshfield, Ore.

The Most American City

To the Editor:—The President's address, given by Dr. Abraham Jacobi, at the recent meeting of the American Medical Association, is a remarkably strong argument as to the means of combating infant mortality, covering as it does all the phases of prevention of this needless waste of life.

Among the interesting facts brought out are the statistics quoted as to the number of labors attended by midwives in the various cities, Chicago, 86; St. Louis, 75, and New York, 42 per cent.; in these instances, a survival of old-world customs among our foreign-born people. A marked contrast to Dr. Jacobi's statistics as to the practice of midwives elsewhere is the discovery of the Committee on Regulation of Midwifery Practice of the Obstetric Section of the Jackson County (Mo.) Medical Society, with reference to Kansas City. This committee, consisting of Drs. H. O. Leonard, H. L. Hess and H. B.

Coleman, after a most careful investigation and with the aid of the City Board of Health reports, which have been compiled by Dr. Hasbrouck DeLatimer of the department, found that there are in Kansas City only eight midwives who practice and that the number of births reported by them is less than 1 per cent. of the total birth-rate of the city. As the population of the city is about 250,000 and there are over 1,000 physicians registered, the contrast can be very readily appreciated.

These figures coincide with the records of the city school board, which show that we have the largest percentage of native-born school children and the children of native-born citizens of any school district in America, there being according to the statistics of Mr. Hale H. Cook, a member of the school board, less than 4 per cent. of foreign-born children in the ward schools and less than 1 per cent. in the high schools. Los Angeles, it is said, comes next to Kansas City in this regard in its school report. It is doubted if any large city is a close second as to the number of midwives in practice within its boundary.

It must be conceded, these figures being accepted as correct, that Kansas City is the most intensely American metropolis. GEORGE CLARK MOSHER, M.D., Kansas City, Mo.

The Guaiac-Turpentine Test for Occult Blood in the Feces

To the Editor:—In the article (THE JOURNAL, Nov. 4, 1911, p. 1532) entitled "A Source of Error in the Test for Occult Blood in the Feces," by Dr. William A. Newbold, it is stated that watermelon pulp and juice will give a blue color with the guaiac-turpentine blood-test.

It is true that the old Van Deen test, which consisted in mixing the tincture of guaiac with the oil of turpentine or peroxid and adding the urine, feces or stomach contents, will give a blue color reaction with watermelon pulp, or juice, which is identical with the blood reaction. As Weber pointed out in 1893, however, many other substances will give the same reaction, e. g., many vegetables, milk, bile, saliva and pus, as well as several medicines. He, therefore, modified the test by making an ether-acetic acid extract of the feces, to which was added the turpentine and guaiacum. Weber's modification has proved to be absolutely reliable when correctly performed and a blue or violet color reaction indicates blood and nothing else. The test is so well established now that when the guaiac-turpentine test for blood is mentioned Weber's modification is understood, instead of the unreliable Van Deen test.

It was only recently that I was able to procure a specimen of watermelon pulp and prove that it would not give a blue color reaction to the ether-acetic acid extract.

H. W. SOMER, St. Louis.

The Committee on National Public Health Legislation

To the Editor:—In the report of the transactions of the House of Delegates at Atlantic City (THE JOURNAL, June 15, p. 1904), appears the report submitted by the Committee on National Public Health Legislation. The report is signed by various members of the committee, but my signature does not appear.

The explanation of this is that I was not consulted in regard to the contents of the report, was not permitted to see it before it was transmitted, and consequently had no opportunity so sign it.

Of course, this is more a matter of importance from the standpoint of good manners, both official and personal, than it is of ethics, and therefore hardly worth while being concerned about, but inasmuch as the House of Delegates conferred on me the honor of designating me as a member of the national committee, I deem it proper to explain to the members of the House that the failure of my name to appear in connection with the report was not due to any lack of interest on my part in the subject-matter, to failure to participate in the deliberations of the committee, or to any lack of appreciation of the honor of being selected by the House for service on the committee.

G. B. YOUNG, Chicago.