

Abstracts and Annotations

Section of General Practice of the Royal Society of Medicine. *Practitioner* (February 1959), 182, 231.

A number of contributors to the above are reported in the *Practitioner*. Dr D. G. French (Kidsgrove) described his use of tape recorder, electrocardiograph, and oscilloscope in his practice. The last instrument he finds useful to pick out quickly the patients likely to show abnormalities of the electrocardiogram, thus sparing the extra time needed for producing electrocardiographs for all. Dr T. S. Eirmerl (Penketh) described the advantages of the M.R.C. wedge photometer in determining haemoglobin levels with accuracy. The main objection to the instrument was its cost. Dr J. C. Graves (Writtle) gave some of his conclusions about recording medical lectures, and the use of such recordings; and the "miscellany" was completed by a summary of the account by Dr W. O. Williams (Swansea) of an epidemic of Bornholm disease in 1956.

Obesity and Bodyweight in General Practice. J. J. McMULLAN, M.D. *Practitioner* (February 1959), 182, 222.

In a series of 200 male and 200 female patients the incidence of obesity was nine per cent and 27 per cent respectively. This picture is probably typical of most practices, and these patients should be encouraged to reduce so as to avoid the complications of obesity. Weight control during and after pregnancy is particularly important.

But the normal range of bodyweight is wide, and those who are over average are not always obese, and the obese are not always overweight, owing to the different builds of individuals. Tables of standard weight alone are therefore not a sufficient guide, and clinical assessment is essential in studying the condition.

Rabies in Norfolk. P. S. BARCLAY, M.C., M.R.C.S., L.R.C.P., D.A. *The Practitioner* (November, 1958), 181, 626.

Dr Barclay describes how, in Norfolk in 1890, a rabid dog bit ten persons, how they were taken to Paris for inoculations by Pasteur, and the social ramifications of the incident. He gives a historical account of the control of rabies in Great Britain, and he warns of the danger of the reintroduction of the disease if the precautions against it are ever relaxed.

Preventive Treatment of Migraine with Dihydroergotamine. J. N. G. DRURY, M.B., B.Ch. *The Practitioner* (November, 1958) **181, 623.**

Sixteen migraine sufferers were treated with oral dihydroergotamine 10 to 25 drops before retiring. Two of them obtained complete relief, thirteen were much improved, and one failed to respond favourably. Dr Drury stresses the importance of prevention of migraine attacks, and hopes that further work will be done on dihydroergotamine as a prophylactic.

Aneurysm of the Aorta. T. HUGHES, L.R.C.P., L.R.C.S., L.R.F.P.S. *Practitioner* (March 1959) **182, 355**

Three cases of aneurysm of the aorta came to light in Dr Hughes' practice in the space of ten months. He gives details and comments that the condition is not so rare as is generally supposed.

Accidental Coal-gas Poisoning. Loss of Sense of Smell as a Possible Contributory Factor with Old People. CHALKE, H. D., AND DEWHURST, J. R. *Brit. med. J.* (1957), **2, 915-917.**

After drawing attention to the increasing incidence of accidental coal-gas poisoning, especially among older people, the authors describe their testing apparatus and give the results of a series of tests in 61 persons over 65 years old, with a few younger persons as controls. The apparatus included a device for judging reliability of the answers given.

It was found that the sense of smell became unreliable after 65 years of age, but that in younger people there was no deficiency, whether in smokers or non-smokers, and no sex difference.

These results confirm the previous findings in the British Medical Association *Report on Accidental Coal-gas Poisoning* dated November, 1956.
