

berculin test has been given, followed by a demonstration of the lesions to be found in reacting animals. Such demonstrations have been given for the last ten years. They have also been held in connection with the Farmers' Course, which is attended each winter by from 600 to 800 farmers from all parts of the state.

The interest which was aroused by these demonstrations and the results which followed in the widespread use of the test by the individual farmers, led to the giving of more public demonstrations by the state authorities in connection with the state fair, with county fairs, at farmers' institutes and at county agricultural schools. For the last five years a considerable number of such demonstrations have been given annually. The demand for them has been far in excess of the available time and funds of the state authorities.

The main phase of the question brought out in connection with these demonstrations has been the financial rather than the hygienic. The farmer was informed of the loss he was certain to incur if the disease were present in his herd and no effort were made to eradicate it. He was told of the danger of purchasing diseased animals and of feeding mixed creamery skim milk to his calves and hogs. He was shown apparently healthy animals, which had reacted to the test. These were slaughtered in his presence and the lesions demonstrated.

An effort has always been made to show animals having the disease in the early stages and also in animals having generalized tuberculosis. These demonstrations have always resulted in a large number of herds being tested. These tests have been voluntary in every case. In some of the counties in which the public demonstrations have been most numerous, from 10 to 60 per cent. of the milch cows have been tested.

At the International Congress on Tuberculosis, photographs of the public demonstrations, given in various parts of Wisconsin, charts showing the number of such demonstrations given annually, and maps of the state illustrating the results of the demonstrations on the use of the tuberculin test, were shown in the Wisconsin exhibit. This line of work has been emphasized because the state authorities have believed that when the farmer is convinced of the economic importance of bovine tuberculosis, he will act, and the hygienic phases of the question will be solved because of his effort to protect himself. Cities then will not have to provide elaborate machinery for the enforcement of the ordinances requiring that cattle be tested, for, to save his own herd, every farmer will enforce it for himself. There is one creamery in Wisconsin, and we presume it has the unique distinction of being the only one in the United States, every patron of which has voluntarily tested his herd.

If bovine tuberculosis is ever to be eradicated in this country it will be through the cordial cooperation of the farmer with the state authorities who will teach him the value of the tuberculin test and its accuracy by such demonstrations as described by Dr. Devine.

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#### Patenting Surgical Devices

To the Editor:—In THE JOURNAL, May 9, 1908, I contributed a paper entitled "Practical Cystoscopy," incidentally describing and explaining therein my latest model of examining and catheterizing cystoscope, named the "universal," which had first been introduced in 1906. In the paper I failed to mention the name of the manufacturers of the instrument, which, in the light of subsequent events, I believe to have been an unfortunate mistake on my part.

In attending the Chicago session of the Association, a month after the publication of the paper, my attention was called by a surgeon friend to several practically worthless cystoscopes being offered for sale by some of the exhibiting dealers under the name, the "Bransford Lewis Universal Cystoscope." We examined a number of these instruments and found them to be inaccurate and lacking in every particular in the attainment of the several objects supplied by

the instruments being made under my direction by the authorized makers, the Kny-Scheerer Co., 404 West Twenty-seventh street, New York City.

Were I alone involved in the consequences of what must necessarily prove unfair treatment of the profession, I should probably have nothing to say about it; but when medical friends and correspondents tell me of having purchased and found wanting such spurious instruments, under the assurance that they were correctly and properly made, I feel that I should be doing them as well as others in the profession a material injustice in maintaining silence, aside from inviting obliquity and condemnation for myself.

In developing an intricate instrument of this sort, in determining the harmonious adjustment of its several parts, the construction and setting of its lenses, provision for irrigation, ureter-catheterization, etc., it is needless to say that numerous conferences, reviews and criticisms must be exchanged between the designer and the maker before a practical, serviceable and satisfactory product can be evolved; and it is obviously impracticable for such conferences to be carried on with several different instrument makers at the same time.

It is necessary, therefore, that one capable and conscientious maker be selected to manufacture and sell the instrument to the advantage of all parties concerned: the author of the device, on whom credit or blame must fall, according to the merit of the product; the physician or surgeon who buys and uses it—with success or failure, for the same reason; the patient on whom it is used, with benefit or injury; and finally, the legitimate manufacturer himself, who is necessarily subjected to the expenditure of much time and money, preliminary to the completion of untried plans and designs. Deviation from such a course can only bring injury, disappointment and distrust to all concerned, *with one exception*, the interloping, unauthorized imitator or maker of the device. Him alone does it seem to benefit, and his profit must needs be short-lived, at best.

The profession itself in its individual membership must be the greatest sufferer from interloping of this kind, and yet it makes practically no provision to protect itself.

Is this not a subject well worthy the attention of those in whose hands the destinies of our Association lie?

In addition to the specific interdiction of the Principles of Medical Ethics (Chap. II, Art. I, Sec. 8), there is widespread and deep-lying sentiment against the patenting of surgical instruments by a member of the profession. It is hardly deemed proper for him to receive monetary compensation for his talent or his pains. The product of these, in the shape of a surgical instrument or device, he must bestow freely and without reservation "for the benefit of humanity."

And yet experience does not prove that the patenting of devices redounds to the injury of humanity, or that their non-patenting promotes humanity's interests. It is a well-established fact that the patenting of a device permits and actually leads to the cheapening of its sale price and without lowering its standard of excellence—the vastly greater number made insuring better workmanship, better materials and better output, justified by the greater commercial field, that are awaiting it.

In my opinion, from whatever standpoint we view it, the same conclusion must be reached: Failure to furnish some means of control and protection for its members by the profession brings about consequences injurious alike to the originator of an instrument, to its legitimate manufacturer, to the member of the profession who buys it, to the member who makes use of it, and to the patient on whom it is to be used, *i. e.*, humanity. The only one who reaps the benefit of such insecure and unreasonable conditions is one deserving no such consideration at our hands, the irregular and not over-scrupulous maker who rushes into the field, makes and sells imitations of an instrument before its maturing and completion, even by its author; modifies it, "improves" it according to his own ideas; uses the author's name if he likes, or if better suited to commercial purposes he discards that name and applies either his own or some other in alliance with him—all in total disregard of the author's directions,

protests, wishes or interests. These are as nothing compared to the interests of commercialism.

In the past ten years I have been through experiences such as these several times and have had no means of recourse, either for myself or for members of the profession.

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#### The Causes and Treatment of Backache in Women

*To the Editor:*—Dr. Leon F. Garrigues, in his article with the above title in *THE JOURNAL*, January 2, has omitted one of the most important causes of backache, namely a peculiar chronic periostitis of one of the spinal processes, generally of a lumbar or sacral vertebra. The affection, according to my experience, is by no means a rare one, but very few physicians seem to recognize it. The characteristics are circumscribed pain on pressure on the affected process. The pain is present especially during the night when the patient is in a warm bed or on awakening in the morning; there is less or no pain during the day while the patient is about. There is slight elevation of temperature in the evening. The pain radiates sideways or downward; never ceases on its own account, but lessens and gradually will cease entirely under treatment for periostitis, which in this affection is one application of two leeches close to the spinal process from which the pain proceeds, and this promptly secures decided relief. The next step is painting the skin surrounding the affected spinal process once a day with tincture of iodine and internally iodid of potassium. According to my experience, this treatment has to be continued for a long period, because the pain, although continually diminishing, will only cease completely in the course of time.

The benefit experienced by the patient can not be overestimated. She is no longer treated for some uterine trouble which in reality does not exist or has nothing to do with the periostitis; and a constant drain on the system, leading to grave symptoms is gradually removed. The affection is easily recognized by pressing with the finger along the spine on all the processes and finding that one and one only of these processes is painful on pressure, and when, as stated, the pain is worse during the night. I have had over thirty years' experience with this peculiar affection, but except Dr. A. Jacobi, who first called my attention to it, I know of no physician who has written or spoken about it. How many women may be treated, often heroically, for uterine troubles, who suffer from nothing but this periostitis. I am not prepared to say anything concerning the etiology, but confine myself to the statement of facts. A. ROSE, New York.

#### Commercial Piracy of Scientific Work

*To the Editor:*—Our attention has just been called to the unauthorized use of an abstract of our report on "Chloral, Isopral and Bromural," as a "paid-reading notice" in the advertising pages of medical journals. In the interest of independent pharmacologic research, we take this occasion to register a protest against this common abuse. When an investigator publishes a report of his work, he makes his results common property, and thus voluntarily renounces his personal rights as to his results; but he does not thereby renounce his moral right to control the uses to which his report may be put. This right must be conceded, not only as a matter of justice to the man who has done the work and bears the responsibility, but also as an essential condition for independent scientific research. There can be no true liberty of research when the investigator must live under the fear that his name will be abused and his work misrepresented. The moral sense of the profession must protect these rights, which cannot be enforced by any other means. This principle applies strongly to the so-called "abstracts" which are prepared by the employes of manufacturers and published as advertisements. We contend that the unauthorized use of any abstracts for such purposes is reprehensible, since the manufacturers must know that such notoriety is repugnant to most scientific workers. The offense is made even more serious

by the fact that such abstracts very rarely do justice to the views of the investigators. An "abstract" is presumed, by its readers, to present fairly the main objects, results and conclusions of the investigator. A fair abstract can only be prepared by one who thoroughly understands the point of view of the investigator. The employe of a commercial house, even if he intends to be honest, cannot be expected to understand the point of view of an independent investigator, since his own training and surroundings are usually so very different. Consequently, these commercial abstracts are, of necessity, partial in nearly every case, partial in both meanings of the word. They misinform the public instead of informing; and they place the investigator, his objects, results and conclusions in a wholly false light.

The present instance illustrates these remarks very forcibly. Our report aimed, above all, to expose the inadequacy of the so-called "scientific evidence" for the claims of a commercial product, and our main conclusions bore on this point. Of this, our principal object, there is not even a mention in the so-called abstract. By this important omission, our attitude toward the subject is totally misrepresented. The whole form and especially the heading of the abstract, is framed so as to imply that the advertisement had been prepared or at least authorized by us—another gross and inexcusable misrepresentation. Pond's Extract is extolled as a certain cure for all kinds of injuries, but the close association of this discredited "patent medicine" with our names (both appearing on the same page of the journal) does not allay the present irritation. It merely illustrates that these methods of advertising are indistinguishable from those which have been so often denounced in the case of "patent medicines."

Manufacturers have often complained that independent investigators do not investigate their products. Do they blame a scientist for harboring small enthusiasm for work which exposes him to the dangers of having this sort of notoriety thrust upon him?

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#### The Expression of O'Dwyer's Tube

*To the Editor:*—Some time ago I performed intubation on a child less than a year old, on account of membranous croup. Repeated attempts to extract the tube on the third day in the usual instrumental way, failed. The tube was loosely held within the larynx and every time the closed jaws of the extractor and the guiding finger touched its head, it would sink down out of reach. I was about to give up further attempts for the time being in order to give the child a little rest, when my obstetric sense asserted itself and Credé's method of placental delivery was applied. I was surprised at the ease with which I was able to express the tube out of the larynx and into the mouth, using my left hand for the external manipulation, while the index and middle fingers of my right hand were in the throat ready to receive the delivered tube.

I thought then that I had struck something original in this matter and reported it at the meetings of some medical societies. Before publishing it, however, I thought best to wait for some more experience with this method. The next patient on whom I had an opportunity to try it was a child about 10 years old. In this case, the method failed, but as the thread was left in and the child was very unmanageable, the method was not thoroughly tried. I felt then, that at least so far as young children were concerned I had discovered an additional, practical method of extubation, and saw visions of a permanent place for my name in the literature on intubation under the title of "Golden's method of extubation."

But my determination to wait for greater experience before giving this method to the world has ruined the prospects for the materialization of these visions. I was greatly disappointed to read in *THE JOURNAL*, Dec. 12, 1908, p. 2082, that this method, under the name of "enucleation," has already

1. *THE JOURNAL*, Aug. 8, 1908, p. 487.